PEOPLE OVERVIEW AND SCRUTINY PANEL

THURSDAY, 16 JUNE 2022

PRESENT: Councillors Sayonara Luxton (Chairman), Maureen Hunt (Vice-Chairman), Clive Baskerville, Catherine Del Campo, Gerry Clark, Carole Da Costa, Neil Knowles, Gary Muir, Julian Sharpe, John Story, Amy Tisi and Co-Optee Mark Jervis

Also in attendance: Councillor John Baldwin, Councillor Mandy Brar and Councillor Gurch Singh

Officers: Becky Oates, Lin Ferguson, Kevin McDaniel, Lynne Lidster, Suzanne Parrott, Rachael Park-Davies and Anna Richards

ELECTION OF A NEW CHAIRMAN AND VICE CHAIRMAN

Councillor Hunt proposed that Councillor Luxton be Chairman of the Panel for the municipal year 2022/23. This motion was seconded by Councillor Sharpe.

A second proposal was received from Councillor Carole Da Costa, who proposed herself as Chairman of the Panel for the municipal year 2022/23. This motion was seconded by Councillor Tisi.

A named vote was taken on Councillor Hunt's proposal as this was seconded first.

Election of Councillor Luxton as Chairman of the Panel (Motion)	for the municipal year 2022/23
Councillor Sayonara Luxton	For
Councillor Maureen Hunt	For
Councillor Clive Baskerville	Against
Councillor Catherine del Campo	Against
Councillor Gerry Clark	For
Councillor Carole Da Costa	Against
Councillor Neil Knowles	Against
Councillor Gary Muir	For
Councillor Julian Sharpe	For
Councillor John Story	For
Councillor Amy Tisi	Against
Carried	

RESOLVED: That Councillor Luxton be Chairman of the People Overview and Scrutiny Panel for the municipal year 2022/23.

Councillor Tisi proposed that Councillor Carole Da Costa be Vice-Chairman of the Panel for the municipal year 2022/23. This motion was seconded by Councillor Knowles.

A named vote was taken.

Election of Councillor Da Costa as Vice-Chairman of the Panel for the municipal year 2022/23 (Motion)

Councillor Sayonara Luxton	Against
Councillor Maureen Hunt	Against
Councillor Clive Baskerville	For
Councillor Catherine del Campo	For
Councillor Gerry Clark	Against
Councillor Carole Da Costa	For
Councillor Neil Knowles	For
Councillor Gary Muir	Against
Councillor Julian Sharpe	Against
Councillor John Story	Against
Councillor Amy Tisi	For
Rejected	

The result was 5 for and 6 against, so the motion fell.

Councillor Luxton proposed that Councillor Hunt be Vice-Chairman of the Panel for the municipal year 2022/23. This motion was seconded by Councillor Clarke.

A named vote was taken.

Election of Councillor Hunt as Vice-Chairman of the Panel for	the municipal year
2022/23 (Motion)	
Councillor Sayonara Luxton	For
Councillor Maureen Hunt	For
Councillor Clive Baskerville	Against
Councillor Catherine del Campo	For
Councillor Gerry Clark	For
Councillor Carole Da Costa	For
Councillor Neil Knowles	Against
Councillor Gary Muir	For
Councillor Julian Sharpe	For
Councillor John Story	For
Councillor Amy Tisi	Against
Carried	

RESOLVED: That Councillor Hunt be Vice-Chairman of the People Overview and Scrutiny Panel for the municipal year 2022/23.

APOLOGIES FOR ABSENCE

Apologies for absence were received from Tony Wilson.

DECLARATIONS OF INTEREST

Councillor Baskerville stated that he was a Governor at Alwyn Infants School.

MINUTES

Councillor Baskerville asked for clarification of the remit of the new People Overview & Scrutiny Panel.

ACTION: Clerk to send Terms of Reference to all Panel members.

The panel noted the minutes of the Adults, Children and Health Overview and Scrutiny Panel.

IMPLEMENTATION OF HEALTH AND CARE WHITE PAPER

Lynne Lidster, Head of Commissioning, gave a presentation to the panel on adult social care reform with the intention that Members could have more detailed briefings in the future.

The Government had published several White Papers in the previous nine months relating to adult social care which set out an ambitious agenda for change. The Health and Care Act had received Royal Assent, and had four main areas of focus:

- Integration
- Assurance/Inspection
- Charging reforms
- Market sustainability and fair cost of care

Lynne Lidster described how the Health and Care Act would impact the borough by creating Integrated Care Boards and Integrated Care Partnerships in each local area. The Health and Care Act proposed to reform charging for adult social care, including market sustainability and setting a fair cost for care. The current system was means and needs tested with many people paying for their care from their assets. If people were not eligible for publicly funded care, there was no limit on how much they might have to pay privately. The proposals would make the means test more generous and would set a 'cap' on the amount an individual would pay for care in their lifetime.

Councillor Baskerville thanked Lynne Lidster for the presentation and asked whether integration would include computer systems, as there was a frequent lack of communication between services which could lead to frustration. Councillor Baskerville also stated that he would appreciate simplified language as the jargon used in presentations and reports would be hard for an average layman to understand.

Kevin McDaniel, Executive Director of Children's Services, explained that the term integration was used to mean all partners working together. Computer systems working together was not a requirement, but national work was ongoing on creating a single health record, but work had been ongoing for a number of years and was not yet complete.

Lynne Lidster added that there was a system known as Connected Care in place which contained information on an individual which several services could access- for example, an A&E department would be able to access GP and adult social care records.

Councillor Story thanked Lynne Lidster for the presentation and asked which costs would not be covered under the lifetime cap on care costs of £86,000. Councillor Story also asked how much this would cost the council.

Lynne Lidster responded that costs such as food and drink were not covered under the cap. Additionally, anyone wishing to go to a more luxurious care home would have to cover the difference.

Kevin McDaniel stated that the figure of how much this would cost the council was unknown, as it was difficult to assess the future needs of the population. National work was ongoing to determine the value of this project, but this would be difficult to ascertain. The borough had sent feedback to the government, asking them to use a different formula which took into

account the number of care home spaces, as the relative needs formula would be less accurate.

Councillor Del Campo asked when the funding changes would take effect and when the financial implications would be known prior to this date. Councillor Del Campo also stated that it may be worth considering restoring or increasing funding to voluntary organisations that provide support and early intervention in order to decrease the burden on the council.

Lynne Lidster responded that people could start progressing towards this cap on 1 October 2023, with any care paid for before this date not counting towards the cap. Additional funding would be provided to the borough.

Kevin McDaniel stated that the group known as the Integrated Care Partnership, formed of public sector partners and communities needed to set up a strategy that would outline the role that everyone would play, with the intention of enabling health colleagues to divert funds towards this early intervention.

Councillor Carole Da Costa stated that she was happy that CQC inspections were being introduced as she believed that these should have been implemented a long time ago. Councillor Carole Da Costa expressed that it was difficult for a person to go onto continuing NHS care and asked whether closer collaboration would make this process easier to navigate.

Lynne Lidster responded that she was not aware of any changes to continuing healthcare that would come as a result of the Health and Care Act. However, it was within the gift of local authorities and health partners to pool budgets around continuing healthcare, so the partnership approach may bring this conversation to the surface.

Councillor Carole Da Costa replied that she would have hoped that it would be a little easier and less stressful as a result of closer collaboration. Councillor Carole Da Costa also asked if individuals would be moved if they were unable to afford the changes in costs.

Lynne Lidster replied stating that this process doesn't always involve social care as the individual may be self-funded. Lynne Lidster also stated that she was unable to say whether an individual would be moved or not.

Kevin McDaniel stated that the details of what the Health and Care Act would look like in practice still needed to be determined. There was a debate to be held on balancing the needs and the well-being of the individuals and the balancing of the budgets.

Councillor Tisi asked if the food and drink side of the costs was means tested. Councillor Tisi also asked if the cost cap date of 1 October 2023 would apply to everyone regardless of how much they had already paid.

Lynne Lidster confirmed that everything was means tested, and anyone with less than \pounds 100,000 would not pay for the cost of their care. Lynne Lidster also stated that the cost cap date was the same for everybody, with any money paid up until this date not contributing towards the total cost cap.

Councillor Tisi asked whether these people would be more likely to go below the £100,000 figure as they had already been paying for their care, and if so, how many people this was likely to include.

Lynne Lidster stated that the borough knew the number of people funding their own care, but they did not know how much money they had in the bank as this was a private matter. There may have been national modelling on average savings when entering a care home.

Councillor Clarke welcomed the closer integration of the services discussed and emphasised how complex the system was in its current form and how difficult it would be to implement the closer integration.

Councillor Carole Da Costa asked how out of borough residents in care would be funded if they exceeded the cost cap and whether this would be funded by the borough or the resident's home borough.

Lynne Lidster stated that they were currently awaiting guidance on this issue and had expressed their thoughts on what should happen. The current rules were that if an individual had placed themselves in a care home in the borough from an outside borough, the local authority where the care home is situated would provide funding. In the consultation, Lynne Lidster suggested that if a resident in one borough wanted to enter a care home in another borough, they should register with their local authority in order to open a care account, but the consultation document had suggested that the government would not change the current rules.

Councillor Knowles asked if the closer integration of services would lead to decreased pressure on ambulances and hospitals as patients would be able to move out of hospital and into care.

Lynne Lidster responded that this wasn't a particularly big issue within the borough as there were joint teams at hospitals on a daily basis made up of hospital staff and social care staff working to bring people out of hospital.

Councillor Knowles also asked what a key success would look like for this closer integration.

Lynne Lidster stated that prevention would be a great indicator of success and best for residents, encompassing the ability to work holistically across adult social care and different partners.

Kevin McDaniel added that getting patients out of hospital and back to their own homes and living independently would be the ultimate measure of success as it would lead to a better value of life for the individual and would allow the system to be self-supporting.

The panel noted the presentation.

VIRTUAL SCHOOL REPORT

Suzanne Parrott, AfC Virtual School Headteacher, presented the annual report for the AfC Virtual School. Particular successes were outlined, such as Attainment 8 scores which were higher than the looked after national average and attendance, which was lower than the national average for looked after children.

Councillor Sharpe thanked Suzanne Parrott for the report and asked for an explanation on how students were placed into schools and whether students were moved between schools. Councillor Sharpe asked for further clarity on the statistics included within the report, and stated that it seemed as though the children in virtual schools were attaining almost as well as any other child at their school.

Suzanne Parrott clarified that students at the virtual school were taught in mainstream schools, so had two headteachers. The role of the virtual school was to work with a range of professionals to keep the child in their mainstream school, but children would be moved if there was a risk to their safety. If a child needed to be moved, the nearest good or outstanding school closest to their home would be identified and the school would be contacted in order to ascertain whether the environment would be a good fit for the child.

Suzanne Parrott stated that the statistics on attendance and attainment were taken from many different schools. The gap had been closed between children in the virtual school and children who were not, but there would always be children who had been out of school for a couple of years due to personal circumstances which would affect their education.

Councillor Sharpe asked about the impact of the Covid pandemic on the activities of the virtual school, and the impact on the children in terms of lack of education.

Suzanne Parrott stated that there was an organisation that phoned schools every day to ensure that the young person was in school, but this was taken away due to the pandemic. Children with a vulnerability were still able to go into school, which meant that many students in virtual schools could still attend their mainstream school. The virtual school kept a record of whether their education or placement was at risk and monitored the child's progress often. The results in the Virtual School Report were after a year of the pandemic and showed good outcomes despite the challenges posed by the lack of schooling. However, there were concerns over attendance figures which were worse in 2022 than during the pandemic partly due to poor mental health.

Councillor Story thanked Suzanne Parrott for her presentation and asked whether the figure of 93 looked-after children within RBWM was correct. Councillor Story asked for clarity on what was meant by the term special school.

Suzanne Parrott confirmed that this figure, which encompassed all school-age children, would have been correct at the time of the publication of the report on 31 July 2021. Special schools were those who had specialist facilities and provisions in order to accommodate young people with special educational needs or disabilities.

Councillor Story asked for further explanation on what was meant by alternative provisions and asked about the students who were stated to be in schools within the borough which required improvement.

Suzanne Parrott stated that this was used to mean many different forms of education including forest schools or home-schooling. Alternative provisions were usually short-term arrangements, as the goal was always to have children in full-time education. With regards to the students in schools requiring improvement, they were likely to still be in the same schools with additional support being provided to the school. Risk assessments were required for these schools. Stability was a key factor for children in virtual schools, so a risk assessment

would usually be put in place to support them within the current environment. In the current year, no children had been placed in schools requiring improvement.

Kevin McDaniel stated that 95% of schools within the borough were either good or outstanding, with 5% requiring improvement or worse. If given the choice, children would be placed in a good or outstanding school. When it came to children in schools which required improvement, Kevin McDaniel stated that children gained more from staying in a stable environment within their friendships than being moved to a new environment.

Councillor Carole Da Costa asked how the attachment in schools programme could be extended to all schools within the borough.

Suzanne Parrott responded that the programme was offered to schools starting in 2021 with 42 schools on the programme in the first year, largely through partnering with educational psychologists within the schools. The programme is delivered to school governors and teachers, and then the teachers deliver it to the parent body. The programme is then delivered through PSHE lessons in schools. Well over 80 schools had signed up to receive this training, and Suzanne Parrott welcomed the further advertisement of the programme.

Councillor Tisi asked about the impact of coming into care earlier on the impact on later educational outcomes and asked about the reasoning behind the extension of the virtual school to cover children in need and children on protection plans. Councillor Tisi asked about the challenges that this may pose when the children are dealing with challenges at home.

Suzanne Parrott explained that the extension of the Virtual School had been underway for a number of years and was an effort to intervene earlier on in a child's life in an effort to keep them out of care. Applying a multi-agency approach would build communication links in order to facilitate this goal. Providing training and support to social workers would be a greater benefit of this programme and would be largely similar to the ongoing work but including agencies which were not currently involved in the process.

Furthermore, the Virtual School had been working on gathering attendance and exclusion information at the request of the Department for Education. The Attachment Aware Schools award addressed both issues by lowering exclusion and improving attendance. A new assistant headteacher had been recruited along with a lead teacher with a specialism in trauma-informed practice.

Councillor Tisi asked whether the lack of permanent exclusions was a result of Virtual School policy or a testament to the work of the School.

Suzanne Parrott stated that none of the Virtual School students had been permanently excluded from any of the mainstream schools they were educated in, which represented a culture shift away from permanent exclusions.

Mark Jervis, Co-Optee, asked how the referral process for Children and Adolescent Mental Health Services (CAMHS) worked in the Virtual School environment, and whether the Virtual School had the resources to manage the process.

Suzanne Parrott explained that it was the social work team who would refer children to CAMHS, but the Virtual School introduced the strengths and difficulties questionnaire for schools. This worked out how many difficulties a young person was dealing with and looked at

reducing these difficulties over time. There was a system in place where the questionnaires were uploaded alongside the foster carer's view of the young person as well as the young person's own perception of themselves. This triangulation enabled a more-well rounded approach to the mental wellbeing of the young person. The school had also invested heavily in education psychologists to support the young people in the Virtual School.

Lin Ferguson, Director of Children Social Care and Early Help, stated that sometimes children needed earlier intervention than CAMHS, and the borough was developing a rang of initiatives for young people. For example, mental health workers were in 14 schools within the borough, a 'getting help' service was in place to help children with emerging mental health issues and there were esteem groups in place to help children with low self-esteem. These were aimed at helping children who did not need the full support of CAMHS.

Councillor Del Campo thanked Suzanne Parrott for the report and presentation and stated that she felt inspired after reading. Councillor Del Campo referred to a case study within the report which explained difficulties with filling out forms and asked how this could be avoided in the future.

Suzanne Parrott stated that the Department for Education sent through resources for the previously looked after post as this was needed and was a benefit as this was aimed at providing help. There was a funding chasm with EHCPs and SEN, so decisions with regards to who could be funding were very tough to make.

Kevin McDaniel added that it was not within the borough but stated that policies were different in each area, and a process needed to be followed in order to gather the right information to make effective decisions.

Councillor Del Campo asked if there was a particular risk with regards to resourcing.

Suzanne Parrott explained that the Virtual School had about 9 different funding streams that were agreed and didn't feel that resources would be a particular concern.

Councillor Knowles stated that children had amazing emotional resilience and it was important to remind everyone that some remarkable outcomes could be achieved. To that end, Councillor Knowles asked for success stories of pupils who were at the Virtual School.

Suzanne Parrott echoed Councillor Knowles's sentiments and stated that the pupils were an asset to any school or organisation. Suzanne Parrott described one student who would be studying Medicine at Oxford, another who had completed a teaching degree, and another who was a dentist.

Councillor Clark welcomed the report and asked why the Attainment 8 numbers were slightly lower for Key Stage 5 students in the borough.

Suzanne Parrott replied that the Virtual College was in its infancy and the changes that would be seen in a year were limited but hoped to see ongoing improvement.

The panel noted the report.

RESIDENT SCRUTINY SUGGESTION ON BREASTFEEDING

Rachael Park-Davies, Associate Director for Early Help and Family Support, introduced the resident scrutiny topic which looked into making RBWM a breastfeeding friendly borough. Economic and public health implications were explored as part of the report. The borough already had strong support for parents who chose to breastfeed, with in-house health visiting services, breastfeeding cafes, and a good take-up of breastfeeding. Nationally, 81% of parents initiate breastfeeding which then falls to around 60% after 8 weeks. During the pandemic, many new parents gave up breastfeeding as they didn't have the support from their community they normally would. At the last quarter, women breastfeeding partially or completely by 8 weeks was up to 73% locally.

RBWM did not have breastfeeding friendly status like other areas, which the resident scrutiny topic aimed to help change. There were a number of health benefits associated with breastfeeding, including lowering the incidence of type 2 diabetes. The wider benefits of breastfeeding included reducing inequalities in families from lower socioeconomic groups, emotional benefits, improved oral health, reduced respiratory and gastrointestinal infections and a reduction in obesity.

Becoming a breastfeeding friendly town would focus on working collaboratively with local businesses providing food and drink and asking if they would display signs in windows, as well as not discouraging parents from breastfeeding. Other areas which had been designated as breastfeeding friendly had approached businesses and developed a breastfeeding strategy which included a website.

Councillor Tisi asked if there was data available for trends in breastfeeding within RBWM, and whether there was any data on breastfeeding beyond 6-8 weeks. Councillor Tisi also asked if the responsibility for the current provisions, run by health visitors, was a strain on the service. Furthermore, Councillor Tisi wished to add that there were a number of organisations within the borough providing support, including NCT and breastfeeding cafes in Windsor.

Rachael Park-Davies stated that she would be able to obtain this data for Councillor Tisi. The current figure of 73% was the highest it had ever been which was in part due to the work of health visitors. Data beyond 6-8-weeks was not measured as it was not a requirement. Rachael Park-Davies went on to clarify that the health visiting service was made up of a skill-mixed model, including nursery nurses. Health visitors were well-placed to provide this support as they visited families between birth and the 6–8-week mark.

Councillor Del Campo emphasised that parents should have the choice to breastfeed in private if they wished to.

Rachael Park-Davies echoed this sentiment and added that breastfeeding was a matter of choice.

Councillor Carole Da Costa stated that she believed this topic was about education and removing the sexualisation of breasts. By replacing this viewpoint with the view that this part of the body's main function is to feed an infant would mean that other parts of society would fall into place more easily. Councillor Carole Da Costa urged women to breastfeed their babies for six months as this would serve as an investment in the health of their child, but this would require a change in the environment and the public place to make mothers more comfortable doing so. Lower socioeconomic groups should be focussed on and invested in as breastfeeding would make the biggest difference. Increasing breastfeeding figures would be a great asset to the borough.

Councillor Sharpe asked about the wider implications for the resident scrutiny topic and what this would mean in practice.

Rachael Park-Davies explained that this would mean starting small and talking with local businesses and changing the culture towards a community collective responsibility.

Councillor Sharpe asked about the extent of the commitment for the borough and local businesses.

Rachael Park-Davies stated that public health would be working together with economic teams to approach businesses and ask if they were interested in becoming a breastfeeding friendly business.

Councillor Sharpe stated that he thought this needed to be looked at in further detail.

Anna Richards, Head of Public Health, thanked Rachael for the report and stated that this was an exciting opportunity to work with the economic growth team within RBWM to think about the role that businesses play within the borough with regards to the health and wellbeing of local residents.

The Panel agreed with the recommendation as set out in section 1.1 of the report.

WORK PROGRAMME

Councillor Tisi stated that it would be beneficial to be made aware of the remit of the new People Overview and Scrutiny Panel.

Councillor Del Campo asked if scoping documents were still required in order to bring an item to the Panel.

The Chairman confirmed that this was the case.

The panel agreed to discuss the work programme offline.

The meeting, which began at 7.00 pm, finished at 9.40 pm

CHAIRMAN.....

DATE.....