

People Scrutiny Committee – 30th January 2018

Public Questions

Question from Mr Webb to the Executive Councillor for Children & Learning

Question 1

“CP 3.10 Percentage of Initial Child Protection Conferences that took place with 15 working days of the initial strategy discussion was 58.7% in September and a monthly and yearly target for 2018 was 90 %.

Question Why was it 58.7% in September 2017 and what steps have the Conservative Southend Council put into practice to raise the percentage and increased the number of Child Protection Conferences within 15 days?”

Answer

Data reports of ICPCs held between 1st April 2017 and 30th September 2017 indicates that 60 children were recorded as being subject of ICPC and of these 35 are recorded as having had an ICPC held within the 15 day timescale from Strategy Meeting to ICPC. It should be noted that 40 were completed within 20 days (66.6%).

From reviews of the delays, there were a number of reasons. These include a delay in notification for an ICPC; capacity to hold a meeting and some cases where it was an informed management decision to delay the conference to ensure that family and key agencies were able to attend. In addition some cases referred were for pre-birth children where the pregnancy was felt to be at too early a stage to progress to conference, but planned for a slightly later date.

There is evidence of improved timescales. Stats for September show 100% of ICPC's held in 15 working days and November 95% however there remain challenges in achieving the balance between holding meetings in timescales and ensuring that the decision to hold an ICPC is based on high quality assessment for children and families and the target of 90% will not be achieved this year.

A clear tracking sheet is now reviewed on a weekly basis by the Group Manager who has taken over responsibility for Assessment & Intervention to ensure that where a strategy meeting is held, decision making is concluded in a timely manner. Details are now being collected as to how many took place with 20 and 25 days, and over recent months virtually all have taken place within 25 working days. The Group Manager is now undertaking a piece of work to review every child's case

which has gone to ICPC since the beginning of April 2017, to ensure that any issues have been clearly resolved within the new processes developed over the past 4 months. This will enable changes to practice to ensure better compliance in 2018/19.

It should be noted that we need to ensure that children move through to ICPC in a timely manner which ensures that they are safeguarded. This will not always be best met by meeting the 15 day target but clear management oversight is now recorded on the file to show decision making where a delay best meets the need of the child.

Question from Mr Webb to the Executive Councillor for Children & Learning

Question 2

“In the first phase of the school catchment what was the number filled in the online consultation compared to the second consultation of number and percentage and numbers filled online and paper. What does the portfolio think of the response in each phase from residents and other stake holders?”

Answer

Thank you for your question Mr Webb.

In the initial Listening and Engagement phase, there were 434 residents and other stakeholders who completed the survey this includes both online and paper responses. In addition to this there was 5 public interactive sessions where 46 out of a possible 75 people attended. During this period we also had 337 individual email enquiries. Many of the public session attendees, were also those that had emailed as well as those that responded to the survey. This early engagement exercise focussed upon 5 community schools and 4 own admission authority schools and the information obtained from this exercise formed the model for the final consultation.

In the formal consultation period there were 291 residents and other stakeholders who completed the consultation survey; of which 6 were paper submissions; 69 emails were received (of which 18 also submitted a form). In addition to this 2 public sessions were held and attended by 45 people providing the public with an opportunity to explore the information, and ask questions. Although the statistical analysis in the evaluation document refers to the survey responses, all views were considered and the themes provided throughout the document were compiled from all responses. The formal consultation focussed on all 10

community schools. Own admission authorities undertook their own consultation. The results of these schools consultations have not been included in the consultation evaluation. The responses of the formal consultation represented less than 3% of individual ward populations of 24 to 64 year olds.

Full details of the outcomes of the formal consultation appear in appendix 1 of the published report.

Overall there was a 33% decrease in people responding to the surveys from the initial engagement exercise to the formal consultation.

I am heartened by the overall number of responses, especially for the schools and communities affected South of the London Road in Leigh. From the outset, I have made it clear that I, and the Council, are here to listen to the views of the community, and by conducting two large school engagement and consultation sessions, I think we have met this commitment.

I hope that you, and residents can see that the Council has taken this emotive exercise very seriously, and conducted consultation significantly over and above the required minimum. As a result of this exercise, and additional information that has emerged during the consultation, you will see from this evenings papers that I have indeed listened and engaged with the affected communities in the recommendations I am making.

Question from Mr Fieldhouse to the Executive Councillor for Health & Adult Social Care

Question 3

“Council officers have identified many inadequacies and omissions of detail in the Mid & South Essex STP's plans, including investment proposals for the reconfiguration of acute hospital services that are described as 'weak', and the provisions for transferring seriously ill patients between hospitals as 'unclear and poorly defined' - both of which are central tenets to the plans' operation. Additionally, three of the five CCG's GP chairs, at a meeting of the Joint STP CCG Committee in late November, chose not to vote in favour of the plans' progression to public consultation in their current form. Does the relevant portfolio holder believe that the STP's proposals were developed sufficiently to be put out to public consultation or does she think the consultation should be halted and not restarted until competent plans have been drawn up from which meaningful responses from the public can be gathered?”

Answer

As the Executive Councillor for Health and Adult Social Care I welcome the opportunity to participate in public consultation with regards to the STP. As evidenced in the Cabinet paper we, as a Council, have conducted a rigorous review of the STP proposals and my findings are clearly laid out. I propose that the plans for Stroke, Primary Care / development of Localities and Transport in addition to a number of other issues are further clarified by the STP.

My report acknowledges the status of the proposals but I equally acknowledge the opportunity to consult and further inform the proposals – this is what public consultation is all about. I believe that we must engage with this process to contribute to finding the best outcomes for our residents.

Question from Mr Fieldhouse to the Executive Councillor for Health & Adult Social Care

Question 4

“With reference to 8.3 in the Officer’s report, does the relevant portfolio holder consider the Mid & South Essex Sustainability & Transformation Partnership to be a statutory NHS body even though the STP has no legal underpinning in statute and is not publicly accountable?”

Answer

The officer’s report does not make reference to the Sustainability and Transformation Partnership (STP) as a statutory NHS Body. The NHS bodies which are consulting on the STP proposals are the five NHS Clinical Commissioning Groups in mid and south Essex, which are statutory bodies, through their Joint Committee.