

**EPPING FOREST DISTRICT COUNCIL  
NOTES OF A MEETING OF CHILDREN SERVICES TASK AND FINISH PANEL  
HELD ON TUESDAY, 25 JANUARY 2011  
IN COMMITTEE ROOM 1, CIVIC OFFICES, HIGH STREET, EPPING  
AT 7.00 - 8.30 PM**

**Members Present:** Mrs L Wagland (Legal and Estates Portfolio Holder) (Chairman), , Ms R Brookes, Mrs P Brooks, Mrs T Cochrane and Mrs R Gadsby

**Other members present:**

**Apologies for Absence:** Ms J Hedges

**Officers Present** J Chandler (Assistant Director (Community Services and Customer Relations)) and A Hendry (Democratic Services Officer)

**13. SUBSTITUTE MEMBERS (COUNCIL MINUTE 39 - 23.7.02)**

The Panel noted that there were no substitute members.

**14. DECLARATIONS OF INTEREST**

No declarations of interest were made.

**15. NOTES FROM THE LAST MEETING**

The notes from the meeting held on 5 November 2010 were agreed as a correct record.

**16. EXCLUSION OF PUBLIC AND PRESS**

**RESOLVED:**

That, in accordance with Section 100(A)(4) of the Local Government Act 1972, the public and press be excluded from the meeting for the item of business set out below as it would involve the likely disclosure of exempt information as defined in the paragraphs of Part 1 of Schedule 12(A) of the Act indicated and the exemption is considered to outweigh the potential public interest in disclosing the information:

<u>Agenda Item No</u>	<u>Subject</u>	<u>Exempt Information Paragraph Number</u>
6	Update on West Children's Commissioning and Delivery Board	3

**17. UPDATE ON FURTHER REVIEW OF WEST CHILDREN'S COMMISSIONING AND DELIVERY BOARD (PREVIOUSLY WEST ESSEX CHILDREN'S TRUST BOARD)**

The Chairman and the Assistant Director Community Services advised the Panel that they had attended a meeting of the West Essex Children's Commissioning and

Delivery Board on 20 January 2011. Prior to this meeting, the Assistant Director had been part of a Task and Finish group looking at the Board's functions and specifically what had worked well and what hadn't.

This group was made up of representatives from a range of partners and the discussion had been frank and honest. In terms of strengths, it was agreed that there was a willingness amongst the Board to improve children's and young people's services, but noted that the Board had not been effective in doing this. The key concerns raised at the group had been the lack of influence that the Board had at Essex level, and particularly in relation to commissioning in Essex. It was also agreed that as financial resources were only available from NHS and ECC, the two largest organisations, they determined the commissioning rather than it being a partnership agreement. It was noted that the District's had a very good understanding of the gaps in provision, based on local intelligence and the most effective methods of delivery and that these views should be represented through the Board at Essex meetings.

The Board was also far too large which prevented any decision making and effectiveness. A series of recommendations were put forward to address the issues discussed, including: a proposal to reduce membership of the Board, keep it district focused, ensure that the local Board kept in touch with ECC and that all Board members be kept aware of current undertakings and proceedings.

At the meeting on 20<sup>th</sup> January the proposals had been put forward and although a couple of Board members had contested the proposed membership reductions the proposals had been well received. It was reported that the membership was now down from 40 to just 19. There were concerns that there should not be providers of services as well as a commissioner of services on the same Board; so the providers would now not attend. District Members would no longer be on the Board, but would be representatives on key focus groups. The District Commander of Police and the Essex Probation Service representative would remain on the group.

The Task & Finish group also looked at the frequency of the meetings, noted that a Business Management Group would be established to sit as a small group beneath the Board and that time limited focus groups were also to be established. All the above were agreed apart from the membership. However, it was noted that the Board would be facing a range of challenges due to the significant reductions in funding available across Essex. However, if the Board was to become the 'real' commissioning board for West Essex, this would be a more satisfactory way of doing it and ECC were finally getting the message.

The Assistant Director then updated the Panel on Children and Adolescent Mental Health Services. This was one of the priorities of the West Essex Board, part of their four tier provision, from mainstream children to those 'in crisis'. The four tiers of this service were broken down as:

- Tier 1 Providing low level mental health support;
- Tier 2 Specialist practitioners helping individual children;
- Tier 3 Specialised multi-disciplinary services; and
- Tier 4 High intensity level services.

A high percentage of mental health issues are found with children living in deprivation and disadvantage, although certainly not all. In Essex, around 30,000 young people fall within tier 1 and 2 services. There was still an unmet need in Essex and significant budget cuts due to come from the government would increase these. The problems that would be encountered within tier 1 would be a complete lack of

resources to provide locally delivered interventions and funding for the necessary structures to ensure effective collaboration between schools. Within tier 2 there was £3.2 million available across Essex through area based grants. For tier 3 there was £15million available. This was for high intensity one to one support which was very expensive. Under tier 4 there was only £1million available. The Panel noted that there were 6,000 individual contracts under tier 1 services; 5,000 under tier 2; and about 120 in tiers 3 and 4 across Essex.

There were examples of shipping children to care homes outside Essex, some as far away as Hull.

It was also noted that there was an increase in severe mental health problems, but the only figures available were from 2005-08. The reduction in the early intervention budget (Tier 1) was very important and the Panel was not sure what the consequences would be, as tiers 1 and 2 were essential for early intervention and to prevent individual problems from getting worse.

#### **18. ESSEX COUNTY COUNCIL REVIEW OF YOUTH SERVICES PROVISION**

The Assistant Director Community Services, Julie Chandler, advised that a report had gone to the ECC Cabinet who had agreed a £7 million reduction from Essex Integrated Youth Services Budget. This will mean a reduction in provision of youth services for this district and as a result it may mean the closure of one youth centre.

#### **19. LOCAL PRIORITY FUND FOR YOUNG PEOPLE AND POTENTIAL REDUCTIONS IN LOCAL FUNDING**

Noted that EFDC would lose the 'Match' funding for Dads and Children initiative, but that this had already ceased to operate. All other LPF projects would continue to be funded through to the need of their contracts.

#### **20. POTENTIAL IMPACT OF REDUCED LEVEL OF LOCAL PROVISION FOR YOUNG PEOPLE**

The Panel noted that added to the youth services cuts, funding currently provided towards reducing 'NEETs' (Not in Education, Employment or Training) would be reduced in 2011/12. This was because the District was not now as priority due to the success in reducing and maintaining the numbers of young people falling within NEET.

The impact of the withdrawal and reductions in funding available to the district for provision of young people's activities could be a significant increase in anti social behaviour and youth nuisance, an increase in cases of child protection and in the long term, the need for significantly higher levels of funding needed to deal with the fall out in this provision.

The Panel suggested that these were core front line services and wondered why the budget had been cut. Questions needed to be asked about alternative funding and how could this be addressed.

**21. FUTURE FUNDING OF CHILDREN'S AND YOUNG PEOPLE'S INITIATIVES**

It was suggested that:

- There was a need to look at alternative funding opportunities by applying for grants etc.;
- There was also a need to work in partnership with the voluntary sector to attract funding streams inaccessible to the Council.
- Local people would need to put in their time and money into keeping their local services going, but where would the energy and enthusiasm come from to contribute to this “big society” as most people work and have little spare time;
- Securing funding was very difficult, partner agencies needed to know the right ‘jargon’ words to use in their applications. They needed people with experience to support them, and that this support would need to come from the Council;
- The funding cuts needed to be explained to local residents and that if they still wanted the same level of local provision they would need to take responsibility for some of the smaller areas of funding;
- Our recommendations for Children Services would be to maintain services to keep the NEETs levels down;
- Perhaps we need to up our profile and publicise this need with the local press;
- The police did not have the funding for Paso’s to keep up their profile in the community; Officers should identify priorities on what could be reinstated, in case funding could be found and Should be mobilised and ready to apply for funding to support local health and well being initiatives when NHS funding is devolved to local GP’s.
- The Panel would like to express their concern in the reduction in youth services although this had been covered in the officer’s letter to the ECC Portfolio Holder sent at the end of last year (copy as distributed at the meeting)

**22. FUTURE GP COMMISSIONING OF HEALTH IMPROVEMENT SERVICES FOR CHILDREN AND YOUNG PEOPLE**

It was noted that:

- The Panel commented that the Council should look at fostering greater co-operation with GPs.
- Community Services Officers were already developing ‘model packages’ of work to present to GP’s for local commissioning. These would include projects such as the Trampolining programme for children with low self esteem and confidence.
- The NHS was not sure as yet how GP services were going to work.

**23. INVITATION TO ESSEX COUNTY COUNCIL TO MEET WITH PANEL FOR QUESTION AND ANSWER SESSION**

The Panel agreed to invite ECC Councillor Ray Gooding and appropriate officers to their next meeting. They would like to formulate most of their questions beforehand and let Essex representatives have advance knowledge of them so they could prepare detailed answers.

**24. REVIEW TERMS OF REFERENCE AND WORK UNDERTAKEN BY PANEL TO DATE**

Terms of Reference:

1. The Panel would need to pull together their information gathered so far.
2. This had essentially been done and needed to be put together for the final report.
3. This was still a work in progress and the final outcome would not be known until after April 2011.
4. This had essentially been done and needed to be pulled together for the final report.

The panel also needed:

- to raise their concerns about funds for tiers 1,3 and 4;
- an assessment of what funding the Council would have;
- to secure resources from other funding streams if possible; and
- to assess partnership working with voluntary groups.

**25. TIMETABLE FOR PRODUCTION OF REPORT FOR OVERVIEW AND SCRUTINY COMMITTEE**

A draft report needed to be done before the Panel met with the Portfolio Holder from ECC and then to amend it after that meeting had taken place.

**26. DATE OF NEXT MEETING**

Julie Chandler to arrange a meeting with ECC Councillor Gooding and Officers for some time in March. New meeting date to be circulated to members when known.

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