1. **Minutes of Last Meeting and Matters Arising**

The minutes of the meeting held on 7 July 2014 were accepted as a true and accurate record of the meeting. There were no matters arising.

**Rotherham Report**

Eoin Rush updated Board members on the key messages from the enquiry into child sexual exploitation (CSE) in Rotherham over the last ten years. The report, the third commissioned by Rotherham Council, highlighted the history of concern around CSE and detailed some alarming and shocking statistics. The report estimated that 1400 children and young people were sexually exploited over the ten year period, and the report criticised the leadership of the local authority for suppressing the first report, and the local authority and Police for not responding to the second report.

Eoin Rush reported that in York there is a county-wide strategic group. The police are aware of “hot spots”, and services in the city are focused on these and wider CSA issues. Whilst it is anticipated that the current media attention around CSE could result in a significant increase in referrals to children’s social care, the service is well placed to respond, with additional support identified should it be required. Work is also ongoing with partners to improve the quality of referrals so that children and
young people receive the best response. The Safeguarding Board is overseeing work around CSE, and Eoin Rush reassured Board members that there is no complacency in York. A county-wide strategic action plan is in place and this is regularly reviewed. It was agreed that child sexual exploitation should be a future agenda item.

Simon Westwood arrived at 9.50am.

2. **Trust Update**

Judy Kent highlighted the following from the Trust Update:

- The “No Wrong Door” conference at York Racecourse has been moved from 14 October to 4 November 2014. Partners were asked to support and publicise the event.
- The YorOK Board membership and terms of reference will be reviewed at the end of the year.
- Following the resignation of Garry Jones, York CVS, Rosy Tebbutt, Head of Operations, will attend YorOK Board meetings.
- Partners were asked to forward any comments to Judy Kent regarding the priorities identified in York’s refreshed Equality Scheme. It was agreed that the YorOK Board should look at the Equality Scheme from a child’s point of view, and it was agreed that this should be a future agenda item.

Tricia Head arrived at 9.55am.

3. **YorOK Performance Monitoring**

Jon Stonehouse reported the following key performance headlines:

**Priority 2.1: Enjoy Family Life**

- The number of children subject to a child protection plan has steadily and safely reduced.
- The number of Looked After Children is slightly higher than the target at 220.
- Projected increases in York’s population may impact on the number of Looked After Children in the city.
- The national focus on child sexual exploitation may impact on services.
- The Council’s Child In Need Service is currently being reviewed and details will be sent to Board members for comment.
- The Troubled Families programme is doing well, with 75% of the 315 families targeted in phase 1 having “turned around”. Phase 2 sees the criteria broadened so as to engage 1000 families. The broader criteria will include not only the existing criteria but a focus on health, in particular mental health, and inter-familial abuse. This widening of the criteria will enable colleagues to work with a wider range of families, including those with younger children. The enhanced challenges liked to data, performance and outcomes were noted in this context.

**Priority 2.2: Extra Help**

- The number of CAFs/Family Early Help Assessments remains relatively static but low, and increasing the number is a priority for the coming year. There will be a focus on CAF assessments at the forthcoming “No Wrong Door” conference.
- The recent Peer Challenge of referral and assessment arrangements described early help approaches as “emerging”, however early help is well-established in the city. It was agreed that work is needed to define early help and establish how all partners contribute to it.
- The Ofsted thematic review of early help in January 2014 highlighted the need for more, consistently high quality, early help assessments.
Nationally, there has been a dip in KS4 results, but York has done well, being joint top in the region. However, "narrowing the gap" remains an issue at both KS2 and KS4, but the York 300 Pilot will provide additional focus to KS2 pupils during the 2014/15 academic year.

Some time-limited work in some wards has been undertaken around obesity, and the Healthy Weight Active Lives Steering Group is working towards reversing the trend of increasing BMI in children and young people.

**Priority 2.3: Good Mental Health**

- The CAMHS Strategy action plan has been completed.
- Despite good resources for social and emotional health, this remains an area of concern. A recent Public Health England mental health profile showed an increase in self-harm amongst younger people, with data showing that the largest increase by age was in the 15-17 bracket for females. The CAMHS Executive is producing a plan to tackle this.
- The "Stand Up for Us" survey for Years 4, 5, 6 and 8 pupils has highlighted some progress in terms of the number of pupils reporting that they have been bullied but also some issues. It is imperative that we continue to listen to what children and young people are telling us.

**Priority 2.4: Strong Economy**

- Local data as at the end of March 2014 indicated that 4.8% of Years 12-14 young people were NEET (aged 16-18). The local NEET figure improved throughout the year and York is ranked joint second best for NEET rates in the region.
- The impact of the transformation programme in the youth service will need to be monitored to identify the impact on the NEET figures.
- The positive NEET figures for 16-18 year olds mask the poor NEET rate for those young people 18+, for whom there is no provision.
- Job Centre Plus has analysed the features of 18+ unemployment, and emotional health and wellbeing has been highlighted as an issue. Many of the unemployed young people in this age range have a criminal record, and there is a need to support them earlier.

Simon Westwood queried the timeline for ensuring more health assessments for looked after children are completed. It was noted that completion of health assessments is being prioritised by school nurses, who are aiming to have them completed by September 2014. The strategic partnership for looked after children is monitoring progress.

4. **Safeguarding Update**

Simon Westwood noted the following:

- The Annual Report had been completed, and both the summary and longer version are available.
- The “Domestic Abuse Themed Governance Summit to Inform Future Commissioning for Children, Families and Adults at risk” was held on 21 July and there will be a day for practitioners on 24 November. Feedback about the events should be forwarded to Simon Westwood.
- The Joint Protocol has been finalised and signed off, and will provide a clear framework for accountabilities between the Safeguarding Board, Health and Wellbeing Board and the Children’s Trust.
- There has been good linking with another local authority around notification of a serious case with former links to York. York will contribute to the learning lessons review and learning will be shared in the region.
Areas for Development

- The Clinical Commissioning Group Assurance Report has been withdrawn but will be available for the October Safeguarding Board meeting.
- The joint protocol on missing children needs to be refreshed.
- A compact to clarify the role of CVS with the Safeguarding Board is required.

Next Steps

- The Annual Report is currently being printed and will be available next week.
- Learning from the Peer Challenge of referral and assessment arrangements needs to be followed up.
- The Safeguarding Board development day for Board members and the Annual Meeting will take place on 22 October.
- No agreement has yet been reached with partners in order to resolve the budget issues within the Board.
- A Communication Strategy was agreed at the last Board meeting. Following visits to frontline staff, Simon Westwood has identified the need to ensure staff are aware of, and understand, the work of the Board.

Cllr Looker noted the Board’s excellent conference on neglect and suggested that a task group, chaired by Jon Stonehouse, was needed to ensure key issues are progressed. There is a need to commission a strategic analysis of the level of neglect in the city, and staff and members of the public also need reminding of the signs of neglect, so that they can identify risks.

Jon Stonehouse welcomed the Board’s five priorities: Early Help, Neglect, Child Sexual Abuse, Domestic Abuse and Children Who Go Missing, and noted the need for clear definitions, protocols and procedures.

Simon Westwood added that the Rotherham report would be an agenda item at the next Safeguarding Board meeting so that key messages could be understood. He will also be looking back to check whether there are any historical issues in York that we do not know about and whether lessons have been learnt from historical Serious Learning Reviews. It is important that the Safeguarding Board challenges and asks for evidence rather than just accepts reassurances. He noted that the prognosis for children who experience child sexual abuse is bleak and that even with the best support, their prognosis is very poor. It is far better to prevent CSE and whilst there are no major issues of CSE in York, everyone needs to be doubly conscientious. Cllr Looker asked that CSE be a future agenda item.

5. Health & Wellbeing Strategy Refresh

The York Health and Wellbeing Strategy 2013 – 2016 is being reviewed to update the operating context and the actions for the next two years. Board members were asked to consider whether the vision is still relevant and whether there should be any new priorities or whether any existing priorities required a greater emphasis.

Board members identified the following priorities at the meeting:
- a whole family approach to assessing need
- addressing the needs of adult parents in order to improve outcomes for children
- alcohol abuse
- domestic abuse
- obesity
- CSE
- health needs of LAC/CIN (health assessments)
- Troubled Families

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• NEET
• better join up around mental health services
• better integrated commissioning and planning arrangements, including for health visiting and how this will link to school nursing
• being happy

It was suggested that the strategy should also include positive aspects, state that York is a good place for children and young people to grow up and present performance data positively, for example, “no child leaves with nothing”. Board members were asked to submit any further priorities to Judy Kent, who will then forward them to Helena Nowell prior to the Health and Wellbeing Board meeting on 22 October.

Jon Stonehouse noted that Leeds was a child friendly city and that York was proposing a Festival of Fun for children in 2015. Nik Streatfield suggested Board members look at the Action For Happiness website: http://www.actionforhappiness.org/, and Peter Quinn noted that the city’s universities had resources that were often overlooked but which could be accessed by all partners.

Paul Edmondson-Jones left the meeting at 10.35am.

6. Health and Wellbeing Profile – 14-25 Age Group

Judy Kent circulated confidential case studies produced by Graeme Murdoch for information.

University of York

Peter Quinn, University of York, reported that whilst students can manage at school with little intervention, once they reach university, mental health issues can surface. However, if their first experience earlier in life in accessing help was poor, they are often reluctant to seek help at university. In the 2014/15 cohort, 49 students notified the university GP that they had a mental health issue and 546 that they had depression. There has been a doubling in the number of students with depression over a three year period.

The university has an “open door team”, a multi-professional team, which is part of Student Support Services. It is available to any registered student experiencing psychological or mental health difficulties. In 2013/14, 1900 students referred themselves to the service, this being 12% of the student population. The top ten problems experienced by students are: anxiety, depression, academic difficulties, family problems, relationship issues, stress, bereavement, low motivation, eating disorder and perfectionism.

Approximately 1298 students (8 – 10% of the student population) disclosed their disability and accessed disability services. Many students do not disclose their disability and this often results in the university having to resolve crises. When the university does offer support, this usually results in the young person completing their studies.

The priorities for the university are: autism services for adults, services for young adults with depression, asthma and diabetes. If any of these student support services were cut, students would have no option but to go to A&E. It was noted that university students do not have a “health, education and care plan” and their DSE is about to be reduced.
York St. John

Nic Streetfield, York St. John, gave a presentation on the students attending York St. John University. In the last year, data from the University health centre has recorded the following numbers of student health matters: Diabetes 13, Asthma 150 (prevalence - 4.3%), Epilepsy 7, Thyroid 9, Cancer 2, Glandular fever 15, Mumps 3, Chicken pox 3, STI 17, Depression 136 (prevalence – 3.9%), Severe mental illness 9, Personality disorder 14, Low mood 189 (prevalence – 5.4%), Eating disorders 12 and Overdose 5.

In 2013/14 460 students accessed the university’s mental health services, which is an increase of 25% on the previous year. This equates to 7% of the student body this year seeking help with a problem relating to their mental health. The presenting issues have been: anxiety 27%, depression 23%, relationships 10%, loss and bereavement 8%, academic issues 6%, transition 5% and abuse 4%.

95% of students scored above the CORE clinical cut off. 77% of students seen are in the moderate to severe range and 44% of students seen rate themselves above the CORE risk cut off, ie at risk of self harm, suicide and a potential risk to others.

Main Issues:
1. Limited Eating Disorder Service – there is only one ED nurse. The need for a service is measured on BMI, so some students have to get worse before they can be treated. A student will be asked the same questions by the Wellbeing Team at the University, the GP and the CMHT in order for an assessment to be carried out.
2. Two students who were sectioned were taken out of the area because of the lack of available beds in York. When students are released from inpatient care the hospital will send a discharge letter to the GP, which often takes a week to arrive. This results in a vulnerable student being released back into halls without anyone from the University being told. If the Wellbeing Team was informed of the discharge date, support for the student could be put in place.

Other issues:
- Supporting students in crisis
- Lack of specialist services
- The lack of autism awareness training for staff
- The diabetic nurse charges to run a clinic at the university
- Clarification is needed around how a mass meningitis vaccination programme would be funded if needed
- Entry to secondary care needs to be easier
- Preventative health promotions need to improve around diabetes, meningitis, alcohol and river safety

Priorities are:
- Accessible services for depression in young people
- Autism spectrum services
- Improving eating disorder services
- Easier access to secondary care
- Health promotion to be more prevalent and joined up around diabetes, meningitis, alcohol and river safety.
- Awareness raising of emotional resilience taught in schools
- Engage in more joined up working

Board members noted that the York College Counselling waiting list has been closed several times

The university is producing a film about transition into and through university, and this is to be forwarded to Board members when available.

JK
Jon Stonehouse thanked Peter Quinn and Nic Streatfield for their presentations and suggested that pathways in particular could be considered by the CAMHS Executive. He suggested that they, or their representatives, should sit on the CAMHS Executive to ensure a focus on young adults, and university students in particular.

Andy Weir agreed to meet outside the meeting to look at issues raised, and to ensure university support staff do not have to spend time completing multiple forms. Jayne Hill agreed to look into whether the university GP can be put on system 1 and she noted that commissioning autism services for adults is a key procurement issue for the Clinical Commissioning Group.

Alison Patey and Julie Hotchkiss agreed to look into who would fund a mass meningitis vaccination programme at the university, should this be needed.

Cllr Looker thanked Peter Quinn and Nic Streatfield for their presentations and for providing data for the JSNA. The November YorOK Board meeting will include an update on mental health issues and Cllr Looker suggested that the Higher York Student Community Partnership should also consider the issues.

7. **Forward Plan and Dates for Future Meetings**

Simon Westwood requested an agenda item on low level depression and what the voluntary sector is able to provide, and also an item on domestic abuse, as whilst there is lots of activity taking place, there is no clarity around governance and leadership arrangements.

Cllr Looker asked that Jess Haslam be invited to the November Board meeting for the thematic discussion on mental health.

Board members were invited to visit both the University of York and York St. John to discuss how the universities and the YorOK Board can work together more closely.

**Future Meeting Dates:**

- Monday 10 November 2014
- Monday 12 January 2015
- Monday 2 March 2015
- Monday 11 May 2015
- Monday 6 July 2015
- Monday 14 September 2015
- Monday 9 November 2015

There being no other business, the meeting finished at 12.05pm.