



Children and Young People's Overview and Scrutiny Committee

Date **Wednesday 26 April 2023**
Time **9.30 am**
Venue **Council Chamber, County Hall, Durham**

Business

Part A

Items which are open to the Press and Public
Members of the Public can ask questions with the Chair's agreement
and if registered to speak

1. Apologies for absence
2. Substitute Members
3. Minutes of the Meeting held on 10 March 2023 (Pages 3 - 14)
4. Declarations of Interest, if any
5. Any items from Co-opted Members or Interested Parties
6. Draft Joint Local Health and Wellbeing Board Strategy 2023 -2028
 - a) Joint Report of the Corporate Director of Neighbourhoods and Climate Change and the Corporate Director Adult and Health Services (Pages 15 - 40)
 - b) Presentation by Julie Bradbrook Partnerships Manager (Pages 41 - 50)
7. Response to The Children's Social Care Review
 - a) Report of the Corporate Director of Children and Young People's Services (Pages 51 - 62)
 - b) Presentation by Chris Ring, Strategic Manager Safeguarding and Professional Practice (Pages 63 - 70)
8. The Pause Programme
 - a) Report of the Corporate Director of Children and Young People's Services (Pages 71 - 76)
 - b) Presentation by Jac Tyler, Strategic Manager Children and Families East (Pages 77 - 84)

9. Performance Quarter 3 - Report of the Corporate Director of Resources (Pages 85 - 100)
10. Budget Quarter 3 - Report of the Corporate Director of Resources (Pages 101 - 114)
11. Such other business as, in the opinion of the Chair of the meeting, is of sufficient urgency to warrant consideration

Helen Lynch
Head of Legal and Democratic Services

County Hall
Durham
18 April 2023

To: **The Members of the Children and Young People's Overview and Scrutiny Committee**

Councillor A Reed (Chair)
Councillor J Cosslett (Vice-Chair)

Councillors C Bell, R Charlton-Lainé, I Cochrane, M Currah, S Deinali, J Griffiths, O Gunn, C Hunt, L Kennedy, C Lines, C Martin, L Mavin, D Mulholland, K Rooney, A Sterling, S Townsend, C Varty, E Waldock and M Walton

Faith Communities Representatives:
Mrs L Keenan and Mrs L Vollans

Parent Governor Representatives:
Mr P Debrett-Watson

Co-opted Members:
Ms R Evans and Ms A Gunn

Contact: Paula Nicholson Tel: 03000 269710

DURHAM COUNTY COUNCIL

CHILDREN AND YOUNG PEOPLE'S OVERVIEW AND SCRUTINY COMMITTEE

At a Meeting of **Children and Young People's Overview and Scrutiny Committee** held in Committee Room 2, County Hall, Durham on **Friday 10 March 2023 at 9.30 am**

Present:

Councillor A Reed (Chair)

Members of the Committee:

Councillors J Cosslett, M Currah, S Deinali, P Jopling, L Mavin, K Rooney, M Simmons, C Varty, E Waldock and M Walton

Also Present:

Councillor V Andrews

Prior to the commencement of the meeting, the Chair announced with regret the sad passing of the Chair of the Council, Councillor B Bainbridge. Members stood for a minute's silence out of respect to Councillor B Bainbridge.

1 Apologies for Absence

Apologies for absence were received from Councillors I Cochrane, O Gunn, C Hunt, C Martin, A Sterling, S Townsend, Ms Evans and Mrs Gunn.

2 Substitute Members

Councillor P Jopling substituted for Councillor C Hunt and Councillor M Simmons substituted for Councillor C Martin.

3 Minutes

The minutes of the meeting held on 9 January 2023 were agreed as a correct record and were signed by the Chair.

4 Declarations of Interest

There were no declarations of interest.

5 Any items from Co-opted Members or Interested Parties

The Overview and Scrutiny Officer read out the following questions that had been received from Ms Evans:

1. Any data Durham County Council has on pupil's swimming ability gathered through schools.
2. Any information Durham County Council has on how schools plan swimming lessons, and how much time a pupil might expect to spend on this activity through school. She would also be interested to know if there are any national guidelines.
3. Information on access to swimming pools by area of the County - from living in the south-west of the County, she understands that there is a plan to rebuild the Woodhouse Close pool and upgrade the Barnard Castle pool. She thinks this is part of a County-wide plan, and understands, for instance, that Peterlee pool is currently closed. She would like to know about the timetable for works, and also about any pool closures and what impact that is likely to have on children's access to school and leisure swimming – and what mitigation is in the Council's plans.

The Overview and Scrutiny Officer advised that the questions had been sent to the appropriate service grouping for a response and added that question 3 falls within the remit of the Environment and Sustainable Communities Overview and Scrutiny Committee who will be considering Leisure Transformation at a future meeting. She would ensure that Ms Evans was invited to the meeting when the Leisure Transformation was considered.

6 Home to School Transport Services - Consultation

The Committee considered a Joint report of the Corporate Director of Children and Young People's Services and Corporate Director of Regeneration, Economy and Growth which provided an opportunity for Members to provide views as part of the public consultation on proposals to transform Durham County Council's Home to School Transport Service for Children and Young People.

The Service Manager, Children and Young People's Services was in attendance to present the report and deliver a presentation that outlined the background to the consultation and set out the proposals for the consultation and the timeframe (for copy of report and presentation, see file of minutes).

In response to a question from Councillor Walton the Service Manager indicated that they were not aware which council had indicated that expenditure on SEND home to school transport was manageable as it was an anonymous survey.

Councillor Walton then asked if the eleven maintained schools were widespread, which the Service Manager confirmed was the case.

Councillor Walton referred to the increase in the charge for the spare seat and maintained capacity schemes and indicated that it cost £13.00 per week for a Go North East ticket for St Bede's Catholic School, Lanchester and asked if there was scope to offer this to other services around the county.

The Integrated Passenger Transport Manager responded that this was a private arrangement between St Bede's Catholic School and Go North East and indicated that this was a consultation exercise that proposes £2.80, and they welcomed feedback if Members thought that this was too high. Councillor Walton indicated that she knew that a service could be carried out for £13.00 at Lanchester.

Councillor Walton then referred to Priority 3 – Developing independence skills of young people and indicated that this could go wider and there may be opportunities within other services. She asked if there was an opportunity to have a passenger assistant taking a group of young people onto public transport. She then asked if the unsafe routes were in rural areas.

The Integrated Passenger Transport Manager responded that unsafe routes were across the county for a variety of reasons.

Councillor Walton indicated that capital improvements would be expensive, and those children would leave school in a few years so money would be invested, and she was not sure if this would be cost effective.

Councillor Walton then referred to Priority 5 - procurement approach and asked if there was an option to engage with schools to provide their own school transport or approach community groups to use their minibuses that would also support local groups.

The Head of Education and Skills indicated that he had spoken to Head Teachers at schools and some schools did run their own transport, but a number of schools were not big enough to offer this facility, but he would explore it further.

Councillor Walton indicated that paying parents mileage to transport their children to school could also be an option to be considered.

Councillor Mavin indicated that some special schools in other authorities use their own minibuses for school transport and asked if this happened in Durham.

The Head of Education and Skills responded that this was very limited in Durham, and this could be looked at as part of the consultation.

Councillor Mavin then referred to the single person transport and asked if parents felt that their child requires their own transport and escort due to challenging behaviour.

The Head of Education and Skills responded that they had this as a priority as they felt different authorities had different approaches to this and they knew other authorities their priority was group travel. There were aspects of the provision in terms of SEN places and offer where it may have to be a solution as children have to travel past their closest special school to achieve a place somewhere else.

Councillor Mavin commented that you get a lot of pressure from parents who feel their child needs single transport but if you used school mini-buses and staff were familiar with the child that would make a difference.

The Head of Education and Skills responded that it was logistically driven and also parental preferences.

In response for a further question from Councillor Mavin, Members were advised that transport would be provided for children to attend Special Schools that were outside the authority, if that school provided the child's needs but transport would not be provided if it was parental choice.

Councillor Varty commented that parents were having to pay for their own transport to keep their child in a particular school. She then referred to children using public transport that often gets cancelled. She indicated that she did not agree with the increase in the cost of travel.

The Head of Education and Skills responded that some families in a small village one family would be entitled to concessionary travel and another family would not be entitled so you would always have people saying that the scheme was not fair.

Councillor Deinali referred to the development of independence skills for young people with SEND and asked if children would be reviewed on a child-by-child basis. She also referred to the maintained scheme and asked if any research had been carried out on the impact upon the working poor. She then asked if parents wish to transport their own children who live in rural areas had any research been carried out on how this may impact on working parents in those areas. In terms of identifying unsafe routes for walking was there a particular distance that they were looking at.

The Head of Education and Skills responded on the independent travel and training and indicated that the authority was not as far ahead as other authorities and provided an example of one school who planned and built as part of their playground area crossings and road signs etc. to put children through independent travel experience. This was not necessarily about saving money it was a commitment to prepare young people for adult life.

The Service Manager referred to the question around needs and indicated that this would be the drive around anything they do around individual transport for children. They would look at each child talking to the school and parent and make the decision. With regard to transport in rural areas he was not aware of any research around the question raised but once the consultation had been completed, they would carry out a lot of detailed work.

The Head of Education and Skills indicated that the current scheme was a mileage scheme which was to the school and return but some authorities paid for both return journeys and they were trying to explore some of these inequalities.

The Service Manager responded that the scheme that the Head of Education and Skills alluded to was used where they did not have capacity to provide transport or there were high costs. The personal transport budget had a low uptake due to parents having to procure transport the same way as the authority and have the relevant insurance in place etc. and this must be cheaper than what the authority could provide.

Members were advised that if a route was over three miles, then transport would be provided and any unsafe walking routes transport would be provided.

In response to a further question from Councillor Deinali regarding consultation with children, Members were provided with details of the groups that had been consulted and the work done to get the message out.

Councillor Currah made some comments on the online consultation in particular that people naturally think of cuts and asked about the availability of taxis and if there was less competition.

The Integrated Passenger Transport Manager responded that they did not have problems procuring transport it was the increase in costs due to fuel, wages, costs of spares etc. which was having a compound effect and problems with recruitment which increases wages.

In response to a further question from Councillor Currah on maintaining capacity and the alternatives the Head of Education and Skills indicated that the consultation was to obtain views and part of the work would be to look at alternatives.

The Integrated Passenger Transport Manager stated that if the proposal were to go ahead, they would encourage commercial operators.

Councillor Currah asked if the personal budget was voluntary and was advised that this was not imposed and was up to parents to make the decision.

Councillor Jopling asked if the costs associated with implementing contracts was included within the £19.5 million.

The Head of Education and Skills responded that the £19.5 million was the available budget for 2022/23, £24.3 million was the actual spend that had taken into account contract inflation.

Councillor Jopling commented that they had 9000 children, and 1000 contracts so there must be something that could be done to streamline this to try and save money. She commended the use of community transport which already have all the regulations in place to transport children. She asked if they were using independent taxi companies or large taxi companies.

The Integrated Passenger Transport Manager advised that they used a mix of bus companies, independent and larger taxi companies.

Councillor Jopling suggested that this be looked at and if you had more than one taxi company in an area to use the one taxi company or the same bus provider as you would get a better deal if using a smaller number of companies as processing less contracts would save money.

The Head of Education and Skills advised that all points would be looked at as part of the work on the home to school transport programme and they had a work stream looking at the procurement for transport and looking at routes.

Councillor Mavin referred to personal budgets and that other authorities only charge for the time the child is in the vehicle so only pay for two journeys and not four and presumed Durham County Council did the same. Members were advised that this was the case, however there were a small number who were paid for all four journeys due to the costs associated with alternative transport.

Councillor Walton referred to the personal budgets and that parents needed to go through the same process of insurance etc. and asked if this could be streamlined to encourage more parents to take up this option. Members were advised that this was being looked at as part of the consultation.

The Chair referred to the use of community buses which was good and was aware of a scheme where the school raised money to purchase the minibuses, but the council maintained the buses and paid for the training. A member of staff would pick up the children, so the only costs were fuel. The minibus would then be used for activities during the day and would be back to take children home in the afternoon and asked if this could be considered.

The Head of Education and Skills indicated that they could look at all the options and commented that some children travelled to school on their own with an escort and then those children would then go to an activity in the minibus with other

children and an escort and that would be fine. They needed to look at the ability of the children and the interaction of the children.

The Chair referred to voluntary drivers who were only paid a mileage which would be less than using current transport and asked if this could also be considered as an option.

The Head of Education and Skills advised that they would look at all these options as part of the consultation.

The Chair then referred to the increase in the cost of a seat to £2.80 and commented that this may be too much for some parents, due to the current cost of living.

The Integrated Passenger Transport Manager responded that it was a consultation exercise, and this was the proposal put forward and would look at the feedback. The increase to £2.80 was seen as a benchmark and a typical fare offered by a commercial firm, the current rate was extremely low in particular when benchmarked against other local authorities' fares, but they could look at other fares.

The Head of Education and Skills advised that the £2.80 fare was not related to recovering the £0.5 million cost it was about a fair charge and that £2.80 would not cover costs.

Resolved: That the contents of the report and presentation be noted and the comments raised by the Committee be formulated into a formal response to the consultation.

7 Early Years - Overview

The Committee considered a report of the Corporate Director of Children and Young People's Services which provided an overview of the Early Year's Service.

The Lead Officer Early Years and Childcare was in attendance to present the report and deliver a presentation that provided details of the Local Authority statutory duties; Covid-19 and Children's Experience in Lockdown; Current Challenges in Early Years Sector; Covid Recovery Programme; Early Years Sector Support and National Challenges in the Early Years Sector Enquiry (for copy of report and presentation, see file of minutes).

During the presentation, the Lead Officer Early Years and Childcare referred to the early years provision free of charge which was the funded entitlement and clarified that Durham was one of the lowest payments which was due to the area cost adjustment. There was some disadvantage metrics within the cost adjustment for disadvantage children or early years pupil premium.

She also advised Members of the tax-free childcare scheme where working parents could receive a payment from the government to help with childcare costs. They had carried out a lot of work to ensure that parents were aware of this scheme that gave parents £2.00 back for every £8.00 spent on childcare costs, this replaced the child-care vouchers linked to salary sacrifice.

Councillor Deinali referred to child care statutory provision issues and how a nursery had closed which resulted in an influx of children at an alternative nursery that caused issues with child ratios and asked if buildings were fit for purpose in terms of allowing children the amount of space, they needed to develop skills and the impact on their development.

The Lead Officer Early Years and Childcare responded that as well as a staff ratio there was also a space ratio and they used indoor and outdoor spaces.

The Head of Education and Skills commented that they needed a better solution for nurseries, and they would love to find more space and were looking at this.

Councillor Varty commended one point family centres and hubs in particular staff and commented that unfortunately retention of staff does not happen in this area.

Councillor Walton commended the presentation and referred to the tax-free childcare scheme where there used to be barriers if there were not enough employees wishing to take up the scheme due to costs to the employer and asked if this was still the case.

The Lead Officer Early Years and Childcare responded that the only difficulty was going onto the government website to see if you were eligible and commented that Nationally the take up was low for the scheme.

Councillor Walton asked if there was an opportunity to engage with employers to say this will not cost you anything.

The Chair asked the Lead Officer Early Years and Childcare if she could share the links to the childcare map and parliamentlive.tv with members together with the Facebook page and library.

Councillor Currah referred to the impact on COVID 19 lockdowns on children and asked if a national report had been produced on this.

The Lead Officer Early Years and Childcare responded that some reports had been produced that she could share with Members but indicated that they were not national reports.

Councillor Deinali referred to the challenges around staff retention and staff wellbeing and that staff are expected to do more in their role and a number of these they were not necessarily qualified to carry out which put more pressure on their workload and work life balance and wellbeing. She asked how they were supporting staff and looking at how they could provide additional resources so that staff can focus on supporting the children.

The Lead Officer Early Years and Childcare responded that they have 'let's start the conversation' where providers got together and what they were saying was that they were having to step in where it would normally be a Health Visitor. She was listening to them and making links with Health Visitor colleagues to say how the system could be changed to support them. With regard to wellbeing, they were still a team who could go out and visit nurseries and be that person at the end of a phone and come up with solutions.

Resolved: That the contents of the report and presentation be noted.

8 Reducing Parental Conflict in County Durham (Relationships Matter)

The Committee considered the report of the Corporate Director Children and Young People's Services which provided Members with an update on Durham's progress on the national Reducing Parental Conflict Programme.

The Operations Manager, One Point Service was in attendance to present the report and deliver a presentation that provided the Definition; Overview; Impact on Children and Young People; Durham's Journey; Durham's Graduated Approach; Parent Peer Support and Next Steps (for copy of report and presentation, see file of minutes).

The Chair asked if the links to the 'Relationships Matter' and 'Me You and Baby Too' websites could be circulated to Members.

Councillor Walton thanked the Officer for her presentation and asked about the perception that this was for families who were at risk of domestic abuse but what about the families who thought that this did not apply to them but there was still arguing in the household. She then referred to established parents but were new to teenagers and it would not occur to her to go onto a website but would talk to other parents. She referred to the comment that they attend as it was parents teaching and not professionals and stated that the parents were the professionals and would talk if the badge was not there, so there was an opportunity to network and say you are not at risk, but parenting is hard. She then indicated that it was great engaging with dads but what about other parents in the community such as aunties, uncles and grandparents. She commented that the feedback was brilliant and the fact that people were not connecting parents as professionals they needed to embrace this as parents are the professionals.

The Operations Manager, One Point and Think Family Service responded that parents are the experts and the difference about the programme was the way in which it was perceived that it was not about professionals preaching teaching but was about parents facilitating other parents to come together and provide that peer support so was not seen as a talking shop programme, the parent led work was having an impact. Their challenge was that arguments happen in everyday life and was about landing it as early as possible and hoped that the family hub agenda would help to achieve this and normalise it. She also commented that it was not just dads it was around the wider social network.

Councillor Jopling commented that disagreements take place in every home, and she did not know how many people knew about the service. She asked how they overcome parents who did not engage. She then referred to the video shown and how you could easily pick out the two children who were affected the most.

The Operations Manager, One Point and Think Family Service responded that they needed to get the word out to educate at the earliest opportunity that this was a thing. Domestic abuse was well known but conflict was everywhere, and they needed to manage it constructively so by training the likes of GPs, Health Visitors, Family Hub staff etc., around having those ongoing conversations and not going in heavy, so parents do not have to look for support it is in front of them.

Cllr Jopling asked if they were engaging with charities who do this type of work.

The Operations Manager, One Point and Think Family Service indicated that part of their multi-agency working group they had voluntary community sector organisations representation. They use their alliance programme to get the word out. If one parent did not want to engage that was fine, they would try to get the partner engaged but this was a voluntary engagement if one parent were keen this was better to have some impact and they would work with the one parent.

The Chair thanked the Officer for her presentation and commented that this would help reduce domestic abuse.

Resolved: That the report and presentation be noted and the progress of the development and implementation of Reducing Parental Conflict support in County Durham supported.

9 Schools Ofsted Update and Educational Attainment

The Committee considered the report of the Corporate Director of Children and Young People's Services which provided Members with an update of recent Ofsted Inspection of County Durham's maintained schools and educational outcomes in County Durham in 2022.

The Head of Education and Skills was in attendance to present the report and deliver a presentation that provided Members with details of how inspections had changed over the years; details of Ofsted Inspections from September 2022; Ofsted Inspection Outcomes for different School Categories; Summary Outcome data for children in Durham Schools by Key Stage (for copy of report and presentation, see file of minutes).

Councillor Walton referred to Ofsted inspections and agreed with the Officer that parents were not putting as much emphasis on this, and parents were focusing more on what the school could offer and she thought this would continue. She then referred to those schools that had not been inspected by Ofsted and what impact did this have on the Council and moving forward where would it leave the Council as the trend is that parents are not looking at Ofsted reports would priorities shift.

The Head of Education and Skills responded that schools were still anxious of Ofsted inspections. They were currently struggling to attract leaders for Primary and Secondary schools and people to teach maths and science. Parents are looking at the provision in the school as a priority. If maintained schools had not been inspected for some time, they have a levelling system that they operated called 'monitoring and intervention level,' it was tougher with academies and academy trusts, but they did have a good dialogue with these, and some schools come to the authority to talk about issues in the school. Moving forward if Ofsted are not conducting inspections, then what is the point. In terms of special schools recruiting was difficult that impacted on supply teachers so this needed careful consideration and Ofsted would have a role in this.

Councillor Currah referred to the school he and his son attended that was like an exam passing machine, they also did not offer languages and asked what the policy was around this.

The Head of Education and Skills responded in terms of policy the EBacc are in favour of high academic standards and ensure that all children do languages and 90% by a certain date, this was fine if you had plenty of language teachers which the authority did not. He commented that a number of children were not good at languages, but they do have some schools who have a large cohort doing languages because of the expectation and were struggling. Other schools are doing less in languages due to the lack of resource.

Councillor Waldock asked how many schools were subject to Ofsted monitoring visits and if any of the Ofsted reports had contradicted how they thought the school was performing.

The Head of Education and Skills indicated that they very rarely disagree with where they think an outcome is if anything they are usually pleasantly surprised. Monitoring inspections take place on inadequate schools if not reassured then they would conduct further monitoring inspections.

Councillor Jopling indicated that good schools were made up of many elements and the most important was a good head and parents that engaged. She asked if Ofsted looked at schools where children may have a number of difficulties and did, they take this into account and commented that it was easy to give a percentage to a school which resulted in parents not wanting to send their children to that school. She stated that you need a broad spectrum of children at every school as the bright children helped other children.

Councillor Simmons indicated that the problems with small schools was where a teacher has two or three year groups with all abilities and asked if there were any suggestions to help these small schools.

The Head of Education and Skills gave an example of a school who had an Ofsted inspection that was good, but they were going to come back as there was a deep dive on a subject area and they had a NQT who was the curriculum lead for the subject. He commented that the authority run a series of networks for smaller schools on subjects, but they still wanted trusts to be part of these networks and share practice, so those teachers were never isolated and had a curriculum and materials to access.

Councillor Simmons commented that she was currently a governor at four different schools and could see the difference with small schools.

The Chair referred to the figures and commented that since 2020 things had changed and her concern was if they had a previous Ofsted Inspection they had since faced COVID and now issues in Russia and Ukraine and children from these countries go to our schools and there was a language barrier and the children have been affected. She had visited some schools and saw how there was support for those children and the teachers worked extremely hard but if they were inspected again these children were not achieving as well as they could do and asked what happens in these situations.

The Head of Education and Skills responded when inspections were driven by progress this would impact on figures but now, they do not look at this and there was more allowance. In this example he would expect Ofsted to praise the school for the work been done with the refugees. He advised Members that the most successful children in County Durham were those whose first language was not English.

Resolved: That the contents of the report and presentation be noted.

**Children and Young Peoples Overview
and Scrutiny Committee**

26 April 2023

**Draft Joint Local Health and Wellbeing
Strategy 2023-2028**



**Joint Report of Alan Patrickson, Corporate Director,
Neighbourhoods and Climate Change**

Jane Robinson, Corporate Director, Adult and Health Services

Electoral divisions affected:

Countywide

Purpose of the Report

- 1 The purpose of this report is to present the draft refresh of the Joint Local Health and Wellbeing Strategy (JLHWS) for comment. The draft strategy is attached as Appendix 2.

Executive summary

- 2 The JLHWS is a legal requirement under the Health and Social Care Act 2012, to ensure health and social care agencies work together to agree services and initiatives which should be prioritised.
- 3 The Health and Care Act 2022 amended section 116A of the Local Government and Public Involvement in Health Act 2007, renaming 'joint health and wellbeing strategies' to 'joint local health and wellbeing strategies', which reflects the emphasis on 'place'. All other statutory guidance on JLHWS's remains unchanged.
- 4 The Health and Wellbeing Board has the responsibility to deliver the JLHWS, which is informed by the Joint Strategic Needs and Asset Assessment (JSNAA), as part of Durham Insight, which is an assessment of the current and future health, wellbeing and social care needs of residents in County Durham. Assets are factors that build health and wellbeing, not just prevent or cure disease
<https://www.durhaminsight.info/jsna/>
- 5 The Health and Wellbeing Board agreed the JHWS 2021-25 in March 2021. At that time, Covid-19 still had a huge impact on how Durham County Council and its partners delivered services, especially health

and social care services, whilst also supporting providers to run essential services. Moving forward 'living with Covid' will be part of our everyday lives, and this is reflected in the JLHWS 2023-2028.

Recommendations

- 6 Overview and Scrutiny Committee members are recommended to:
 - (a) Receive a presentation at the meeting on 26 April 2023 and make comment on the draft JLHWS 2023-28 as part of the consultation process. The draft strategy will be presented to the Health and Wellbeing Board on 10 May 2023 for agreement.

Background

- 7 The Health and Wellbeing Board agreed the JHWS 2021-25 in March 2021. The JLHWS is now being developed for 2023-2028 following consultation with Board members in September 2022 and January 2023 and in line with national guidance to review plans in light of NHS changes.

National and local context

- 8 The Health and Care Act 2022 introduced new architecture to the health and care system, specifically the abolition of Clinical Commissioning Groups (CCGs) and the establishment of statutory Integrated Care Systems (ICSs) from July 2022, taking over CCG commissioning functions. The changes in the national landscape are reflected in the JLHWS 2023-2028.
- 9 The Integrated Care Partnership (ICP) is a statutory committee, established by the NHS and local government as equal partners, and involving partner organisations and stakeholders. It forms part of the arrangements for the Integrated Care System (ICS).
- 10 County Durham is part of the North East and North Cumbria Integrated Care Partnership. Each Integrated Care Partnership is required to develop an Integrated Care Strategy covering the whole ICP population <https://northeastnorthcumbria.nhs.uk/media/3i3btbz2/final-nenc-integrated-care-strategy-16-december-2022.pdf>
- 11 The Department of Health and Social Care published non statutory guidance for HWBs in November 2022, outlining their roles and responsibilities and clarifying their purpose in the new system architecture. Health and Wellbeing Boards have the same statutory role around instilling mechanisms for joint working across health and social care and setting strategic direction locally 'at place'.
- 12 This guidance advised Health and Wellbeing Boards to consider revising their JLHWS following the development of the Integrated Care Partnership Strategy.

Feedback from development sessions

- 13 Health and Wellbeing Board development sessions took place in September 2022 and January 2023 to look at the Board's priority areas and development of the JLHWS.
- 14 A Joint Strategic Needs and Assets Assessment development session also took place in January 2023.

- 15 There was agreement that the Health and Wellbeing Board should have fewer priority areas of focus which are easily understandable to the HWB, its partners and communities, and the JLHWS should be streamlined and clearer to understand. Ultimately the JLHWS should focus on the areas that prevent it from achieving its vision that '*County Durham is a healthy place where people live well for longer*'.
- 16 The JLHWS will follow a life course approach with a focus on the wider determinants of health (social, economic and environmental factors into which we are born) that impact on how long people are likely to live, the health conditions that they may experience and the level of health and social care available to them. These all impact on people's health, for example diet, alcohol consumption, support networks, education and employment opportunities, poverty, living conditions, health care services, housing.
- 17 The impact of wider determinants will be clear in the strategy, as will the focus on these issues to reduce health inequalities, across the population of County Durham.
- 18 Based on evidence from the JSNAA, the areas identified which have the biggest impact on local outcomes and health inequalities are as follows, as these are the areas which, if we successfully address, would support the realisation of the vision:
 - (a) Making smoking history
 - (b) Enabling healthy weight for all
 - (c) Improving mental health, resilience and wellbeing
 - (d) Reducing alcohol health harms
- 19 The four priority areas were agreed by the Health and Wellbeing Board at their development session in January 2023.
- 20 We often think of health as being defined by access to and quality of health care. While this is of course really important, it accounts for as little as 15% of the health and wellbeing of a population. The Joint Committee is directly responsible for health and social care services in County Durham and is a subgroup of the Health and Wellbeing Board.
- 21 Behavioural risk factors, such as what we eat, how often we are physically active, whether we smoke or drink alcohol (and if so, how much), all have a huge effect on our state of health and wellbeing. Achieving and maintaining a healthy lifestyle can be challenging for many within our population – and it is not just down to individual choice.

Decisions about food, exercise, smoking, and drugs and alcohol use, are often influenced by other factors including family and social networks, education, poverty and culture. These healthy behaviours/risk factors account for 40% of our health and wellbeing. The Health and Wellbeing Board has oversight and influence over these behavioural risk factors.

- 22 The conditions in which we are born, grow, live, work and age have a much greater impact on health outcomes. These are known as the 'wider determinants', which help to build good health, and account for approximately 45% of our health and wellbeing.
- 23 Our other strategic partnerships, and their plans, which focus on things such as poverty, employment, education, safety of our neighbourhoods, the quality of our homes and the environment we live in, play a key role which will support improving and protecting people's health by ensuring good health is a key factor in these plans. The Health and Wellbeing Board will work with other partnerships on these other factors that make up health and wellbeing.
- 24 The timeframe for the JLHWS is 2023-2028, to enable us to show impact and the difference the Board is making. Given that the JLHWS is based on population health data and evidence from the JSNAA, the priorities will not change over a five-year period, despite the uncertain national landscape (particularly around NHS). The actions, delivery plans and ways of working under the priority areas will develop over time but broad strategic objectives will not.
- 25 The JLHWS also includes the importance of influencing resource allocation and commissioning across partner organisations to have greatest impact across the system.

JLHWS Strategy Development Group

- 26 Work has taken place to develop the JLHWS 2023-2028 through a strategy development group (comprising representatives from Durham County Council (Partnerships, Children and Adults Services, Performance and Strategy and Public Health), Physical Activity Strategy Committee, NHS Foundation Trusts, Integrated Care Board, County Durham and Darlington Fire and Rescue service and Area Action Partnerships) to ensure that the JLHWS is fit for purpose and reflects the work being undertaken in partnership by organisations across the county.

JLHWS action plans

- 27 Leadership in each of the four priority areas will be through the following formally established Partnership or Alliance, each of which will deliver against a high-level action plan:
- (a) Making smoking history: Tobacco Control Alliance
 - (b) Enabling a health weight for all: Healthy Weight Alliance
 - (c) Improving mental health, resilience and wellbeing: Mental Health Strategic Partnership
 - (d) Reducing Alcohol health harms: Drug and Alcohol Operational Group/Combating Drugs and Alcohol Strategic Partnership
- 28 These groups will work with communities in the development and implementation of their action plan, as evidence indicates that if residents are empowered their health and wellbeing will improve. The Approach to Wellbeing will be imperative in the development and delivery of the action plan and will include co-production and consideration of lived experience and the voice of the user.
- 29 It is important to note that work has been taking place against the four priority areas for a number of years. The Combating Drugs and Alcohol Partnership is a new strategic partnership, as is the Drugs and Alcohol operational group, however, they build on the work that has already taken place to tackle alcohol health harms.
- 30 The Health and Wellbeing Board already receive annual updates, including key performance indicators to the Board, as part of the cyclical work programme.
- 31 The action plans will support these groups to focus and strengthen delivery of what will have the most impact on their contribution to achieving the Health and Wellbeing Board's vision.
- 32 In addition to the use of quantitative data, a range of qualitative data and personal stories will also be used to share lived experiences and demonstrate progress against the four priority areas. These qualitative accounts may also demonstrate impact sooner than the quantitative data.

Equality Impact Assessment

- 33 An Equality Impact Assessment (EIA) will be undertaken alongside the development of the JLHWS.

Engagement and Consultation

- 34 Work is taking place with strategy development group partners to develop and co-design the JLHWS, which has been shared within their own organisations for comments as part of this process.
- 35 The JLHWS has been presented to Thematic Partnerships for comment as part of the consultation process.
- 36 The JLHWS was shared on the DCC website as part of the consultation process, and the link was shared at that stage with additional groups including Area Action Partnerships, Better Together Forum, Armed Forces Forum, Local Councils working group, Investing in Children, Youth Council, and CYP and AHS OSCs.
- 37 The consultation feedback will be used to shape the final draft, which will be presented to the HWB on 10 May for agreement and will contribute to the development of the action plans.
- 38 When the JLHWS 2023-28 is agreed, further consultation and co-production will take place with a range of partners to contribute to the development of the detailed action plans and influence their delivery.

Conclusion

- 39 The development of the JLHWS has been led by a partnership group. The Strategy has been informed by the Joint Strategic Needs and Assets Assessment which provides the evidence base on which the priorities have been developed.
- 40 The JLHWS is a high-level strategy that is simple and easy for all to understand. It outlines the priority areas to focus on and commitment of how we will work together across the system and will be supported by action plans against the four priorities. The Approach to Wellbeing (which includes co-production and consideration of lived experience and the voice of the user) would then be imperative in the development of the delivery/action plans by the governance groups.

Author

Gordon Elliott

Tel: 03000 263605

Appendix 1: Implications

Legal Implications

The JLHWS is a legal requirement for HWBs to produce under the Health and Social Care Act 2012, ensuring health and social care agencies work together to agree services and initiatives which should be prioritised.

The Health and Care Act 2022 amends section 116A of the Local Government and Public Involvement in Health Act 2007, renaming 'joint health and wellbeing strategies' to 'joint local health and wellbeing strategies', which reflects the emphasis on 'place'

Finance

Ongoing pressure on the public services will challenge all agencies to consider how best to ensure effective services are delivered in the most efficient way.

The demographic profile of the County in terms of both an ageing and projected increase in population will present future budget pressures to the County Council and NHS partners for the commissioning of health and social care services.

The JLHWS will be used to influence commissioning decisions across the system, supporting preventative work and maximising the County Durham pound.

Consultation

Details of consultation are provided in the report.

Equality and Diversity / Public Sector Equality Duty

An Equality Impact Assessment is being undertaken alongside the JLHWS.

Climate Change

There are no climate change implications

Human Rights

There are no adverse implications.

Crime and Disorder

The JLHWS is aligned with and contributes to the current priorities within the Safe Durham Partnership Plan which focuses on crime and disorder.

Staffing

There are no staffing implications.

Accommodation

There are no accommodation implications.

Risk

There are no risk implications.

Procurement

The Health and Social Care Act 2012 outlines that commissioners should take regard of the JLHWS when exercising their functions in relation to the commissioning of health and social care services.

**Appendix 2: Draft Joint Local Health and Wellbeing Strategy
2023-2028**

Attached as a separate document

Joint Local Health and Wellbeing Strategy 2023-28

*Vision: County Durham is a healthy place,
where people live well for longer*



Better for everyone

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Our Vision

Our vision is that **County Durham is a healthy place, where people live well for longer**

Our strategic approach across County Durham is to work together to:

- Put people at the heart of everything we do and work with communities in the decisions that affect them
- Ensure place (County Durham) remains at the forefront of our actions and delivery of this strategy
- Maintain focus across the life course, from starting well, through living well, to ageing well, in our four priority areas
- Build upon what we already have and what works well
- Continue to implement the Approach to Wellbeing
- Draw on evidence to help us decide where our money is spent, and where possible spend money on trying to stop problems before they happen
- Learn lessons from what we have done in the past, when things have worked well and when things have not worked well
- Tackle unfair difference in health and wider contributing factors so everyone has the best chance of good health
- Work together with the key leads to make sure they do what they say they will around delivery of the JLHWS
- Invest in projects which will have a positive impact on our priority areas
- Work together across the whole system to make it easy to access advice and support.

Enablers

These are the things that will help us achieve our vision:

- A sustainable workforce with good physical and mental wellbeing
- Clear communication with the public and staff across the system
- Using the [Approach to Wellbeing](#) focusing on **how** we work with communities
- Adopt a family focus in all our work
- Strong and robust governance
- Using data and evidence from local conversations to influence our decisions
- Build and make best use of our evidence base
- Make sure partners use the 'making every contact count' approach

What difference can we expect to see

- **Tobacco** - Reduction in the percentage of people who smoke to 5% by 2030
- **Healthy weight** - Increase the proportion of children who are a healthy weight
- **Mental Health:** Improvement in mental health measures
- **Alcohol:** Increase in the numbers of adults and young people suffering from drink dependency, who are in treatment

County Durham Wellbeing Principles

The County Durham Approach to Wellbeing uses seven principles to help us focus on the key role that people, families and communities play in supporting health and wellbeing.



The infographic is a vertical rectangle with a light blue background and white clouds at the top. It is divided into two main columns: 'People and Places' on the left and 'Supporting Systems' on the right. Each column contains three rounded rectangular boxes with white text on a dark blue background. At the bottom, there is a wide dark blue box containing an illustration of a diverse group of people (a woman with a baby, a man, a woman, a child, and a person in a wheelchair) and a final principle box with white text on a dark blue background.

People and Places	Supporting Systems
Empowering communities working with communities to support their development and empowerment	Working better together working together across sectors to reduce duplication and ensure greater impact
Being asset focused acknowledging the different needs of communities and the potential of their assets	Sharing decision making designing and developing services and initiatives with the people who need them
Building resilience helping the most disadvantaged and vulnerable and building up their future resilience	Doing with, not to making our interventions empowering and centred around you as an individual
	Using what works everything we do is supported by evidence informed by local conversations

Drivers of differences in health outcomes (Inequalities and Wider Determinants of Health)

What has the biggest influence on lives being cut short?



McGinnis, J.M., Williams-Russo, P. and Knickman, J.R. (2002) cited in The King's Fund (n.d.). Time to Think Differently. Broader determinants of health: future trends. Available at: <https://www.kingsfund.org.uk/projects/time-think-differently/trends-broader-determinants-health> (Accessed: 9 March 2023).

- We often think of health as being defined by access to and quality of health care. While this is of course really important, it accounts for as little as **15%** of the health and wellbeing of a population. The Joint Committee is directly responsible for health and social care services in County Durham. The Joint Committee is a subgroup of the Health and Wellbeing Board.
- Behavioural risk factors, such as what we eat, how often we are physically active, whether we smoke or drink alcohol (and if so, how much), all have a huge effect on our state of health and wellbeing. It remains, however, that achieving and maintaining a healthy lifestyle can be challenging for many within our population – and it is not just down to individual choice. Decisions about food, exercise, smoking, and drugs and alcohol use, are often influenced by other factors such as:
 - Family and social networks
 - Education
 - Poverty
 - Culture

These healthy behaviours/risk factors' account for **40%** of our health and wellbeing. The Health and Wellbeing Board has oversight and influence over these behavioural risk factors.

- The conditions in which we are born, grow, live, work and age have a greater impact on health outcomes. These are known as the ‘wider determinants’, which help to build good health, and account for approximately 45% of our health and wellbeing.

Unfair distribution of these wider determinants, such as good education, employment, the safety of our neighbourhoods, the quality of our homes and our environment and climate, can result in avoidable and unfair differences in health between different groups of people – or health inequalities

Rates of some of the risk factors for ill health are all negatively associated with poverty. Simply put, some of our residents and families with the least money in their pockets are likely to live in poorer health, and die earlier, than those who have more money

Action to address these wider causes of poor health and avoidable health inequalities is essential if we are to achieve our vision that *County Durham is a healthy place where people live well for longer*. Our other strategic partnerships, and their plans, which focus on things such as poverty, employment, education, safety of our neighbourhoods, the quality of our homes and the environment we live in, play a key role which will support improving and protecting people’s health by ensuring good health is a key factor in these plans. These plans include but are not limited to the:

- Inclusive Economic Strategy
 - Safe Durham Partnership Plan
 - Growing Up in County Durham Strategy
 - Poverty Action Plan
 - County Durham Housing Strategy
 - Environment and Climate Change Partnership Plan
- We also need to uncover and promote other factors that protect and build health and wellbeing. Many of these are at a family and community level and include community life, social connections and having an equal voice in local decisions. Clearly, preventing poor health and tackling the wider determinants in a meaningful way requires system-wide action across a range of partners, including those for which health is not their primary focus.

Joint Strategic Needs and Assets Assessment (JSNAA)

The JSNAA in County Durham is an evidence base that builds a picture of the health, care and wellbeing needs of local people and communities, based on a range of data and analysis.

The JSNAA informs our plans and strategies, which allows the council and partners to plan and buy services to meet the needs that have been identified.

It is important that we also understand what we already have available to support good health in communities. These are what we call assets, strengths, or protective factors. Things that can support good health are things like buildings, facilities and services as well as people and families who live, work and volunteer in communities, with their skills, knowledge, social networks, and relationships.

This combined view of both needs and assets builds on our [Approach to Wellbeing](#) and allows us to build a better picture of health, care and wellbeing, for example, community networks, physical environment, economic resources, skills and knowledge (the evidence). This helps us to plan and work with communities to improve and protect the health and wellbeing of our residents. All this information can be found on [Durham Insight](#), our shared intelligence and local evidence base.

The information contained in our JSNAA helps us to compare County Durham to other parts of the region and the country, and to see what has been happening over time. This gives us a view of how well County Durham is doing, and where we need to do better. Our JSNAA includes intelligence on:

- the current and future health and wellbeing needs of local people
- wider social factors that have an impact on people's health and wellbeing, such as housing, poverty and employment
- the inequalities between County Durham and elsewhere, and also inequalities between communities in County Durham
- what is strong and good in our communities to support good health

The evidence in the JSNAA identifies the four priority areas of the Health and Wellbeing Board as being the biggest contributors to dying early and living in poor health or with illness: smoking, unhealthy weight, mental health and alcohol use.

We also need to work with our communities and partners to understand what underpins these factors, being clear in terms of what works and targeting our work and resources appropriately at those most in need. This will give us the best chance of bringing about change and reducing the unfair differences in outcomes we see currently.

Health and Wellbeing Board priorities

The Health and Wellbeing Board has chosen four priority areas of focus for 2023-28, which have been identified from the evidence base in the JSNAA. These are the biggest contributors to people in County Durham dying early, living in poor health or with illness.

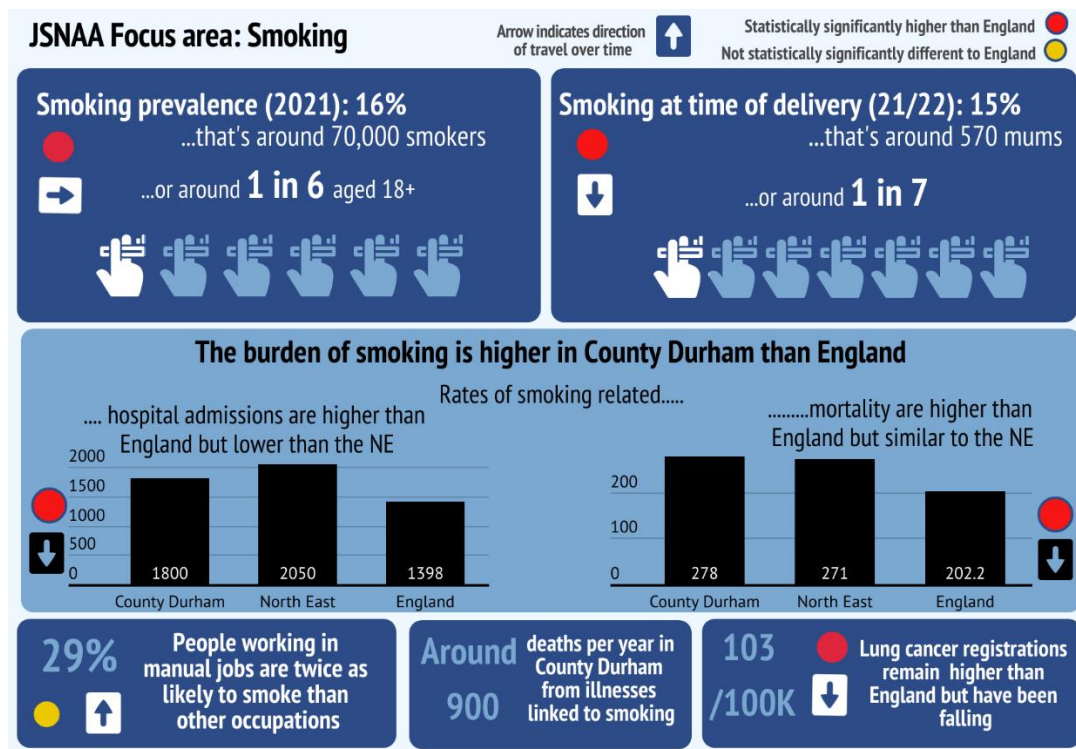
To achieve our overarching objective of **“Improve healthy life expectancy and reduce the gap within County Durham and between County Durham and England”** these are the priorities we need to focus on.

Leadership in each of the four priority areas will be through a formally established Partnership or Alliance, each of which will deliver against a high-level action plan.

1. Making smoking history

Why is this a priority?

- Smoking remains the single largest cause of preventable deaths and one of the largest causes of unfair health differences in England
- Nationally, approximately 64,000 people are killed by smoking each year
- In County Durham, around 900 people die every year from smoking related illnesses
- Smoking harms continue to have the biggest impact on some of our residents with the least money in their pockets. When income and smoking costs are taken into account, over 25,000 households are driven into poverty each year
- Smoking causes cancer, heart disease, stroke, asthma and chronic lung disease
- Smoking in pregnancy impacts on the health of the mother, the unborn baby and wider family members by inhaling second hand smoke. In County Durham we have higher numbers of women who smoke while they are pregnant than the national average
- In County Durham over 41,000 children live in households with adults who smoke, and this not only damages their health but increases their chance of becoming smokers themselves
- In the UK 207,000 children start smoking each year. Among adults who smoke 2 in 3 reported that they started smoking before the age of 18 with 75% regretting ever starting smoking in the first place
- In County Durham there are approximately 69,000 people who continue to smoke, 16% of the adult population – and this is higher than the national average



In County Durham we use the eight-strand approach supported by Fresh North East, the tobacco control office, and we will work towards making smoking history through the Tobacco Control Alliance, by focusing on the following key priorities:

- All partners using an evidence-based approach to reducing smoking prevalence in County Durham
- Motivating and supporting smokers to stop and stay stopped
- Reducing the demand and supply of illegal tobacco products, increasing price and addressing the supply of tobacco to children

This ambition is driven by a vision to achieve a tobacco-free generation and requires around 60,000 smokers in County Durham to quit by 2030.

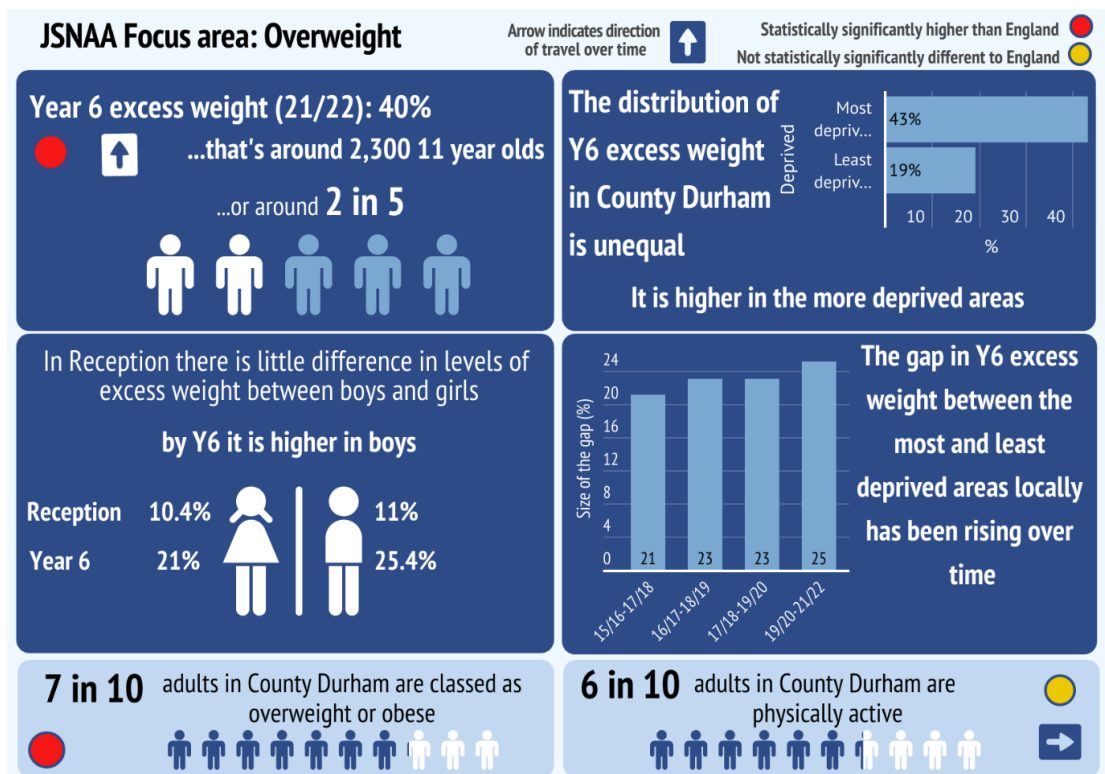
What difference we can expect to see in these areas across the life of the JLHWS (2028)

- Reduction in the number of people smoking to 5% by 2030
- Reduction in the number of hospital admission episodes for diseases related to smoking
- Continued reduction of smoking related deaths
- Reduction in the proportion of mothers smoking at time of delivery
- Significant move towards:
 - Being smoke free
 - Age of sale increase
 - Fairer access to stop smoking services to help those who need them, to use them

2. Enabling healthy weight for all

Why is this a priority?

- What we eat has a big impact on our health, and being overweight or very overweight can lead to significant issues across the life course and into old age
- Being overweight is linked to a wide range of preventable diseases including heart disease, stroke, type 2 diabetes, high blood pressure, and some cancers
- One in five children are overweight or very overweight when they start school, rising to one in three children when they leave primary school. Not only does this increase the risk of becoming overweight in adulthood, but it increases the risk of ill-health and dying early in adult life
- There is a strong link between those who are overweight and some of our residents with the least money in their pockets
- BMI (Body Mass Index) is strongly associated with all deaths
- Depending on how severe it is, being very overweight can reduce life expectancy by an average of three to ten years
- We want to lessen the impact of advertising and the environment which tends to cause unhealthy weight, such as highly concentrated numbers of take aways
- We want to increase breastfeeding rates, as breastfeeding has significant health benefits for babies and their mothers, which include reducing a child's risk of being overweight or very overweight. In County Durham fewer women breastfeed than the England average



In County Durham we will work through the Healthy Weight Alliance, who will work with the Physical Activity Strategy Committee and the Food Partnership, to support people to achieve a healthy weight by focusing on the following key priorities:

- Improve the local food environment so that our residents are able to make more healthy choices
- Empower our residents to be more active in their daily lives by shifting the culture towards moving more, and making this an easy option
- Taking action to improve support and information so that residents are better informed and equipped to make healthier food choices

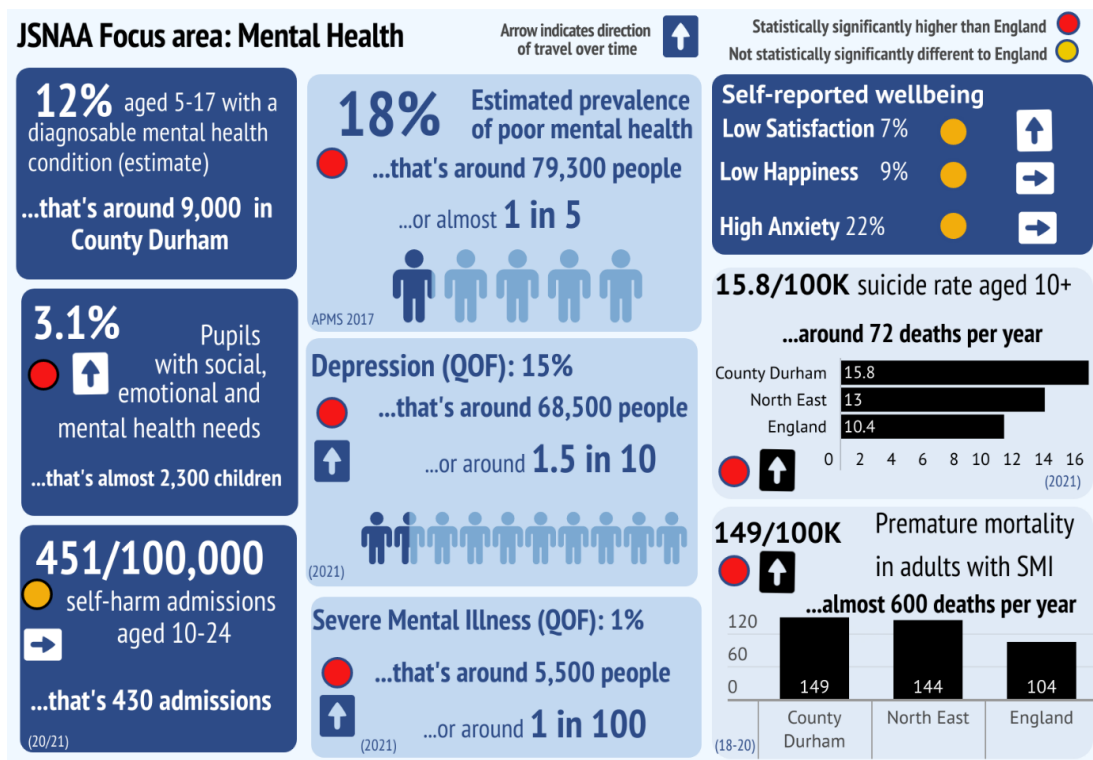
What difference we can expect to see in these areas across the life of the JLHWS (2028)

- Improved stakeholder engagement, where all services are committed to working together to increase levels of healthy weight
- A reduction in the access to and promotion of unhealthy food, with a focus on ensuring prevalence of hot food takeaways does not exceed the County Durham Plan threshold of 5%, and monitoring of the policy that restricts advertising of foods that are high in fat, salt and sugar on Durham County Council platforms
- Increase the number of children who are a healthy weight
- Reduction in the proportion of adults who are overweight and obese
- Increase in the number of physically active children, young people and adults

3. Improving Mental Health, Resilience and Wellbeing

Why is this a priority?

- Mental and physical health are equally important parts of overall health, and can impact on each other
- Depression increases the risk of many types of physical health problems, particularly long-lasting conditions like heart disease, stroke and diabetes
- Poor mental health affects a high proportion of the population, of all ages and from all stages of life
- Its impacts are felt across society on family life, friends and relationships, education, finding work, working, caring for others, leisure pursuits and retirement
- Serious mental illness can cause people to die earlier than those who don't have a serious mental health issue
- Reduced levels of mental resilience, making it harder to recover from challenging events, is more likely to affect residents with the least money in their pockets, who were also worst hit by COVID
- Deaths by suicide have been rising over time across the North East including County Durham. Every life lost to suicide is a tragedy affecting individuals, families and communities
- Children and young people are now more likely to have a mental health disorder compared with before the Covid-19 pandemic



In County Durham we will work together to improve mental health, resilience and wellbeing, through the Mental Health Strategic Partnership (MHSP), focusing on the following key priority areas:

- Improving the mental health of children and young people
- Suicide prevention
- Developing robust system responses for urgent and emergency mental health care
- Develop and implement a consistent dementia strategy
- Resilient communities
- Deliver and embed new transformed models of care for adults with serious mental health issues

The Mental Health Strategic Partnership are developing new approaches to improve everyone's mental health and to enable local residents to gain access to mental health support within their communities.

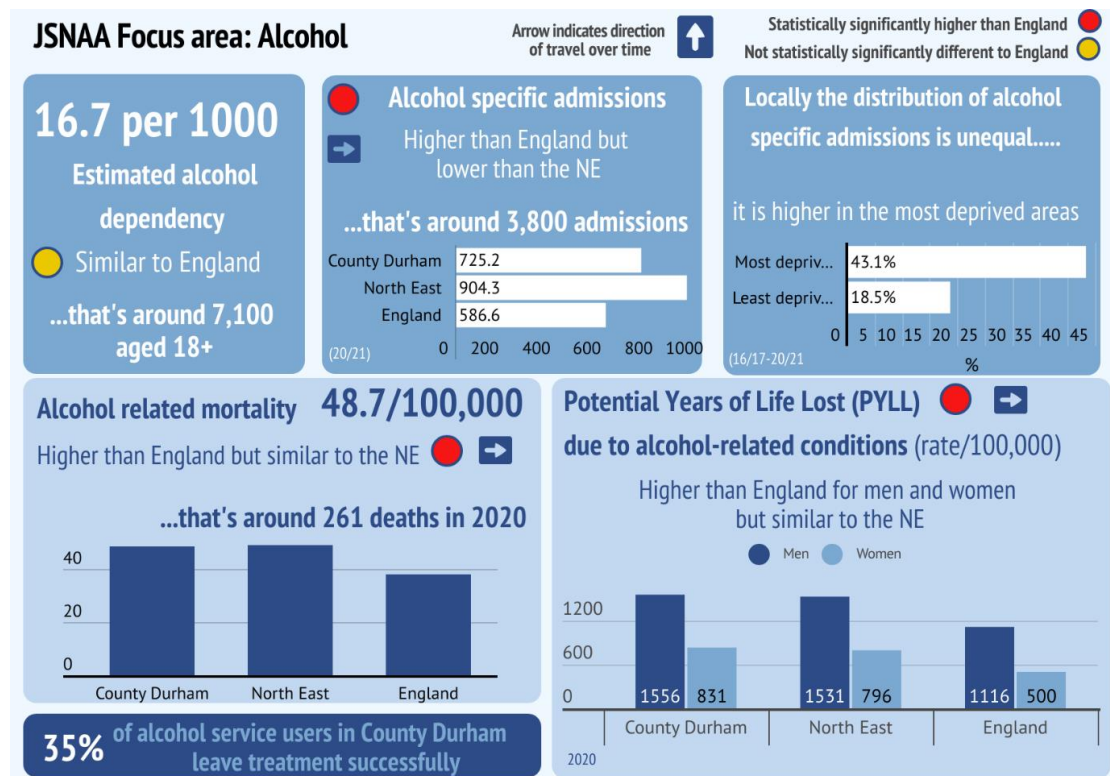
What difference we can expect to see in these areas across the life of the JLHWS (2028).

- Improvement in self-reported wellbeing
- Reductions in reported anxiety levels
- Reductions in depression levels
- Reductions in demand for specialist mental health services
- Reduction in suicide rates
- Increase in people reporting they can access the right help when they need it
- Reducing premature mortality for adults with Severe Mental Illness

4. Reducing Alcohol Harms

Why is this a priority?

- 2020 was the worst year on record for alcohol specific deaths nationally, with the rates being highest in the North East
- There has also been an increase in alcohol-deaths in County Durham, driven by a significant increase in alcoholic liver disease above levels seen before the pandemic
- Despite a decrease in the rates of alcohol-specific admissions to hospitals across the country during COVID, County Durham saw an increase in rates
- Increases in alcohol intake are linked to rises in domestic abuse, tension within the family home, antisocial behaviour and crime rates in communities
- This increases the negative impact and risk to children, young people and vulnerable adults
- Alcohol harms have the biggest impact on some of our residents with the least money in their pockets, which have also been worst hit by COVID
- An estimated 80% of those who are alcohol dependent in County Durham do not access specialist alcohol treatment services. This increases the numbers of people living with long term conditions, including heart disease, stroke and cancer



In County Durham we will work, through the Combating Drugs and Alcohol Strategic and Operational Partnerships, with the support of Balance, our alcohol control office for the North East, to reduce alcohol harms by focusing on the following key priorities:

- Use of an integrated evidence-based strategic approach to reducing alcohol harms in County Durham
- Motivating and supporting people to reduce alcohol intake and encourage those who are drink dependent to access support
- Promote an alcohol-free childhood for all children and young people
- Support minimum unit pricing and lobby for policy change

What difference we can expect to see in these areas across the life of the JLHWS (2028)

- Cultural and policy changes in relation to alcohol consumption
- Reduction in the number of hospital admission episodes for alcohol related incidents and disease
- Reduction of under 75 death rates from chronic liver disease
- Increase in the numbers of adults and young people suffering from drink dependency, who are in treatment
- An increase in successful completions from alcohol treatment
- A reduction in alcohol related anti-social behaviour and crime rates
- More children and young people have an alcohol-free childhood

Informing where we spend our time and money (influencing resources)

- In addition to ensuring the direct spend of the public health grant is used in ways which support delivery against our priorities, the JLHWS will seek to influence the use of resources, financial and otherwise, across the system to support delivery against the four priority areas.
- To maximise the use of NHS resources, the commissioning process will be underpinned by a needs-led approach with a strong focus on ongoing evaluation. Priorities will be determined against impact on reducing health inequalities, improving outcomes, and ensuring high quality service delivery. Where individual initiatives have limited impact, resource will be reinvested to ensure efficient and effective use of public funding. Co-production is embedded within commissioning as well as alignment of the wellbeing principles. In addition, system planning is focussed on longer term transformation, with a clear focus on prevention as well as ensuring sustainability of current service delivery.
- The JLHWS will also seek to influence to maximise the health gain achieved across the spend of every County Durham Pound, again focused on the four priority areas both across Durham County Council and with wider system partners. The County Durham Pound focuses on increasing wealth in the County as a determinant of health but also, seeking to ensure that what is commissioned and provided has a health promoting aspect, or 'health in all policies' approach to it. This could include further development of sustainable transport and action on climate change to maximising health benefits relating to planning applications and new developments, and principles such as community wealth building.
- Beyond financial resources, ensure the Approach to Wellbeing is adopted in decisions affecting resource allocation, for example through work with Area Action Partnerships (AAPs) and communities to support the best use of community assets, human resources, expertise and time to guide and influence the focus of health improving activity.

Role of Health and Wellbeing Board

The Health and Wellbeing Board will:

- Maintain a focus across the life course, from starting well through living well to ageing well in our four priority areas:
 - Making smoking history
 - Supporting people to achieve a healthy weight
 - Improving mental health, resilience and wellbeing
 - Reducing alcohol health harms

It will do this by:

- Receiving updates and assurance from the governance groups around our four priorities so the Health and Wellbeing Board can ensure our collective actions are having an impact on our priorities across County Durham
- Providing added value by holding others to account and supporting partners across the wider system with their agendas, and gaining assurance, for example, relating to health service commissioning and delivery, economic, environment, housing and planning impacts on health across the life course
- Strengthening the relationship with partners who will support the wider influences on health
- Having a health advocacy role by speaking up for our communities in relation to their health and wellbeing, and championing policy change

The Health and Wellbeing Board will also ensure their statutory role of governance around key pieces of work is fulfilled. Areas include:

- Health Protection Assurance
- Better Care Fund
- Joint Strategic Needs and Assets Assessment
- Joint Local Health and Wellbeing Strategy
- Pharmaceutical Needs Assessment
- Transforming care
- Special Educational Needs and Disabilities

Further information on the County Durham Health and Wellbeing Board can be found here: <https://countydurhampartnership.co.uk/health-wellbeing-board/>

JOINT LOCAL HEALTH AND WELLBEING STRATEGY (JLHWS) 2023-28

26 APRIL 2023



Better for everyone

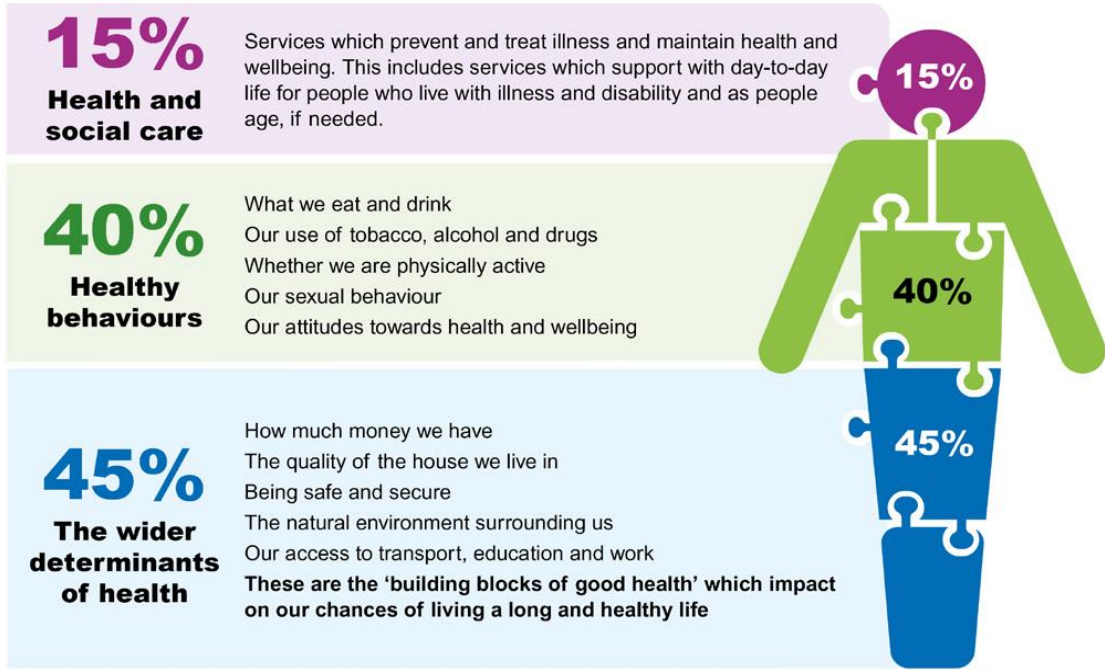


County Durham Health and Wellbeing Board

Vision Page 42	County Durham is a healthy place where people live well for longer
Objective	Improve healthy life expectancy and reduce the gap within County Durham and between County Durham and England
Priorities	<ol style="list-style-type: none">1. Making smoking history2. Enabling healthy weight for all3. Improving mental health, resilience and wellbeing4. Reducing alcohol harms
Leads	<ul style="list-style-type: none">• Tobacco Control Alliance• Healthy Weight Alliance• Mental Health Strategic Partnership• Drug and Alcohol Operational Group / Combating Drugs and Alcohol Strategic Partnership

Inequalities and wider determinants of health

What has the biggest influence on lives being cut short?




McGinnis, J.M., Williams-Russo, P. and Knickman, J.R. (2002) cited in The King's Fund (n.d.). Time to Think Differently. Broader determinants of health: future trends. Available at: <https://www.kingsfund.org.uk/projects/time-think-differently/trends-broader-determinants-health> (Accessed: 9 March 2023).





Making smoking history

Page 44

JSNAA Focus area: Smoking

Arrow indicates direction of travel over time 

Statistically significantly higher than England 
 Not statistically significantly different to England 

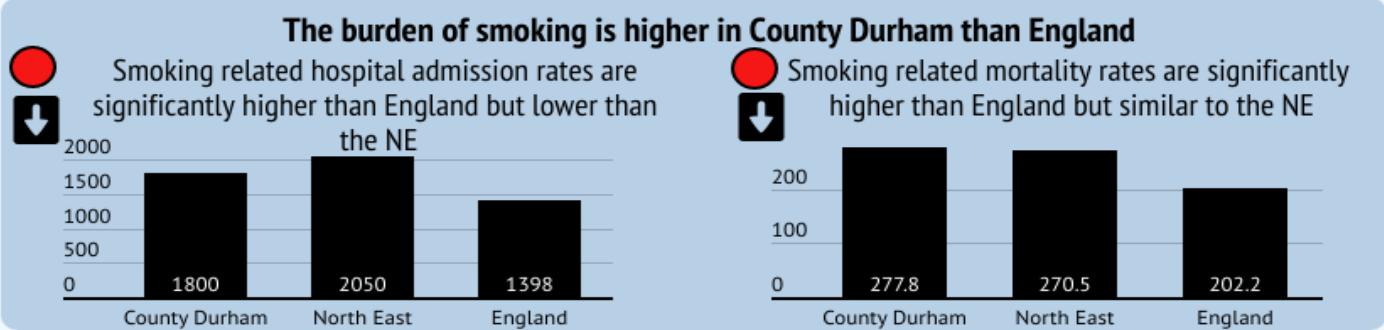
Smoking prevalence (2021): 16.2%
 ...that's around 70,000 smokers



  ...or around **1 in 6** aged 18+



Smoking at time of delivery (21/22): 14.6%
 ...that's around 570 mums

  ...or around **1 in 7**

29.2%   People working in manual jobs are twice as likely to smoke than other occupations


Around 900 people die a year in County Durham from illnesses linked to smoking



102.6 /100K   Lung cancer registrations remain statistically significantly higher than England






Enabling healthy weight for all

JSNAA Focus area: Excess Weight

Arrow indicates direction of travel over time 

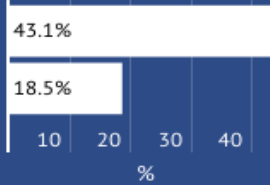
Statistically significantly higher than England 
Not statistically significantly different to England 

Year 6 excess weight (21/22): 39.8%
  ...that's around 2,300 11 year olds
 ...or around **2 in 5**



The distribution of Y6 excess weight in County Durham is unequal


It is higher in the more deprived areas



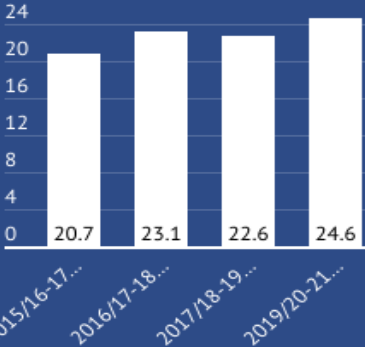
Deprivation Level	Percentage
Most deprived 10%	43.1%
Least deprived 10%	18.5%

In Reception there is no significant difference in levels of excess weight between boys and girls
 by Y6 it is significantly higher in boys

Year	Girls	Boys
Reception	10.4%	11%
Year 6	21%	25.4%



The gap in Y6 excess weight between the most and least deprived areas locally has been rising over time



Year	Gap (%)
2015/16-17...	20.7
2016/17-18...	23.1
2017/18-19...	22.6
2019/20-21...	24.6

7 in 10 adults locally are classed as overweight or obese







6 in 10 adults in County Durham are physically active
 




Improving mental health, resilience and wellbeing

JSNAA Focus area: Mental Health

Arrow indicates direction of travel over time 

Statistically significantly higher than England 
Not statistically significantly different to England 



12% aged 5-17 in with a diagnosable mental health condition (estimate)
...that's around **9,000** in County Durham




3.1%  Pupils with social, emotional and mental health needs



...that's almost **2,300** children



450.9/100,000  self-harm admissions aged 10-24


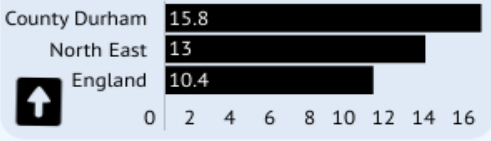
...that's **430** admissions
(20/21)

18.3% Estimated prevalence of poor mental health
 ...that's around **79,300** people
...or almost **1 in 5**




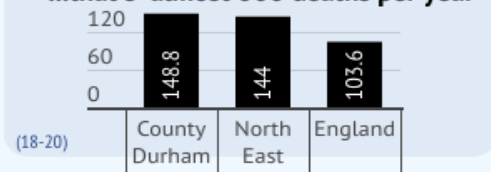
APMS 2017
Depression (QOF): 15%
 ...that's around **68,500** people
 ...or around **1.5 in 10**


(2021)
Severe Mental Illness (QOF): 0.99%
 ...that's around **5,500** people
 ...or around **1 in 100**
(2021)

Self-reported wellbeing
Low Satisfaction 7.2%  
Low Happiness 8.8%  
High Anxiety 21.8%  

15.8/100K suicide rate aged 10+
 ...that's around **72** deaths per year


County Durham	15.8
North East	13
England	10.4


148.8/100K Premature mortality in adults with SMI
  ...that's almost **600** deaths per year




County Durham	148.8
North East	144
England	103.6



Reducing alcohol harms

JSNAA Focus area: Alcohol

Arrow indicates direction of travel over time 

Statistically significantly higher than England 
 Not statistically significantly different to England 

16.7 per 1000

Estimated alcohol dependency

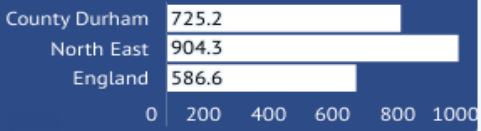
 Similar to England

...that's around 7,100 aged 18+

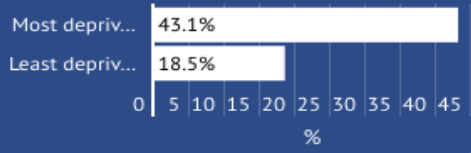
Alcohol specific admissions

Significantly higher than England but significantly lower than the NE



...that's around 3,800 admissions



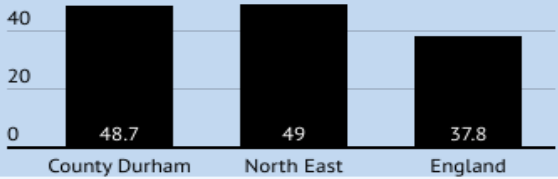
Locally the distribution of alcohol specific admissions is unequal..
it is higher in the most deprived areas



Alcohol related mortality **48.7/100,000**

Significantly higher than England but similar to the NE  

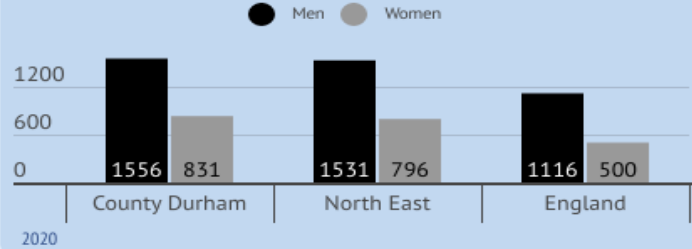
...that's around 261 deaths in 2020



Potential Years of Life Lost (PYLL)

due to alcohol-related conditions (rate/100,000)

Significantly higher than England for men and women but not significantly different to the NE



35% of alcohol service users in County Durham leave structured treatment successfully

Page 47



Influencing resources

Page 48

Across the system to support delivery against the four priorities

- Commissioning
 - Focus on prevention
 - Needs led approach
 - Coproduction
- Strong focus on:
 - Ongoing evaluation
 - Reducing inequalities
 - High Quality Service delivery
 - Improving outcomes
- Approach to wellbeing adopted in decisions affecting resource allocation



Role of HWB

- Cyclical updates against priority areas
- Support wider system
- Statutory governance role
- Marketing campaigns



Next steps

- Page 50 Comments will be fed into JLHWS / development of action plans
- Final JLHWS to HWB on 10 May for sign off
- Any questions / comments?



**Children and Young People's Overview
and Scrutiny Committee**

26 April 2023



**Response to the Children's Social Care
Review**

**Report of John Pearce, Corporate Director of Children and Young
People's Services**

Electoral division(s) affected:

County Wide.

Purpose of the report

- 1 The purpose of this report is to give members an overview of the Government's response to the Children's Social Care Review, the Child Safeguarding Practice Review Panel's review into the deaths of Arthur Labinjo-Hughes and Star Hobson, and the Competition and Markets Authority review in relation to the provision of children's homes.

Executive Summary

- 2 In 2022 there were three significant reviews published which together call for system wide reform to children's social care.
- 3 On February 2nd 2023 the government published its response to these reviews in three publications. The overarching implementation strategy document is: Stable Homes, Built on Love. Alongside this the government published two separate documents: Children's Social Care National Framework and Child and Family Social Worker Workforce.
- 4 All three publications are currently subject to a consultation period which is due to end on 11th May 2023.
- 5 This report provides a high level summary of the recommendations made within each of the three publications and argues that Durham Children's Social Care are in a strong position to contribute to the development of the final recommendations, and respond in a timely way when the final recommendations are published.

Recommendation

- 6 Members of Children and Young People's Overview and Scrutiny Committee are recommended to
 - (a) Note the contents of the report;
 - (b) Give consideration to responding to the consultation: [Policy papers and consultations - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/policies/policy-papers-and-consultations)

Background

- 7 In 2022 there were three significant reviews published which together call for reform to children's social care: The Independent Review of Children's Social care; The Child Safeguarding Practice Review Panel's review into the tragic deaths of Arthur Labinjo-Hughes and Star Hobson and the Competition and Markets Authority review in relation to the provision of children's homes.
- 8 On February 2nd 2023 the government published its response to these reviews in three publications. The overarching implementation strategy document is: Stable Homes, Built on Love. Alongside this the government published two separate documents: Children's Social Care National Framework and Child and Family Social Worker Workforce.
- 9 All three publications are currently subject to a consultation period which is due to end on 11th May 2023.

[Policy papers and consultations - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

Stable Homes, Built on Love: Implementation Strategy and Consultation

- 10 This strategy is organised around 6 themes, referred to within the strategy as "pillars".
- 11 The 6 pillars are summarised below:

Pillar 1: Family help provides the right support at the right time so that children can thrive with their families

- £45m for up to 12 'Families First for Children' family help pathfinders (three in 2023 and up to nine in 2024), co-designing and delivering end-to-end service reform, with three elements: local, multi-disciplinary family help services, child protection lead practitioners, and a focus on family networks and kinship care;
- Development of knowledge and skills statements for family help workers;
- Consult on enabling a broader range of practitioners to 'case hold' children in need cases Work to join up family help funding and strategy across government;
- Law Commission to review children's social care legislation for disabled children with a view to simplifying and streamlining;
- Reference to building culturally competent practice and better responding to the needs of families facing material deprivation.

Pillar 2: A decisive multi-agency child protection system:

- 'Families First for Children' pathfinders will test a new child protection lead practitioner role which will co-work with family help teams;
- Consult on new National Multi-Agency Child Protection Standards in 2023 as part of the planned update to Working Together 2018;
- Report to go to Parliament setting out ways to improve information sharing between safeguarding partners, including exploration of the use of a single consistent child identifier;
- Strengthen leadership across multi-agency partnerships via amends to Working Together 2018 guidance, improved accountability and an increased role for education in local safeguarding arrangements, consult on education's role as a safeguarding partner. Following a consultation, areas will be funded to implement the agreed reforms, with Pathfinder areas being early adopters;
- Act on delays and improve parental engagement in the family courts.

Pillar 3: Unlocking the potential of family networks:

Create a culture of family first by:

- Using the 'Families First for Children' pathfinders, test how to implement family group decision making and Family Network Support Packages. Seven family help pilot areas to test Family Network Support Packages only;
- Publish a national kinship care strategy by the end of 2023. This will include issues such as educational entitlements, training and LA practice plus related reforms e.g. financial allowances;
- Invest £9m in a training and support offer for all kinship carers (those with a legal order and informal arrangements) by the end of this Parliament;
- Explore the case for mandating a financial allowance for all SGOs and CAOs.

Pillar 4: Putting love, relationships and a stable home at the heart of being a child in care:

- £27m over two years for a fostering recruitment and retention programme to be initially trialled in the North East region;
- National minimum allowance for fostering to increase by 12.43%;
- Continuing reforms to supported accommodation; registration in 2023, inspection in 2024;

- Two regional RCC pathfinders to plan, commission and deliver care places – note the ‘all’ has been dropped and no figure on level of investment provided;
- DfE to commission an external organisation to support LAs with forecasting, procurement and market shaping efforts;
- Support improvements in the quality of leadership and management in the children’s homes sector – leadership programme, KSS, focus on CPD, considering professional registration of the residential childcare workforce;
- Implement an opt-out independent advocacy, this will not replace IROs or Reg 44 visitors;
- Introduce financial oversight regime for the largest providers thereby increasing transparency and reducing risks of sudden exit;
- Expert group to review standards of care, regulation and guidance and consult on legislative changes;
- £30m over two years to fund well evidenced interventions in family finding, befriending and mentoring programmes;
- Consult on strengthening and extending corporate parenting principles to a wider set of relevant bodies in Autumn 2023;
- Create opportunities for children in care and care leavers to achieve their potential with a focus on education, training and employment via Virtual School Heads, Pupil Premium+, an uplift to the apprenticeship bursary and a refresh of the care leaver covenant;
- Universal offer of wrap around support and accommodation for all care leavers via an uplift in the leaving care allowance and strengthening Staying Put / Staying Close, with entitlements up to age 23;
- Focus on the mental and physical health of care leavers and addressing health disparities to increase life expectancy by building understanding and skills of social workers plus other professionals;
- Update existing guidance on promoting the health and wellbeing of children in care and extend it to cover care leavers up to age 25;
- Consult on extending the mandatory reporting of deaths or serious incidents involving children to include the deaths of care leavers.

Pillar 5: A valued, supported and highly skilled social worker for every child who needs one

- SWE to inspect all initial education routes by July 2025, commission research on the role of practice educators and take a greater role in overseeing them;

- Development of a five-year Early Career Framework for social workers, starting with early adopters in Spring 2023 to design, develop and test ECF delivery mechanisms;
- Boosting social worker recruitment and retention, including an additional 500 child and family social work apprentices, reviewing student social work bursaries and education support grants, and exploring international recruitment;
- National Workload Action Group to identify unnecessary workload drivers;
- Reduce the cost and reliance on agency social workers (separate consultation).

Pillar 6: A system that continuously learns and improves and makes better use of evidence and data

- Introduce a Children’s Social Care National Framework, supported by a data dashboard by the end of 2023 with implementation by the end of 2024 (separate consultation);
- Publish a data strategy by the end of 2023 setting out plans for transforming data in children’s social care and establish a Data and Digital Expert Forum;
- Align inspection with the National Framework. Ofsted to rebalance how it looks at practice so it acts as a lever for improvement;
- Development of a suite of practice guides, this work will be overseen by the National Practice Group;
- Enhancing the DfE’s intervention role and offer via a clearer interventions policy and escalation pathway, new focus on ‘getting to good’ in RI rated Las;
- Before the next Spending Review DfE, in consultation with DLUHC, will aim to update, publish and consult on a new formula for children’s services funding.

Children’s Social Care National Framework

12 This proposed framework sets out five key principles that should underpin practice nationally:

- Children’s welfare is paramount and their feelings are sought, heard and responded to;
- Children’s social care work in partnership with families;
- Children are raised by their families, in family networks or in family environments wherever possible;
- Practice engages partner agencies at every stage of support to identify and meet the needs of children, young people and families;

- Practice and services are demonstrably poverty-aware and anti discriminatory.
- 13 It describes four outcomes that enable children to thrive:
- Children, young people and families stay together and get the help they need;
 - Children and young people are supported by their family network;
 - Children and young people are safe in and outside of their homes;
 - Children in care and care leavers have stable, loving homes.
- 14 It then sets out two system level enables that help children's social care to achieve these outcomes:
- The workforce is equipped and effective;
 - Leaders drive conditions for effective practice.
- 15 It proposes a data set of key indicators that would provide a common understanding of how well the above outcomes are being achieved.

Child and Family Social Worker Workforce

- 16 This document proposes 8 national rules in relation to the recruitment of agency staff:
- Engage agency workers only via commercial compliant procurement routes;
 - Only engage agency workers within national price caps;
 - Minimum of five years post-qualified experience in LA children's social care and completion of ASYE to qualify for agency role;
 - Not engage project teams for social work;
 - Standard references for all candidates that relates to standard of practice for any agency worker;
 - Three month wait for workers leaving substantive roles before taking agency role in same region;
 - Minimum six week notice period for agency social workers;
 - Quarterly data return.

Current position

- 17 The system wide approach within the government's response is welcomed. The Review itself recommended an investment of £2 billion over the next five years. The government's response has identified funding to support the pathfinder pilot areas, but the funding to support the wider implementation of these reforms remains unclear and this will be vital to successful implementation.

- 18 Within Durham Children's Social Care we are in a very strong position to respond to the final strategy; our most recent Ofsted ILACS inspection found that our practice is good and graded our leadership of practice as outstanding.
- 19 We have a strong practice framework (Signs of Safety) which is underpinned by principles aligned to those proposed within the Children's Social Care national framework, and has a focus on identifying and working with the existing networks of support that exist around families.
- 20 We have strong partnerships in Durham, a well established Early Help service that is located within communities, and a track record of establishing new and innovative services where there is a need identified. These factors will provide a sound foundation when responding to any necessary structural changes (Pillar 1 and 2).
- 21 We have a well established academy for our Newly Qualified Social Workers and have recently enhanced the offer of support for this cohort to continue into year 2 and 3. We won the Employee of the Year Award at the Social Worker of the Year Awards in November 2022. These facts combined with a comprehensive training offer will provide a solid base from which we can respond to recommendations in relation to establishing a 5-year early career framework (Pillar 5).
- 22 We have a comprehensive Sufficiency Strategy that aligns to the ambition set out in the strategy (Pillar 4).
- 23 We have begun to take part in the trial of a fostering recruitment and retention programme on a regional footprint across the Northeast (Pillar 4).
- 24 Workforce pressures are well documented locally and nationally and the proposals within the Children and Family Social Worker workforce publication are welcomed; there is an urgency to implement the proposals nationwide.

Timescale of future developments

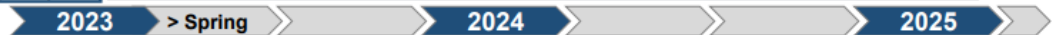
- 25 In addition to the fostering recruitment and retention pilot that we are already involved in, the current time the Department of Education have set out a high-level summary of the opportunities that Local Authorities will have to shape the reforms over the next 18 months:

Opportunities for Local Authority Involvement

Over the next 18 months there will be multiple opportunities for local authorities to shape the reforms and be involved in activities addressing urgent system issues. This is a high level summary, and we will share further information soon.

Foster Carer Recruitment & Retention – initially building skills and capacity in the Northeast, then select further areas for roll out	<input type="checkbox"/> NE* Support Hub set up in 12 LAs	<input type="checkbox"/> NE communications campaign launch, LA clusters for further roll out selected (Autumn 2023)	<input type="checkbox"/> Wider roll out of Support Hubs
Addressing use of Agency Workforce taking action through formal Consultation, Task & Finish Group and feedback through informal channels	<input type="checkbox"/> Consult until May 11 th	<input type="checkbox"/> Publish national rules (September 2023)	<input type="checkbox"/> National rules in place spring 2024
Kinship Carers Training & Support Bespoke offer available to all kinship carers to be developed and rolled out		<input type="checkbox"/> Delivery partner contract awarded	<input type="checkbox"/> Delivery starts (Spring 2024)
Families First for Children Pathfinder Testing reform delivery across: Family Help, Child Protection and Family Networks - before we consider wider roll out		<input type="checkbox"/> Wave 1 live autumn 2023 (3 areas)	<input type="checkbox"/> Wave 2 live 2024 (Up to 9 areas)
Family Network Support Package Pilot Evaluating impact of new package authorities, to keep families together	<input type="checkbox"/> Wave 1 live summer 2023 (4 areas)		<input type="checkbox"/> Wave 2 live 2024 (3 areas)
Regional Care Cooperatives Pathfinder Co-designing regional commissioning model, in partnership with the sector			<input type="checkbox"/> Live in 2 regions
Early Career Framework to support career development (replacing ASYE) and strengthen social worker skills and knowledge	<input type="checkbox"/> Design and Test with Early Adopter local authorities – work on-going from Spring 2023 onwards		
National Framework and Dashboard to set national direction for practice with clear outcomes, and support better use of data and transparency	<input type="checkbox"/> Consult until May 11 th	<input type="checkbox"/> Issued as Statutory Guidance by end of the year	

Note additional announcements in strategy not captured above, e.g. uplift in care leaver's allowance, Family Finding programmes



Underpinned by **formal consultations and engagement and learning events**, in addition to existing feedback routes and forums. DfE will consult on and prepare for **legislative changes** (subject to parliamentary time) and necessary guidance (e.g. Working Together Update)

March 2025 Spending Review Period ends, new parliament

26 As the Department of Education share more detailed information about these opportunities we will review them and respond to those where we believe we can make a real contribution to the development of the children's social care system.

27 John Pearce, Director of Children and Young People's Services, will take up the role of President of ADCS from 1st April 2023 and as such will be a member of the Children's Social Care National Implementation Board. This will mean that Durham Children's Services will continue to have an excellent understanding of developments and opportunities and enable us to respond in a timely way.

Conclusion

28 The three publications represent significant proposed reforms across the children's social care system and will require significant investment from central government to effectively implement. With this investment, Durham Children's Social Care are well placed to respond in a timely way to the final recommendations.

Background Papers

- None

Other useful documents

- None

Authors(s)

Chris Ring

Tel: 03000 268657

Appendix 1: Implications

Legal Implications

None.

Finance

None.

Equality and Diversity / Public Sector Equality Duty

None.

Climate Change

None.

Human Rights

None.

Crime and Disorder

None.

Staffing

None.

Accommodation

None.

Risk

None.

Procurement

None.

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Government response to the Children's Social Care Review and Child
Safeguarding Practice Review Panel Review – An overview

Children and Young People's Overview and Scrutiny Committee

26th April 2023

Chris Ring – Strategic Manager, Safeguarding and Professional Practice



Children's Social Care National Framework

A government consultation on principles for practice, expected outcomes and indicators: statutory guidance

Launch date 2 February 2023
Respond by 11 May 2023



Stable Homes, Built on Love: Implementation Strategy and Consultation

Children's Social Care Reform 2023

February 2023



Child and Family Social Worker Workforce

Government consultation

Launch date: 2 February 2023
Respond by: 11 May 2023

“Stable Homes, Built on Love” strategy written around 6 pillars

- **Family Help provides the right support at the right time so that children can thrive with their families** – 12 Families First for Children Pathfinders - £45 million
- **A decisive multi-agency child protection system** – Child Protection Lead Practitioner role and co-located multi-agency teams with responsibility for child protection. Includes strengthening of Contextualised Safeguarding
- **Unlocking the potential of family networks** – National Kinship Care Strategy
- **Putting love, relationships and a stable home at the heart of being a child in care** – 6 missions
- **A valued, supported and highly-skilled social worker for every child who needs one** – 5 year early career framework
- **A system that continuously learns and improves, and makes better use of evidence and data** – Children’s Social Care National Framework

Children's Social Care National Framework

- **Five key principles**
- **Four outcomes that enable children to thrive**
- **Two system level enables the help children's social care thrive**
 - **The workforce is equipped and effective**
 - **Leaders drive conditions for effective practice**
- **Proposed data set of key indicators**

Child and Family Social Worker Workforce

- **Proposes 8 national rules:**
 - **Engage agency workers only via commercial compliant procurement routes;**
 - **Only engage agency workers within national price caps;**
 - **Minimum of five years post-qualified experience in LA children's social care and completion of ASYE to qualify for agency role;**
 - **Not engage project teams for social work;**
 - **Standard references for all candidates that relates to standard of practice for any agency worker;**
 - **Three month wait for workers leaving substantive roles before taking agency role in same region;**
 - **Minimum six week notice period for agency social workers;**
 - **Quarterly data return.**

Current position

- **System wide approach is welcomed – funding remains unclear**
- **Durham CSC very strong position to respond**
 - **Strong practice framework (Signs of Safety)**
 - **Strong partnerships and well established Early Help Service**
 - **Well established ASYE academy and workforce offer**
 - **Comprehensive sufficiency strategy**
 - **Part of regional Fostering pathfinder**
- **A genuine opportunity to influence the system at a national level**



Promoting the Rights of Children and Young People



[Don't Forget About Us \(Master \) on Vimeo](#)

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Children and Young People's Overview and Scrutiny

26 April 2023

The Pause Programme Durham



Report of John Pearce, Corporate Director of Corporate Director of Children and Young People's Services

Purpose of the Report

- 1 The purpose of this report is to provide an update on Pause Durham.

Executive summary

- 2 Pause aims to reduce the number of children being taken into care and improve the lives of women who have had two or more children permanently removed from their care. Pause provides intensive, ongoing practical and emotional support. It is unique in targeting adults who have had engagement with children's social care as mothers but are no longer eligible for support due to their children being permanently removed from their care.
- 3 The women who are eligible have some of the most significant and complex needs in our population. Findings from national evidence qualitative and quantitative data suggest that Pause generally had a positive and significant impact on the women engaging with the programme, many of whom had complex, multiple, and mutually reinforcing needs.
- 4 In order to participate, women must agree to take effective contraception. Pause then offers them an intensive, flexible programme of support, to tackle destructive patterns, develop new skills and avoid further trauma in order to build a more positive future for themselves. The Pause programme is delivered with each woman over a period of 18 months.

Recommendation

- 5 Children and Young People's Overview and Scrutiny is recommended to note the contents of the report.

Background

- 6 Office for National Statistics data identifies that approximately 1% of the County Durham population are aged under 1. More than 8% of the total children open to Durham Children Social Care (DCSC) are under one. 20% of all children that come into our care are under 1, the next largest group is 16-year-olds at 9%.
- 7 Of contacts into First Contact, it is noted that 45% of unborn born babies and 34% of under one's go straight to a statutory referral. This is in comparison to 23% of the overall contacts of other age groups. A higher proportion of unborn and under one contact's are also triaged in the MASH than for other age groups.
- 8 A higher proportion of children who are and become children in our care (CiC) in Durham are aged under one than in comparators. In 2020/21, Durham had the 5th highest under one CiC starts in the country with 29% of all CiC starts in Durham. In 2021/22, Durham dropped to 23rd highest under one of CiC children in the country, which was 24% of all CiC starts in Durham. This has reduced again to 50th highest in the country, which is 21% of all CiC starts in Durham.
- 9 A reduction in the under one CiC starts has been a strategic priority and led to implementation of the Pre-birth and Under One development group. Strategies have included the mapping and review of universal services, introduction of pre-birth clinics chaired by strategic manager and Pause intervention.
- 10 Barnardo's were initially commissioned to deliver a regional Pause model for an 18-month period which ended April 2020. During this period the scope was limited to women who lived in the east of county. Given the success DCSC were keen to look at ways to enable women to access the service to women across the county.
- 11 Barnardo's were commissioned to deliver the Pause model county wide in November 2020. At this point funding was split between Durham County Council (DCC) and Pause, who were successful in achieving match funding from a DfE grant. The agreement was that Pause would deliver one cohort of women and at the end of that period Pause would support DCC bring the model inhouse, working closely with the Pre-Birth Intervention Service.
- 12 Pause moved over to DCC on 1st August 2022. Pause have agreed to fund the licence cost for 20 months which will ensure the programme will continue. This allows an opportunity to develop a tailored programme to meet the needs of women in Durham.

- 13 To enable the women, assess the support and intervention they need, pathways have been established with sexual health, domestic abuse services and housing. The next step is to establish a pathway with mental health services.

Pause Durham – Previous Cohort

- 14 There were 22 women who completed the Pause programme who graduated in July 2022. The 22 women on the programme had a total of 83 children removed from their care (an average of 4 children per woman). The women range in age from 22 – 40 years old, with an average age of 29 years. It is noted that 38% of the women where care experienced. To date there has been no pregnancies of the women who are currently working with Pause for those who have graduated.
- 15 The feedback from the women showed an improvement in all areas, particularly domestic abuse, housing, self-esteem and recovery from loss. The women also reported benefits in confidence, self-worth, coping mechanisms and help with the day-to-day challenges and trauma.
- 16 Although reunification is not the aim of Pause, we are aware that sometimes children have returned to women following positive engagement with the Pause program. One Pause Durham who graduate in the summer of 2022 has sustained so much positive progress she has recently had her two children returned into her care.
- 17 18 of the women who graduated continue to link in with the Pause practitioners, this helps to evidence long term impact of the service.

One Woman's Story

- 18 When A first became involved with Pause she was having very little contact with her children and the relationship had broken down between her and her parents (who were caring for two of her four children). She was drinking around two bottles of wine a day and using hundreds of pounds on cocaine each week. A was not paying her gas, electricity or rent – so her tenancy was at risk - and she was in large amounts of debt. She was being financially exploited by local drug dealers, who were lending her money with 400% interest. They would vandalise her home and threaten her when she could not repay. When she did manage to abstain for short periods, dealers would post drugs through the letter box to tempt her back to using. A was extremely socially anxious, and cancelled many meetings before her first successful visit, preferring to chat on the phone or via text. She did not attend any Pause group activities but did get into a rhythm of meeting her Practitioner weekly.

- 19 During her time working with Pause, A was granted a dept relief order, paying off most of her debts. This paid off her rent arrears and allowed her to move away from the drug dealers who were harassing her at her previous address. She is now paying her rent, gas and electricity bills each month and is enjoying having money for food and self-care activities.
- 20 Since graduating from Pause, A has continued to take steps toward her goals. A has been absent from drugs and alcohol for over 7 months. She is completing a course at Humankind, to become a volunteer. A has recently had a positive assessment and is now having unsupervised contact with her youngest son. A is positive and hopeful for the future.

Durham Pause Women – Current Cohort

- 21 Pause Durham currently working with 21 women (11 who are on the program, 10 who are in the engagement phase). The 11 women on the programme have had a total of 33 children removed from their care (an average of 3 children per woman). The women range in age from 19 – 38 years old, with an average age of 26 years. 73% of the women have care experience.
- 22 The main area of need for the women currently on the programme is mental health, domestic abuse, drug and alcohol abuse, learning needs and homelessness.
- 23 The true Pause Model works with women who have had 2 or more children removed permanently from their care during care proceedings. Durham Pause are actively working with younger women who have had one child permanently removed. It is hoped that earlier support will enable the women go on and achieve better outcomes and prevent further children removed from their care.

Conclusion

- 24 Pause is a service for women who do not have children in their care. The vision is of a society where no family experiences the removal of a child more than once. That women who experience, or are at risk of, the removal of children into care are given the best possible support.
- 25 There is strong evidence from national data that those issues addressed through the Pause programme results in harm reduction in areas such as domestic abuse, substance & alcohol misuse, mental health, housing etc. It is important to note that the research mirrors the outcomes of the women who have graduated from the Durham Programme. Pause intervention in Durham has resulted in improvements in the women's confidence and self-esteem which has

led to secure homes and engaging in education and employment, which would not likely have been achieved if it was not for Pause intervention.

Background papers

- None.

Other useful documents

- None.

Author(s)

Jac Tyler

Tel: 03000 262155

Appendix 1: Implications

Legal Implications

The Pause programme assists the authority to comply with the duty in Schedule 2 Paragraph 7 Children Act 1989 to take reasonable steps to reduce the need to issue care proceedings in respect of children in this area.

Finance

None.

Consultation

None.

Equality and Diversity / Public Sector Equality Duty

None.

Climate Change

None.

Human Rights

None.

Crime and Disorder

None.

Staffing

None.

Accommodation

None.

Risk

None.

Procurement

None.

Pause Durham

Jac Tyler, Strategic Manager Children and Families East
Children and Young People's Overview and Scrutiny Committee
26 April 2023



What data tells us

- In 2020/21 Durham had the 5th highest under one CiC starts in the country, with 29% of all CiC starts in Durham.
- In 2021/22 this reduced to 23rd highest in the country, with 24% of all CiC starts in Durham
- In 2022/23 Durham were 50th highest in the country, with 21% of all CiC starts in Durham

What have we done

- Pre-birth & Under 1 development group
- Mapped out universal offer for pre-birth and under 1
- CSC introduced pre-birth clinics
- Pause

Pause Durham

- Pause aims to reduce the number of children being taken into care and improve the lives of women who have had one or more children permanently removed from their care.
- Pause is unique in targeting adults who have had engagement with children's social care as mothers but are no longer eligible for support due to their children being permanently removed from their care.
- The women who are eligible have some of the most significant and complex needs
- Pause offers them an intensive, flexible programme of support, to tackle destructive patterns, develop new skills and avoid further trauma in order to build a more positive future for themselves
- The Pause programme is delivered with each woman over a period of 18 months.

Durham Pause Journey

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Barnardo's were initially commissioned to deliver the Pause programme in the east of the county, which came to an end in April 2020.

Apr. 2020

Pause were then commissioned to deliver a county wide programme in Nov 2020, this was jointly funded by DCC and Pause, who had been successful in achieving match funding DfE grant

Nov. 2020

Funding was secured and Pause moved over to Durham in August 2022. Pause have agreed to fund the licence for 20 months

Aug. 2022

Pause Durham – Previous Cohort

- Pause Durham actively worked with 22 women
- The 22 women on the programme had a total of 83 children removed from their care.
- The women range in age from 22 – 40 years old.
- 38% of the women are care experienced
- The 22 women graduated from Pause in July 2022
- The feedback from the women has highlighted a number of positives; grown in their confidence, access to sexual health, domestic abuse services, housing and education
- None of the women have had any further pregnancies during or following intervention
- One woman has had her 2 children returned to her care

Pause Durham – Current Cohort

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- Pause Durham are actively working with 21 women in total – 11 who are fully on the programme
- The 11 women have had a total of 33 children removed from their care
- 73% of the women are care experienced
- The main area of need for the women currently on the programme is mental health, domestic abuse, drug and alcohol abuse, learning needs and homelessness

One Woman's Story

Before Pause

- 4 children removed from her care
- Chronic alcohol and drug use
- Financially exploited by drug dealers
- Substantial drug debts
- Risk of eviction
- Poor relationships with her family
- Isolated
- Socially anxious
- Low self esteem & self worth

During & After Pause

- Granted a dept relief order
- Secured housing away from drug dealers
- Paying bills regularly
- Abstinent from drug and alcohol for over 7 months
- Rebuilt relationships with her family and children
- Working towards drug & alcohol, support volunteer
- Unsupervised time with her children
- Grown in self confidence and self work
- Positive about her future

Pause Graduation – July 2022

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- <https://www.youtube.com/watch?v=LzlOsg-ltE4>



**Children and Young People
Overview and Scrutiny Committee**

26 April 2023

**Quarter Three, 2022/23
Performance Management Report**

Ordinary Decision



Report of John Hewitt, Chief Executive Officer

Electoral division(s) affected:

Countywide.

Purpose of the Report

- 1 To present an overview of progress towards achieving the key outcomes of the council's corporate performance framework and highlight key messages to inform strategic priorities and work programmes.
- 2 The report covers performance in and to the end of quarter three, 2022/23, October to December 2022.

Executive Summary

- 3 This report is structured around a performance framework which reflects our current [Council Plan](#) (2022-2026), and its format has been developed to provide greater focus on how the council is contributing to achieving the people's vision.
- 4 The performance report is structured around two main components.
 - (a) State of the County indicators to highlight areas of strategic importance and reflected in both the [County Durham Vision 2035](#) and the [Council Plan](#).
 - (b) Performance of council services and progress against major initiatives as set out in the [Council Plan](#).
- 5 Performance is reported on an exception basis with key messages against the five thematic areas within the Council Plan 2022-2026: our economy, our environment, our people, our communities, and our council. It is broken down into national, regional and local picture, things that are going well, areas which require attention and other areas to note.
- 6 The [Council Plan](#) has undergone its annual refresh and the plan for 2023-2027 was approved by Council on 22 February. The performance

framework is now being adjusted accordingly and will form the structure of this performance report from quarter one, 2023/24.

Context

- 7 The legacy of COVID-19 can still be seen in both our performance reporting and within our services. Performance data relating to the last two financial years are not representative for many areas so, wherever possible, we have compared current performance against pre-pandemic data.
- 8 However, the greatest challenge for our residents, local businesses and the council is the current cost-of-living crisis which has steadily worsened over the last 12 months. High inflation, currently at 10.5%¹, has largely been driven by the rise in the cost of fuel and energy bills, which is being impacted significantly by world events, including the war in Ukraine.
- 9 The cost-of-living crisis is having a triple impact.
 - (a) Impact on our residents. High inflation is outstripping wage and benefit increases, so income is falling in real terms. This is driving demand for services which support people facing financial hardship or who are in crisis, as well as services provided to vulnerable people such as social care for children and adults.

We are receiving more contact from households seeking financial assistance, and we are continuing to see high volume of applications for Welfare Assistance and Discretionary Housing Payments. We are continuing to support residents through the crisis with various initiatives and funds.

- (b) Increased costs for the council. Premises and transport costs have increased in line with higher energy costs and fuel prices, most noticeably across service areas such as waste and Home to School Transport. Contract prices are also being affected, and more contracts are reflecting changes in demand.

We have created a £10 million Budget Support Reserve to assist with inflationary pressures within 2022/23.

- (c) Reduced income for the council. Users of council services may seek to save money resulting in a fall in income from discretionary services such as leisure centres and theatres. We estimate that during 2022/23 our income will be under budget by £1.47 million.

¹ UK Consumer Price Index for 12 months to December 2022. Indicative [modelled consumer price inflation estimates](#) suggest that the CPI rate would have last been higher in October 1981, where the estimate for the annual inflation rate was 11.2%.

- 10 £78.9 million of budget pressures are expected during 2023/24, mainly driven by inflationary and service demand pressures. Partly financed by the additional £56.5 million received from the final Local Government Settlement and from council tax and tax base increases. Savings of £12.4 million will be found from savings with the residual £10 million being funded from the MTFP Support Reserve.
- 11 However, our £778 million capital programme is the most ambitious the council has ever agreed and supports the council's ambition to use its resources to improve education, transport, housing and economic growth.

Recommendation

- 12 That Children and Young People's Overview and Scrutiny Committee notes the overall position and direction of travel in relation to quarter three performance, the impact of COVID-19 pandemic recovery and the external international factors driving inflation and cost-of-living on the council's performance, and the actions being taken to address areas of underperformance including the significant economic and well-being challenges because of the pandemic.

Analysis of the Performance Report

- 13 The areas identified in this section are contributory indicators linked to the priorities of the Council Plan. Performance is reported on an exception basis with key messages against the five thematic areas within the Council Plan 2022-2026.

Our Economy

Areas which require attention

- 14 Key Stage 2 data for 2022 is now available - the first data set since the pandemic. 73% of children across the county reached the expected standard in reading - lower than comparators but similar to 2019 levels. 71% reached the expected standard in maths – lower than 2019 performance of 80%. However, the decrease in maths performance reflects the national and regional trend, nationally performance has fallen from 79% in 2019 to 71% in 2022, and from 81% to 72% regionally.
- 15 In 2021/22, 45% of Key Stage 4 pupils achieved a 9-5 pass in English and maths, which is slightly lower than our statistical neighbours (48%), England (47%) and the North East (46%).
- 16 The levelling up white paper 2022 has identified 55 education investment areas (EIAs) which includes County Durham. These EIAs are the third of local authorities in England where educational outcomes were the weakest based on sustained low performance across Key Stage 2 and Key Stage 4 in 2017 to 2019.

- 17 The Department for Education (DfE) is prioritising a package of activity in EIAs to support improving attainment in Durham, set out in the Schools White Paper, for EIAs to achieve the fastest progress until 2030 by helping 90% of pupils meet the expected standard in reading, writing and maths combined at Key Stage 2, with an increase of over a third in the lowest performing areas.
- 18 Schools within County Durham have accessed a range of support to improve individual pupil outcomes including:
- (a) The Enhanced Trust and School Improvement Offer which is enabling a placed based approach to increase the proportion of pupils in good and outstanding schools.
 - (b) For schools within the geographical areas of North Durham, Durham City, and Sedgefield area they have accessed up to six days of system leader time complimented by a further funded trust partnership which has provided access of up to £10,000 to individual schools to address underperformance.
 - (c) In addition, schools within these identified locations have accessed the DfE's curriculum reading review. Recommendations from the reviews have identified areas where individual schools can benefit from one of two available funded offers provided by the DfE. These offers were aimed at supporting the effective implementation of phonics or improving Key Stage 2 reading outcomes. The DfE provided funding to Durham County Council to support this process. Schools were allocated up to £6k per school for training, resources and supply cover as required for either the phonics or the Key Stage 2 reading offers.
 - (d) A further £7k was identified per school to help re-stock school and class library provision.

Our people

Going Well

- 19 In the nine months ending 31 December 2022, 1,134 families were turned around via the Stronger Families programme. 1,039 attained significant and sustained outcomes and 95 maintained continuous employment. We have exceeded the annual 2022/23 target.
- 20 Referral levels to children's social care are in line with the last two years and below benchmarks. Our continued low re-referral rate positively impacts upon this, with fewer children requiring children's social care support for a second or subsequent time. We have not experienced a post-pandemic increase like some of our neighbouring authorities so are undertaking an audit to ensure we are receiving the right referrals at the right time from our partner organisations.

Areas which require attention

- 21 We continue to see an increasing trend in children in care (1,042). Although high for County Durham, the rate of 102 per 10,000 0-17 population remains lower than in our regional and statistical neighbours. We continue to experience placement pressures and are focusing on increasing capacity within our in-house children's homes, recruiting more foster carers, and working with children and their families to prevent them entering care.
- 22 Some of our children's social workers and Independent Reviewing Officers have higher caseloads than we would like. This is due to more children being supported in statutory safeguarding services². Increasing complexity and improved practice over the last few years has improved performance in key areas such as our re-referral rate, which has reduced from 28% (one of the top 20 highest in the country in 2019-20) to 16% in the year to date, consistently below our national (22%), regional (21%) and statistical neighbours (20%). Recruitment and retention of social workers is a key area of focus for us.
- 23 Requests for assessments for education, health and care plans (EHCP) have increased by 43% over the last year (966 from 676) and by 63% since 2019 (594). This has impacted upon our ability to complete EHCPs within the 20 week statutory timescale. We are currently working on our statutory SEN2 data return and national comparative performance data will be published later this year.
- 24 Significantly more requests for EHCP assessments across special education needs and disability services (SEND) are being received, which reflects the national picture. Pressure is compounded by high levels of demand in partner organisations, such as health who are a key part of the assessment process. We have invested in and restructured our SEND Casework Teams and Educational Psychologists, however, there are national shortages for this specialist role.

Risk Management

- 25 Effective risk management is a vital component of the council's agenda. The council's risk management process sits alongside our change programme and is incorporated into all significant change and improvement projects. The latest report can be found [here](#).

Background papers

- County Durham Vision (County Council, 23 October 2019)
<https://democracy.durham.gov.uk/documents/s115064/Draft%20Durham%20Vision%20v10.0.pdf>

Other useful documents

² children in need, child protection, children in care and care leavers

- Council Plan 2022 to 2026 (current plan)
<https://democracy.durham.gov.uk/mgAi.aspx?ID=56529>
- Quarter Two, 2022/23 Performance Management Report
<https://democracy.durham.gov.uk/documents/s166398/Corporate%20Performance%20Report%20Q2%202022-23%20v2.1.pdf>
- Quarter One, 2022/23 Performance Management Report
<https://democracy.durham.gov.uk/documents/s161902/Corporate%20Performance%20Report%20Q1%202022-23%20Revised.pdf>
- Quarter Four, 2021/22 Performance Management Report
<https://democracy.durham.gov.uk/documents/s157533/Year%20End%20performance%20report%202021-22.pdf>
- Quarter Three, 2021/22 Performance Management Report
<https://democracy.durham.gov.uk/documents/s152742/Performance%20Report%202021-22%20003.pdf>

Author

Steve Evans

Contact: steve.evans@durham.gov.uk

Appendix 1: Implications

Legal Implications

Not applicable.

Finance

Latest performance information is being used to inform corporate, service and financial planning.

Consultation

Not applicable.

Equality and Diversity / Public Sector Equality Duty

Equality measures are monitored as part of the performance monitoring process.

Climate Change

We have declared a climate change emergency and consider the implications of climate change in our reports and decision-making.

Human Rights

Not applicable.

Crime and Disorder

A number of performance indicators and key actions relating to crime and disorder are continually monitored in partnership with Durham Constabulary.

Staffing

Performance against a number of relevant corporate health indicators has been included to monitor staffing issues.

Accommodation

Not applicable.

Risk

Reporting of significant risks and their interaction with performance is integrated into the quarterly performance management report.

Procurement

Not applicable.



Durham County Council Performance Management Report Quarter Three, 2022/23



1.0 Our Economy: National, Regional & Local Picture

- 1 The first set of post covid Key Stage 2 data were published in December allowing comparative analysis against national and regional and nearest neighbour benchmarks. In 2022, 73% of County Durham Key Stage 2 children reached the expected standard in reading lower than comparators and lower but similar to 2019 levels. In maths, the proportion reaching the expected standard reduced considerably to 71% from 80% in 2019. This decrease is also evidenced in our comparators (71% from 79% nationally and 72% from 81% regionally).
- 2 The 2021/22 academic year saw the return of the summer exam series, after they had been cancelled in 2020 and 2021 due to the impact of the COVID-19 pandemic, where alternative processes were set up to award grades (centre assessment grades, known as CAGs, and teacher assessed grades, known as TAGs). As part of the transition back to the summer exam series adaptations were made to the exams (including advance information) and the approach to grading for 2022 exams broadly reflected a midpoint between results in 2019 and 2021. Given the unprecedented change in the way GCSE results were awarded in the summers of 2020 and 2021, as well as the changes to grade boundaries and methods of assessment for 2021/22, caution should be used when considering comparisons over time, as they may not reflect changes in pupil performance alone. In 2021/22, 45% of Key Stage 4 pupils in County Durham achieved a 9-5 pass in English and maths slightly lower than statistical neighbours (48%), England (47%) and the North East region (46%).
- 3 The levelling up white paper 2022 has identified 55 education investment areas which includes County Durham. These EIAs are the third of local authorities in England where educational outcomes were the weakest based on sustained low performance across Key Stage 2 and Key Stage 4 in 2017 to 2019.
- 4 The DfE is prioritising a package of activity in EIAs to support improving attainment in Durham, set out in the Schools White Paper, for EIAs to achieve the fastest progress until 2030 by helping 90% of pupils meet the expected standard in reading, writing and maths combined at Key Stage 2, with an increase of over a third in the lowest performing areas.
- 5 Schools within County Durham have accessed a range of support to improve individual pupil outcomes including:
 - The Enhanced Trust and School Improvement Offer which has enabling a placed based approach to increase the proportion of pupils in good and outstanding schools.
 - For schools within the geographical areas of North Durham, Durham City, and Sedgefield area they have accessed up to six days of system leader time

complimented by a further funded trust partnership which has provided access of up to £10,000 to individual schools to address underperformance.

- In addition, schools within these identified locations have accessed the DfE’s curriculum reading review. Recommendations from the reviews have identified areas where individual schools can benefit from one of two available funded offers provided by the DfE. These offers were aimed at supporting the effective implementation of phonics or improving Key Stage 2 reading outcomes. The DfE provided funding to Durham County Council to support this process. Schools were allocated up to £6k per school for training, resources and supply cover as required for either the Phonics or the Key Stage 2 reading offers.
- A further £7k was identified per school to help re-stock school and class library provision.

2.0 Our People: National, Regional & Local Picture

6 In the year to date we have received almost 20,000 contacts for early help and children’s social care at First Contact, the children’s services front door. This is similar to the last two years. In addition, we launched an electronic children’s partner portal in October, where our partner organisations can manage and request early help assessments. There have been almost 500 recorded so far.

7 Almost 3,700 statutory children’s social care referrals have been received in the last 9 months. This is similar to the last two years. The rolling annual rate per 10,000 children (488, n=4,980) is lower than in our benchmarks (England: 538, SN: 608 and NE: 644).

8 The rates of children in need, children on a child protection plan and children in care (per 10,000 children) remain higher than national averages but below our regional and statistical neighbours.

	Q3 22/23	2021/22		
	County Durham	England	Statistical Neighbours	North East
Children in need	386	334	445	471
Children on a child protection plan	52	42	62	63
Children in care	102	70	107	110

9 The latest data from the National Child Measurement Programme has been released which demonstrates that the percentage of children in Reception who are of a healthy weight has increased from two years ago (last available data) by 0.9 percentage points. Children in Year 6, of a healthy weight has, however, decreased by 2.3 percentage points over the same period. A decrease was expected due to

reduced physical activity over the pandemic period, however, neither the changes in Reception nor Year 6 children are significant.

2.1 Council Activity: Going Well

Children's Social Care

10 In children's social care, referral rates per 10,000 0-17 year olds remain similar to the last two years and below benchmarks. Improved practice over the last few years has led to better performance in key areas such as our re-referral rate, which has reduced from 28% and in the top 20 highest in the country in 2019-20 to 16% in the year to date and this is now consistently below our national (22%), regional (21%) and statistical neighbours (20%). This means fewer children and their families require further support from safeguarding services following support. As we haven't seen an increase following COVID like some of our neighbouring local authorities a multi-agency audit is ongoing, led by the Durham Safeguarding Children's Partnership, to assure ourselves that we are receiving the right referrals at the right time from our partner organisations.

Stronger Families Programme

11 Between April and December 2022, 1,134 families were turned around via the Stronger Families programme 1,039 attained significant and sustained outcomes and 95 maintained continuous employment. We have already surpassed our annual national target of 760 families turned around.

2.2 Council Activity: Areas which require attention

Children's Social Care

12 Some of our children's social workers and Independent Reviewing Officers have higher caseloads than we would like due to higher numbers of children being supported in statutory safeguarding services throughout children in need, child protection, children in care and care leavers. There were 48 social work vacancies at the end of December 2022; recruitment and retention of Social Workers is a key area of focus for us.

13 Despite increasing caseload pressures, we are assured our social workers continue to see children in line with statutory timescales through regular performance monitoring and our managers have oversight of children's cases.

14 We continue to see an increasing trend in children in care (n=1042), and whilst this is high for County Durham the rate of 102 per 10,000 0-17 population remains lower than in our regional and statistical neighbours. We continue to experience placement

pressures and are focusing on increasing capacity within our in-house children's homes, recruiting more foster carers, and working with children and their families to prevent them entering care.

- 15 The national transfer scheme for unaccompanied asylum-seeking children (UASC) continues with 29 of our children in care having a UASC status; this will further increase over the rest of the year, as we take UASC into the care of the council in line with national Home Office targets.
- 16 More children in care continues to impact upon placement and financial pressures (which are also reflected both regionally and nationally). We continue to implement our transformation plans with the aim of increasing capacity within our in-house children's homes, recruiting more foster carers, and early work with children and their families to prevent them entering care.

SEND

- 17 In Special Education Needs and Disability Services (SEND), we continue to see sustained growth in requests for EHCP assessments with significant increases over the last few years which are also evidenced nationally. Pressure is compounded by high levels of demand in partner organisations, such as health who are a key part of the assessment process. We have invested in and restructured our SEND Casework Teams and Educational Psychologists, however there are national shortages for this specialist role.
- 18 This year we have seen an 43% increase in requests for assessments for Education, Health and Care Plans in the last year alone (966 from 676) and an 63% increase since 2019 (594). This significant increase in demand has impacted upon our ability to complete EHCPs within the 20-week statutory timescale. We are currently working on our statutory SEN2 data return and national comparative performance data will be available when this is published later this year.

3.0 Data Tables

Key to Symbols

Performance against target and previous performance		Performance against comparable groups		Direction of Travel	
✓	meeting or exceeding	✓	Performance is better than national or north east	↑	higher than comparable period
■	within 2%	×	Performance is worse than national or north east	→	static against comparable period
×	more than 2% behind			↓	lower than comparable period

NB: oldest data in left column

Types of indicators

There are two types of performance indicators throughout the report:

1. Key target indicators – targets are set as improvements can be measured regularly and can be actively influenced by the council and its partners; and
2. Key tracker indicators – performance is tracked but no targets are set as they are long-term and / or can only be partially influenced by the council and its partners.

National Benchmarking (N)

We compare our performance to all English authorities. The number of authorities varies according to the performance indicator and functions of councils, e.g., educational attainment is compared to county and unitary councils, however waste disposal is compared to district and unitary councils.

North East Benchmarking (NE)

The North East comparator is the average performance from the authorities within the North East region - County Durham, Darlington, Gateshead, Hartlepool, Middlesbrough, Newcastle upon Tyne, North Tyneside, Northumberland, Redcar and Cleveland, Stockton-on-Tees, South Tyneside, Sunderland.

More detail is available from the Strategy Team at performance@durham.gov.uk

Our Economy

Performance Indicator	Latest data (period covered)	Performance compared to:					Direction of Travel - last four reporting periods				updated
		Period target	12 months earlier	Pre-COVID	N	NE					
% uptake of free early education entitlement for 3-4-year-olds	93.7% (2022)	Tracker -	92.8% ✓	96.1% x			→	↑	↓	↑	No
Improve the proportion of children achieving expected standards in maths and reading at KS2 in line with 2030 ambitions ³	65% (2018/19)	Tracker -	67% x	65%			n/a	n/a	n/a	n/a	No
Improve the average grade of achievement of all our pupils within GCSE English and Maths to a Grade 5 (in line with 2030 ambitions)	new PI	5 by 2030	new PI	new PI	-	-	new PI	new PI	new PI	new PI	No
Improve the educational attainment of our most disadvantaged cohorts to meet basic threshold measures in English and Maths	new PI	new PI	new PI	new PI	-	-	new PI	new PI	new PI	new PI	No
Increase proportion of young people in education, employment and training to be consistently higher than regional and national levels	87.4% (Jun 2022)	above N / NE ✓	85.3% ✓	85.6% ✓			↑	↓	↑	n/a	No

Our People

Performance Indicator	Latest data (period covered)	Performance compared to:					Direction of Travel - last four reporting periods				updated
		Period target	12 months earlier	Pre-COVID	N	NE					
Children in the Early Years Foundation Stage achieving a good level of development (reported as academic year)	64.5% (2021/22)	Tracker -	N/A	-			↓	n/a	n/a	n/a	Yes
% of pupils attending an Ofsted judged 'good or better' school – all	86.5% (at 16 Jan 23)	Tracker -	n/a	-	x	✓	↑	↑	↑	n/a	Yes

³ Not reported for 2019/20 or 2020/21 academic years as no Early Years Foundation Stage (EYFS) or Key Stage 2 (KS2) assessments took place

Performance Indicator	Latest data (period covered)	Performance compared to:					Direction of Travel - last four reporting periods				updated
		Period target	12 months earlier	Pre-COVID	N	NE					
% of pupils attending an Ofsted judged 'good or better' school – primary	94.3% (at 16 Jan 23)	Tracker -	n/a	-	✓	✓					Yes
% of pupils attending an Ofsted judged 'good or better' school – secondary	75.3% (at 16 Jan 23)	Tracker -	n/a	-	✗	✓					Yes
No. of children and young people with an Education, Health and Care Plan	4,234	Tracker	3,978	3,496	-	-	↑	↑	↑	↑	Yes
	(Dec 2022)	-	-	-							
No. of Children Looked After per 10,000 population	102.2 [1,042] (at 31 Dec 22)	Tracker -	93 [2020/21]	-	-	-	↑	↑	↑	↑	Yes
No. of Children in Need per 10,000 Population	386 [3,939] (at 31 Dec 22)	Tracker -	361 [2020/21]		-	-	↑	↑	↑	↑	Yes
% of Children Looked After placed within 20 miles of their home address	85% (at 31 Mar 22)	Tracker -	87% [2020/21] ■	89% ✗	✓	✓	↓	↓	→	↑	No
No. of families on our Stronger Families Programme attaining significant and sustained outcomes	1,134 (Apr-Dec 22)	760 [2022/23] ✓	693 ✓	311 ✓	-	-	↑	↑	↑	↑	Yes
Increase the % of children aged 4-5 who are of a healthy weight ⁴ <i>Confidence intervals +/-1.2pp</i>	75.5% (2021/22)	90% ✗	Not reported	74.6% ■	■	■	-	-	-	→	Yes
Increase the % of children aged 10-11 who are of a healthy weight <i>Confidence intervals +/-1.2pp</i>	59.2% (2021/22)	79% ✗	Not reported	61.5% ■	■	■	-	-	-	→	Yes

⁴ National Child Measurement Programme ceased March 2020 when schools closed due to the pandemic, therefore, north east and nearest neighbour comparators should be treated with caution due to missing data from some LAs. Whilst the data for the academic year 2020/21 has been published, local authority data is not available as only a 10% sample of data was recorded.

Other relevant indicators

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Performance Indicator	Latest data (period covered)	Performance compared to:					Direction of Travel - last four reporting periods				updated
		Period target	12 months earlier	Pre-COVID	N	NE					
Increase the % of 16-17-year-olds in an apprenticeship	5.6% (Jun 2022)	Tracker -	5.5% ✓	6.8% x			↑	↓	↓	n/a	No
Reduce % point gap in breastfeeding at 6-8 weeks between County Durham and national average	18.8pp (2021/22)	Tracker -	17.4pp x	20.2pp ✓	-	x	↑	↑	↓	↑	Yes
% of mothers smoking at time of delivery	13.7% (Jul -Sep 22)	0% x	13.9% ✓	15.2% ✓	x	x	↑	↑	↑	↓	Yes

Children and Young People's Overview and Scrutiny

26 April 2023



Children and Young People's Services – Quarter 3: Forecast of Revenue and Capital Outturn 2022/23

Report of Paul Darby, Corporate Director of Resources

Purpose of the Report

- 1 To provide details of the forecast outturn budget position for Children and Young People's Services (CYPS), highlighting major variances in comparison with the budget for the year, based on the position at the end of December 2022.

Executive summary

- 2 Children and Young People's Services is reporting a cash limit overspend of £13.832 million against a revised budget of £145.162 million which represents a 9.53% overspend. This compares to a forecast overspend of £12.832 million, or 7.88%, at Q2.
- 3 In arriving at the cash limit position, inflation costs of £4.000 million in relation to Home to School transport and £0.102 million on energy have been excluded. Pay award costs of £2.381 million have also been excluded.
- 4 Expenditure on capital works as of the end of December is £10.523 million. The revised budget for 2022/23 is £18.048 million.

Recommendation(s)

- 5 Members of Overview and Scrutiny committee are requested to are requested to:
 - (a) note the Children and Young People's Services overall revenue position;

Background

6 The County Council approved the Revenue and Capital budgets for 2022/23 at its meeting on 23 February 2022. These budgets have subsequently been revised to take account of transfers to and from reserves, grant additions/reductions, budget transfers between service groupings and budget reprofiling between years. This report covers the financial position for:

- (a) Children and Young People's Services Revenue Budget - £145.162 million (original £142.315 million);
- (b) CYPS – Capital Programme - £18.048 million (original £37.802 million).

7 The original Children and Young People's Services revenue budget has been revised to incorporate various permanent and temporary budget adjustments as summarised in the table below:

Description	Transfer in	Transfer out
Permanent	£m	£m
Q1 Workforce Development Officer to Resources		-£0.050
Q1 Transfer from AHS – Navigation Team	£0.840	
Q1 TF Trainer to Resources		-£0.021
Q1 Pay Award	£0.807	
Q2 Centralisation of Repairs and Maintenance		-£0.241
Q2 Transfer from AHS – Navigation Team	£0.083	
Sub-total permanent changes	£1.730	-£0.312
Temporary	£m	£m
Q1 Recovery Support Reserve	£0.633	
Q1 Holiday Activities and Food Reserve	£0.490	
Q1 Young Parents Programme Reserve	£0.107	
Q1 RAA Early Permanence Project	£0.050	
Q1 Durham Learning Resources Reserve	£0.040	
Q1 Early Years Activities Reserve	£0.011	
Q1 Easington Sports Partnership	£0.009	
Q1 Durham Sports Partnership	£0.053	
Q1 Sessional Employment	£0.036	
Sub-total temporary changes	£1.430	£0.00
Total changes	£3.160	-£0.312
Net budget change	£2.848	

- 8 The summary financial statements contained in the report cover the financial year 2022/23 and show:
- the approved annual budget;
 - the actual income and expenditure as recorded in the Council's financial management system;
 - the variance between the annual budget and the forecast outturn;
 - for the Children and Young People's Services revenue budget, adjustments for items outside of the cash limit to take into account such items as redundancies met from the strategic reserve, capital charges not controlled by services and use of / or contributions to earmarked reserves.

Revenue Outturn

- 9 The Children and Young People's Services service is reporting a cash limit overspend of £13.832 million against a revised budget of £145.162 million which represents a 9.53% overspend.
- 10 The table below compares the forecast outturn with the budget by Head of Service. A further table is shown at Appendix 2 analysing the position by Subjective Analysis (i.e. type of expense).

Head of Service	Revised Annual Budget	Forecast Outturn	Variance	Pay Award	Inflation Pressures	Cash Limit Variance
	£m	£m	£m	£m	£m	£m
Head of Social Care	82.015	95.960	13.945	-1.602	-0.050	12.293
Education and Skills	38.838	44.093	5.255	-0.113	-4.230	0.912
EHIVC	6.368	7.865	1.497	-0.623	-0.159	0.715
Operational Support	1.915	1.956	0.041	-0.041	0	0
Central Charges	16.026	15.943	-0.083	0	-0.005	-0.088
Total	145.162	165.817	20.655	-2.379	-4.444	13.832

- 11 The outturn position incorporates the MTFP savings of £0.365 million built into the 2022/23 budgets.
- 12 The projection factors in forecast overspends within Social Care of £12.293 million, Education of £0.912 million and Early Help, Inclusion and Vulnerable Children of £0.715 million and further details on each area are provided below.

- 13 The Head of Children's Social Care is forecasting a net £12.293 million overspend for the year. A major part of this is a forecast overspend of £13.786 million against budgets for the cost of placements for children looked after, where demand and placement costs continue to rise. This compares to a forecast overspend of £13.256 million at Q2.
- 14 The pressure on the budget in children's social care has been evident for several years, as the number of children in the care system has increased significantly and their needs have continued to become more complex. The budget for this area for 2022/23 has increased by £4.23 million, which is the sum of £2.29 million base budget growth, £1.16 million inflationary budget increase and £0.78 million internal budget transfers.
- 15 As of 31 December 2022 there were 1,034 Children Looked After (CLA), which continues a trend of growth in demand in this area as illustrated in the table below:

Date	Number of CLA
June 2021	943
September 2021	912
December 2021	924
March 2022	982
June 2022	983
September 2022	1,028
December 2022	1,034

- 16 The Head of Education is reporting an overspend of £0.912 million after taking account of inflationary pressures and estimated pay award adjustments of £4.158 million to be funded corporately.
- 17 An overspend of £4.971 million against the Home to School Transport budget is forecast (compares to £4.758 million at Q2). This has a CYPS cash limit impact of £0.971 million after taking account of £4.000 million as an agreed inflationary pressure to be covered corporately.
- 18 There is a forecast shortfall of £0.766 million against income budgets for Service Level Agreements with schools and a forecast shortfall of £0.481 million against income budgets relating to various income streams, such as Durham Leadership Centre lettings and course fee income.
- 19 An overspend of £0.133 million is forecast against general supplies and services and premises budgets.

- 20 These overspends are to some extent offset by a saving of £1.121 million against employee budgets, which is largely the result of staffing restructures in Support and Development and School Places and Admissions, implemented from 1 September 2022. There are also vacancies across the Education service that are contributing to this underspend.
- 21 Further savings of £0.318 million have been forecast against the budget for historical pension liabilities (£0.210 million) and activity budgets with the Early Years team (£0.108) million.
- 22 The Head of Early Help, Inclusion and Vulnerable Children (EHIVC) is reporting an overspend of £0.715 million.
- 23 The major factor is in relation to Aycliffe Secure Centre (ASC) where a cash limit overspend of £1.577 million is forecast. The cash limit overspend reported is after assuming the full use of the ASC reserve of £0.403 million to partially fund the overspend.
- 24 The overspend is largely attributable to a shortfall of £1.397 million against income budgets where it has not been possible to achieve the previously forecast level of occupancy due to difficulties with recruitment and retention of staff.
- 25 There is also an overspend of £0.216 million against premises budgets as a result of a combination of high energy costs and repair work to buildings.
- 26 The remaining service areas in EHIVC are reporting a combined underspend of £0.862 million mainly attributable to underspends against employee budgets of £1.066 million, due to the management of vacant posts, and £0.133 million resulting from low usage of remand beds. These underspends are partially offset by a shortfall against of SLA income budgets.
- 27 It is forecast that expenditure will be in line with budget for the Operational Support area of the service.
- 28 The forecast cash limit outturn shows the position after a net £3.541 million use of reserves. The main reserves used are as follows;
- (a) £1.665 million drawdown from the Corporate ER/VR Reserve to fund agreed redundancies across the service;
 - (b) £0.403 million drawdown from the Aycliffe Secure Centre Reserve;

- (c) £0.327 million drawdown from the Progression and Learning Reserve;
 - (d) £0.177 million use of the Integrated Rapid Response Reserve;
 - (e) £0.162 million Music Service reserve to fund inflationary pressures and equipment repairs;
 - (f) £0.153 million drawdown from the PAUSE Reserve;
 - (g) £0.135 million drawdown from the Mental Health Support reserve to fund the employee and support costs of the Mental Health Support project.
- 29 No budget transfers have been actioned in the third quarter.
- 30 Taking the forecast outturn position into account, there is a forecast £13.832 million deficit cash limit reserve balance at 31 March 2023. This will, as in previous years, need to be funded by the application of general reserves.

Dedicated Schools Grant and Schools

- 31 The council currently maintains 161 schools, including nursery, primary, secondary, special schools and a single Alternative Provision (AP) school. The AP school is for pupils who have been permanently excluded from other schools, or who are at risk of permanent exclusion.
- 32 The original budget for 2022/23 for maintained schools was £255 million, funded by income of £62 million, formula funding budget shares of £186 million (from central government funding) and a budgeted circa £7 million use of accumulated schools' reserves. The table below summarises the schools' initial budgets.

Subjective Budget Heading	Nursery £m	Primary £m	Secondary £m	Special / AP £m	Original Annual Budget £m
Employees	4.523	141.327	25.354	32.723	203.927
Premises	0.311	9.543	1.881	1.750	13.485
Transport	0.001	0.366	0.445	1.189	2.001
Supplies and services	0.391	26.171	4.629	4.757	35.948
Gross expenditure	5.226	177.407	32.309	40.419	255.361
Income	-3.883	-43.804	-6.290	-8.037	-62.014
Net expenditure	1.343	133.603	26.019	32.382	193.347
Budget share	1.072	128.305	25.390	31.259	186.026
Reserves	0.271	5.298	0.629	1.123	7.321
Balance at 31 Mar 2022	0.833	21.260	3.842	2.717	28.652
Balance at 31 Mar 2023	0.562	15.962	3.194	1.597	21.331

33 Seven maintained schools had deficit balances at 31 March 2022, however, for five of these the budget plans for 2022/23 sought to fully recover the position in year.

34 Two schools (Durham Community Business School and Wellfield) have been given approval to set deficit budgets in 2022/23 – where planned expenditure during 2022/23 would result in a deficit balance at 31 March 2023 (known as a licensed deficit). Both schools have been required to set budgets with an in-year surplus so that the accumulated deficit is reduced, as summarised in the table below:

School Name	Phase	Deficit at 31 March 2022	Planned movement of reserves	Planned deficit at 31 March 2023	Licensed deficit (i.e., balance) at 31 March 2023
		£m	£m	£m	£m
DCBC	Secondary	-0.670	0.093	-0.577	-0.577
Wellfield	Secondary	-2.906	0.203	-2.703	-2.703

35 Like the Council, schools are facing a range of unfunded inflationary pressures, for pay awards and energy costs in year which are forecast to outstrip the initial budget planning assumptions. The forecast position for all maintained schools for quarter 3 is shown in the following table:

Subjective Budget Heading	Original Budget	Quarter 3 Forecast	Forecast to Budget Variance at Quarter 3
Employees	203.927	215.822	11.895
Premises	13.485	19.833	6.348
Transport	2.001	2.457	0.456
Supplies	35.948	39.547	3.599
Gross expenditure	255.361	277.659	22.298
Income	-62.014	-77.988	-15.974
Net expenditure	193.347	199.671	6.324
Budget share	186.026	191.826	5.800
Use of reserves	7.321	7.845	0.524
Balance at 31 March 2022	28.652	28.652	0
Balance at 31 March 2023	21.331	20.807	-0.524

- 36 In overall terms, this reflects an improved position from Q2 where schools were forecasting to require £12.637 million of reserves to balance the in-year financial position.
- 37 The forecast position at individual school level indicates that a small number of schools may be in deficit at the end of the current financial year and a more significant number of schools may not have sufficient reserves available to set a balanced budget in 2023/24. The former Durham Community Business College converted on 1 January 2023 and once the final deficit sum required to be written off is finalised this will be charged to the Schools Reserve in line with the Cabinet decision to support the conversion of this school.
- 38 The council will work closely with schools over the spring term to support the financial planning process to set balanced budgets for 2023/24.

Dedicated Schools Grant Centrally Retained Block

- 39 The forecast outturn position for the centrally retained DSG budgets shows a projected overspend of £0.798 million, relating to the high needs block, which compares to a £0.250 million overspend forecast at Q2, as detailed below:

DSG Block	Budgeted 2022/23 Budget	Forecast Outturn	Forecast Over / (Under) Spend
	£m	£m	£m
High Needs	76.452	77.250	0.798
Early Years	32.918	32.918	0
Central Schools Services	2.910	2.910	0
TOTAL	112.280	113.078	0.798

- 40 The forecast overspend position shown against the high needs block relates to the following main areas:
- (a) forecast overspend of £1.129 million against the budget for Special School provision, which largely results from the provision of additional places across the school's sector during the year;
 - (b) forecast overspend of £0.211 million on Alternative Provision;
 - (c) forecast underspend of £0.331 million against the budget allocation for Investment Support Fund;
 - (d) forecast underspend of £0.224 million against the budget for Targeted Support Funding in mainstream schools.
- 41 An updated five-year plan high needs block funding and expenditure, including recovery of the accumulated deficit by the end of the five-year period, was approved by Cabinet in April 2022. The updated outturn position at Q3 shows that the recovery plan has not delivered the financial outcomes expected in 2022/23.
- 42 This plan is now being updated to include the latest forecast of outturn position, revised inflation forecast for future years, and the recent funding announcements.
- 43 A review of the current programme of work is also taking place in the autumn and this will also include a workshop with Schools Forum. In addition, Durham is identified as one of the 55 local authorities with HNB deficits to work with the DfE on its Delivering Better Value programme.
- 44 The impact of the current forecast on the DSG reserves position is shown in the following table:

DSG Reserves	High Needs Block (Unusable Reserve) £ million	Early Years Block £ million	Schools Block £ million	Total DSG £ million
Balance as at 1 April 2021	-8.047	1.375	2.749	-3.923
Use/ Contribution in 21/22	-0.796	-0.719	-0.348	-1.863
Balance as at 1 April 2022	-8.843	0.656	2.401	-5.786
Early Years Adjustment 21/22	0	0.594	0	0.594
Forecast Use / Contribution in 20/21	-0.798	0	0	-0.798
Forecast balance as at 1 April 2023	-9.641	1.250	2.401	-5.990

45 The overall DSG reserve was in a net deficit position of £5.786 million at the start of the financial year – primarily due to the accumulated £8.843 million deficit position in relation to the high needs block. The overall deficit position is forecast to increase to £5.990 million to the year end, of which the high needs block deficit is forecast to be £9.641 million.

Capital Programme

- 46 The capital programme has been revised to take into account budget reprofiled from 2021-22 following the final accounts for that year and to take account of any revisions in the current year.
- 47 The revised budget is presented in the table at Appendix 3 together with actual expenditure to date and the forecast outturn. The budget may be subsequently amended with approval from MOWG.

Recommendation

- 48 Overview and Scrutiny Committee are requested to note the detail within the report.

Author(s)

David Watchman, Finance Manager

Tel: 03000 268573

Appendix 1: Implications

Legal Implications

There are no implications associated with this report.

Finance

Financial implications are detailed throughout the report which provides an analysis of the revenue and capital projected outturn position.

Consultation

There are no implications associated with this report.

Equality and Diversity / Public Sector Equality Duty

There are no implications associated with this report.

Climate Change

There are no implications associated with this report.

Human Rights

There are no implications associated with this report.

Crime and Disorder

There are no implications associated with this report.

Staffing

There are no implications associated with this report. Any over or under spending against the employee budgets are disclosed within the report.

Accommodation

There are no implications associated with this report.

Risk

The management of risk is intrinsic to good budgetary control. This report forms an important part of the governance arrangements within Children and Young People's Services. Through routine / regular monitoring of budgets and continual re-forecasting to year end the service grouping can ensure that it manages its finances within the cash envelope allocated to it.

Procurement

There are no implications associated with this report

Appendix 2: CYPS Forecast position by subjective analysis

	Revised Annual Budget	YTD Actual	Forecast Outturn	Variance	Pay Award	Inflationary Pressures	Cash Limit Variance
	£m	£m	£m	£m	£m	£m	£m
Employees	88,264	64,447	86,454	-1,810	-2.381	-	-4,191
Premises	4,187	3,254	5,436	1,248	-	-0.444	804
Transport	26,162	19,559	32,263	6,101	-	-4.000	2,101
Supplies and Services	10,713	14,423	14,534	3,821	-	-	3,821
Third Party Payments	45,061	40,487	58,511	13,450	-	-	13,450
Transfer Payments	1,573	2,167	2,016	443	-	-	443
Capital	20,482	-	20,482	-	-	-	-
Central Support	26,792	3,288	26,615	-177	-	-	-177
DRF	23	-	143	120	-	-	120
Income-Grant	-22,766	-18,031	-25,669	-2,903	-	-	-2,903
Income-Contributions	-4,155	-3,172	-5,426	-1,271	-	-	-1,271
Income-Sales	-71	-36	-68	3	-	-	3
Income-Charges	-16,876	-9,693	-13,761	3,116	-	-	3,116
Income-Rents	-316	-197	-286	30	-	-	30
Income-Recharges	-33,888	-21,163	-35,170	-1,282	-	-	-1,282
Income-Other	-23	-281	-256	-233	-	-	-233
Total	145,162	95,052	165,818	20,656	-2.381	-4.444	13,831

Appendix 3: Forecast of CYPS capital expenditure

CYPS	Actual 31/12/2022 £	2022/23 Budget £	2023/24 Budget £	2024/25 Budget £	2025/26 Budget £	Total Capital Prog. £
PFI	49,135	48,870	-	-	-	48,870
BSF	-	-	-	380,218	-	380,218
Support For Childs Homes	569,850	796,707	2,845,535	-	-	3,642,242
AAP Scheme	972	4,930	-	-	-	4,930
Planning & Service Strategy	100,933	597,313	120,000	-	-	717,313
Education-Early Years	-	-	-	-	-	-
30 Hours Free Childcare	13,000	19,435	-	-	-	19,435
School Devolved Capital	1,844,415	2,623,882	5,023,619	-	-	7,647,501
DFE School Capital Inc Basic Need	7,121,346	12,777,507	63,325,589	7,114,838	440,239	83,658,173
DFE Special Provision Capital Fund	-	-	627,893	-	-	627,893
CYPS - High Needs Capital Provision	15,068	15,068	7,096,032	-	-	7,111,100
Secure Services	808,284	1,164,481	427,106	-	-	1,591,587
Total	10,523,002	18,048,193	79,465,774	7,495,056	440,239	105,449,262

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