

## DURHAM COUNTY COUNCIL

### JOINT SPECIAL MEETING OF CHILDREN AND YOUNG PEOPLE'S OVERVIEW AND SCRUTINY COMMITTEE AND ADULTS, WELLBEING AND HEALTH OVERVIEW AND SCRUTINY COMMITTEE

At a Joint Special meeting of **Children and Young People's Overview and Scrutiny Committee** and **Adults, Wellbeing and Health Overview and Scrutiny Committee** held in **Committee Room 2, County Hall, Durham** on **Tuesday 19 December 2023** at **1.30 pm**

#### **Present:**

**Councillor A Reed (Chair)**

#### **Members of the Committee:**

Councillors V Andrews (Vice-Chair), S Deinali, J Griffiths, L Hovvels, C Lines, L Mavin, D Mulholland, S Quinn, J Scurfield, M Simmons, C Varty and E Waldock

#### **Co-opted Member:**

Mrs A Gunn

#### **1 Apologies for absence**

Apologies for absence were received from Councillors K Earley, J Higgins, C Hunt, M Johnson, K Rooney and A Savory.

#### **2 Substitute Members**

No substitute members were in attendance.

#### **3 Declarations of Interest**

Mrs A Gunn, Co-opted Member declared an interest in agenda item 5 as a relative of a neurodiversity service user.

#### **4 Any items from Co-opted Members or Interested Parties**

No items were reported from Co-opted Members and interest parties.

#### **5 Preparation for Adulthood**

The Committee considered a joint report of the Director of Integrated Community Services, County Durham Care Partnership and the Director of Children and Young People's Integrated Services which provided information on transition services provided and commissioned for children and young people with complex needs, to Adult Services or out of services, where appropriate (for copy of report and presentation see file of minutes).

The Committee welcomed Jennifer Illingworth, Director of Integrated Children's Services to the meeting to provide information on the work of the Preparing for Adulthood Steering Group and to seek members' views on the work in progress.

Delivering a presentation, the officer described how the work of the steering group is concerned not only with transitions from service to service but also transitions within services, for example, a young person's transition from education to employment or a young person's transition from a residential home into a home of their own. Whilst transitions are currently provided for within the Council, the Preparing for Adult Steering Group differs from existing provision in that its focus is on young people aged 14 to 25, residing within County Durham, who are registered with a GP practice and who are known to more than one service and therefore are considered to have more complex needs. The steering group aims to build on existing provision.

The Director of Integrated Children's Services explained how the work of the steering group aligns with national strategies and local priorities and the group includes representation from partners including housing, education, health, adult social care and Investing in Children. The steering group which reports into the Starting Well Partnership Board chaired by the Director of Children and Young People's Services, held an initial workshop in September 2023 to examine the purpose and governance of the group. The workplan includes mapping of the current offer to avoid duplication, to identify any gaps in provision and to share information between agencies. The Director of Integrated Children's Services highlighted that the voice of young people is at the core of the work.

Setting expectations, training and communications are a key focus of the work, which recognises that some services which are provided for children do not continue when the child reaches adult services and families are not always aware that services will cease. Therefore, more work will be carried out to improve family preparedness.

The Committee noted the national principles of the healthcare transition pyramid and that models of transition use a variety of arrangements based on local objectives. Challenges continue with regard to the recruitment and retention of staff and the signposting of families to support available.

The Director of Integrated Children's Services outlined the next steps for the group will include the hosting of an event for young people, their families and carers and a separate event for professionals in February 2024, to identify areas of focus during the next year. Further details of the event will be circulated to members in due course.

The Chair thanked the Director of Integrated Children's Services for the presentation and invited comments and questions from the Committee.

In response to a question from Councillor Scurfield regarding the provision for children looked after and care leavers, the Director of Integrated Children's Services provided assurance that children looked after and those making the transition from care are included in the work, with representation on the steering group from the Residential Care service. She highlighted that the care leavers' experiences will inform principles and policies.

Councillor Scurfield referred to lengthy waiting times for young people's mental health services and she expressed concern that if the criteria of the Preparing for Adulthood work was that the young person must be known to more than one service, being on a waiting list for a service may delay that young person from receiving support. The Director of Integrated Children's Services referred to the work being done to reduce CAMHS waiting times and she informed the Committee that young people's needs will be met whilst waiting for services.

Councillor Deinali asked whether the work would consider the increased risk factors for those with complex needs, for example, online safety and managing finances and she asked for information on the plans to offer additional support to families. The Director of Integrated Children's Services replied that that a dedicated team, also called Preparing for Adulthood, within the Children and Young People's service provides assistance with issues such as digital awareness, money management and healthy living and links will be made with that team. Consideration is being given to changing the steering group's name in order to distinguish the two services.

Councillor Hovvels gave the view that mental and physical health and wellbeing are crucial aspects in preparing for adulthood and she asked what work could be done with those who are hard to reach and she also asked whether the steering group includes representation from the police. The Director of Integrated Children's Services responded that the steering group would include representation from the police and she added that forthcoming engagement work and learning from colleagues and partners and from within communities will help to identify young people who are in the greatest need and hotspots for targeted intervention.

In response to a question from the Chair, the officer responded that the Youth Justice Service is represented on the steering group.

**Resolved:**

That the joint Children and Young People's and Adults, Wellbeing and Health Joint Overview and Scrutiny Committee received the report and presentation and provided comment.

**6 Valuing Neurodiversity in County Durham**

The Committee considered a report of the Corporate Director of Children and Young People's Services which provided information regarding work undertaken through the Starting Well Partnership (SWP) to support families of neurodivergent children and young people (for copy of report and presentation see file of minutes).

The Committee welcomed Alison Ayres, Commissioning Delivery Manager, to the meeting to present the report and deliver a presentation on the Valuing Neurodiversity in County Durham project.

The Committee noted that over 4000 children and young people are currently waiting for a neurodiversity assessment in County Durham. The term neurodivergent refers to the ways in which the brain functions which can manifest in a number of ways including Attention Deficit Hyperactivity Disorder (ADHD) and Autism and the waiting time for diagnostic assessment is approximately 48 months.

Challenges exist around managing the expectations of families who often expect to see a change after diagnosis and this expectation places additional pressure on the diagnostic team. Engagement with families has also identified they experience difficulties in navigating the system and families do not always receive accurate information and advice. Therefore, it is clear that the system requires improvement and the vision for the Valuing Neurodiversity project is that needs should be met at the point of identification, without the need to wait for a formal diagnosis and for the system to move away from a diagnosis-led model to a needs-led model.

The Committee noted the governance behind the project which reports into the Mental Health, Learning Disability and Autism Partnership and Think Autism Strategy Group. Initial work to identify available training, map current support and support for education settings is underway and sub groups namely Training, Communications and Engagement, Support Offer Mapping and the Support in Schools Pilot, will deliver the work. The work which, in effect, is a culture-shift, is expected to take 3-5 years to complete.

The Commissioning Delivery Manager referred to a discussion that had taken place with the Chair prior to the meeting regarding the rate of neurodiversity within young people known to the Youth Justice Service.

The Commissioning Delivery Manager confirmed that when referrals are made to Tees Esk and Wear Valley NHSFT a risk assessment is carried out and being known to the Youth Justice Service forms part of the risk assessment.

The officer was thanked for the presentation and questions and comments were invited.

Councillor Lines spoke in support of the project, however, he was concerned that the work may lead to a move away from gaining a diagnosis and he pointed out that diagnosis is often the key to the most appropriate support pathway. Councillor Lines commented that young people with neurodiverse conditions may mask their symptoms which can make it difficult for parents, carers and education staff to accept that a problem exists. Councillor Lines also commented that the support offer in schools can vary and he added that when a young person receives the right support it can vastly improve not only their education experience but also that of their fellow-pupils and teaching staff.

The Commissioning Delivery Manager explained that part of the work of the Support in Schools Pilot aims to investigate identification and recognise that schools must understand that young people can mask neurodivergent behaviour and that schools play a role in supporting parents' views.

Councillor Quinn referred to misbehaviour in younger children which may be mistaken as symptoms of neurodiversity, however, it could be that the child is developmentally delayed and they require additional support to manage their feelings. Councillor Quinn commented that education staff play an important role to work with and support families and she stressed that children and young people who may be displaying neurodiverse behaviour should be supported and not stigmatised or excluded from activities in school. The Commissioning Delivery Manager agreed to discuss the issues in more detail with Councillor Quinn, following the meeting.

Mrs Gunn emphasised the work should be clear in its objectives and she raised concern that the plans may lead to ceasing the diagnosis of neurodiverse conditions in the future. Mrs Gunn echoed Councillor Lines' comments regarding the benefits of gaining a diagnosis, including access to medication which can have a positive impact on the young person's outcomes. She acknowledged that a diagnosis can be a 'double-edged sword' in that it can be a label with negative connotations however, it can also be the key to understanding how a young person is feeling or behaving. Mrs Gunn also asked if other conditions such as dyslexia and dysphoria are included in neurodiversity work.

Mrs Gunn raised concerns anecdotally that some GPs in neighbouring authorities were no longer entering into shared care agreements and she questioned whether this would lead to Durham taking a similar stance. The Commissioning Delivery Manager officer agreed to follow up the points raised after the meeting.

Councillor Varty welcomed the Support in Schools Pilot and spoke of her experience with families who had reported receiving different levels of support.

Councillor Hovvels referred to the different levels of support in schools and academies and whilst she welcomed the work of the project, she expressed concern as to how the work would be funded and the increasing number of children and young people with special needs.

Councillor Hovvels noted that a number of families out of county seek places in County Durham schools in order to access the appropriate support for their children. In response to a question from Councillor Hovvels as to why the Support in Schools Pilot was targeted at primary schools as opposed to early years provision, the officer explained that it was considered that more robust data would be available through primary school settings due to the large amount of private nursery provision.

**Resolved:**

1. That the joint Children and Young People's and Adults, Wellbeing and Health Overview and Scrutiny Committee received the report and presentation and provided comment.

Further to the comments made during the discussion, the following additional recommendation was agreed:

2. That members of the Children and Young People's and Adults, Wellbeing and Health Overview and Scrutiny Committees receive regular updates on the progress of the Valuing Neurodiversity in County Durham project.

**7 Children, Young People and Vaping: An Update on the Evidence Base**

The Committee considered a joint report of the Corporate Director of Resources and the Director of Public Health which provided members of the joint Children and Young People and Adults, Wellbeing and Health Overview and Scrutiny Committee with an update on the evidence base relating to children, young people and vaping (for copy of report and presentation see file of minutes).

Katie Bewick, Public Health Advanced Practitioner, was welcomed to the meeting to deliver the presentation. Introducing the presentation, the officer explained that whilst in the short to medium term, vaping poses a fraction of the risks of smoking, vaping is not risk free.

Vapes are substantially less harmful than smoking and can be an effective tool in supporting smoking cessation. The smoking prevalence in County Durham is 15.4% and there has been an increase in the number of children vaping both nationally and within County Durham. National Data from ASH (Action on Smoking and Health) shows adult e-cigarette prevalence stands at 9.1% which is the highest rate ever. In addition, there is an increase in the number of adults who believe that vaping is as harmful or more harmful as smoking.

The Committee noted a school survey conducted in 2022 found that 11% of secondary school pupils and 4% of primary school children had tried vaping once, 4% of secondary school pupils and 0% of primary school pupils reported vaping once per day.

The Association of Directors of Public Health in the North East have assessed the evidence and developed a factsheet on youth vaping and a position statement on the role of vaping in tobacco control and how to protect young people. The key messages are that vaping is not for children; that vaping can help adults to quit smoking but it is not risk free and those who do not smoke, should not vape. ASH have produced a document which addresses common misconceptions around vaping and the Public Health Advanced Practitioner provided examples of educational resources which have been shared with schools in County Durham.

The Public Health Advanced Practitioner informed the Committee that central to the work is how to portray the message, balancing the risk, in order that adult smokers use vaping as an aid to help them to stop smoking but that it also discourages people who have never smoked from starting to vape. Members noted that a motion to Council was agreed on 6 December 2023 for Durham County Council to respond to the government's consultation to create a smokefree generation, by supporting the age of sale proposal for tobacco and vaping and to propose evidence based measures to tighten the promotion of vapes to reduce their appeal to children and young people.

The Chair thanked the Public Health Advanced Practitioner officer for the presentation and requested comments and questions from the Committee.

Councillor Mulholland questioned whether more could be done to tackle the illicit sale of vapes and he also remarked on the environmental damage caused by disposable vapes.

The Public Health Advanced Practitioner explained that the Council's response to the consultation does not request a ban on disposable vapes, however it does suggest an additional tax on disposable vapes, to make them less accessible to young people. The Public Health Advanced Practitioner added that the introduction of a new legislation to create a smokefree generation is expected to include plans to support local trading standards to tackle the trade in illicit vaping products.

With regard to the environmental impact of disposable vapes, work has been done to increase the number of recycling points across the county and this issue has been included in the consultation response.

Darren Hull, Team Leader for Consumer Safety, referred to difficulties caused by loopholes in the law which leave some disposable vapes outside the scope of the regulations. He also pointed out that the current law enables children to obtain free samples of vapes. He stated that, at present, there is a consultation with government which includes closure of these loopholes, which Public Health and Durham County Council's Trading Standards have collectively responded to. He explained that the Waste Electrical and Electronic Equipment regulations (WEEE) places a duty on manufacturers to ensure waste electrical goods are recycled and he added that Trading Standards generally are looking to further lobby for more legislation to address these issues and include disposable vapes.

The Chair raised concerns that illegal products are being sold unknowingly by honest business operators and she asked what action could be taken to trace the supply of illegal products. The Team Leader for Consumer Safety explained that when businesses seek advice and prior to any intelligence led operation, Durham Trading Standards Teams will always provide relevant guidance. He explained there is nationally a Home Authority Scheme where Traders are advised according to relevant Local Authority policies, however those seeking advice under the Primary Authority scheme may seek advice from any authority in the country and Durham has no control over advice given by other authorities. The Team Leader stated that officers now carry out spot-checks during routine inspections, checking inside boxes for illegal products, whenever it is possible to do so.

Councillor Hovvels welcomed the motion to Council however she pointed out that tackling under age sales comes with costs for enforcement. Councillor Hovvels stressed that resources will be required and Trading Standards authorities will need to link with the work of HMRC and Border Force in order to access funding for action to prevent underage sales and tackle the import of illicit goods.



Councillor Quinn referred to the statistics on vaping prevalence and gave the view that whilst the figures were concerning, the figures may not reflect the true extent of the problem as they be subject to under-reporting. The Public Health Advanced Practitioner explained the survey, which was a school based survey on health, conducted in 2022 was the most up-to-date study available, however, the next survey will be conducted in 2024.

In response to a question from Councillor Quinn as to whether the survey included questions on the consumption of energy drinks, some of which contain alcohol, the Public Health Advanced Practitioner responded that questions on energy drinks were included and that there was scope to modify the questions in the next survey, for more detailed information to be provided. The Team Leader for Consumer Safety clarified that there are no age restrictions on the sale of energy drinks, however, the advice provided by the service is that national retailers have agreed to voluntarily ban the sale of energy drinks to customers under 16 years of age.

Councillor Crute asked whether the resources for schools are designed to encourage pupils to take messages back to their parents as children can be very persuasive in their efforts to stop their parents smoking. The Public Health Advanced Practitioner confirmed that the service recognises that children are a powerful tool to encourage parents to be better role-models. The message must protect children and young people whilst also support adult smokers to stop smoking.

The Chair referred to the culture shift since legislation was passed to ban smoking in enclosed public spaces and she commented that she hopes the future will see a smokefree generation.

**Resolved:**

The joint Children and Young People's and Adults Wellbeing and Health Overview and Scrutiny Committee received the report and presentation and provided comment.

**8 Sexual Health Strategy**

The Committee considered a report of the Director of Public Health which provided members of the Joint Special Children and Young People's and Adults, Wellbeing and Health Overview and Scrutiny Committee with the County Durham Sexual Health Strategy (CDSHS) 2023 – 2028, for information (for copy of report and presentation, see file).

Helen Riddell, Public Health Principal was welcomed to the meeting to deliver the report and presentation. The Public Health Principal outlined the CDSHS aligned with national policy and guidance on sexual and reproductive health and linked to key documents from the World Health Authority and the National Institute for Health and Care Excellence.

Members noted that a six week public consultation was carried out and the Public Health Principal explained the five priority areas which were identified in order to reduce health inequalities, namely, relationships and sexual health education across the life course; teenage conceptions; contraception; sexually transmitted infections and reproductive health. The next steps included the production of a detailed delivery plan, with multi-agency involvement to agree key performance indicators and regular update reports will be provided to the Health and Wellbeing Board.

Councillor Quinn thanked the service for the work done with regard to adult sexual health and the officer replied that increasing the inclusive support to adults had been highlighted as a key priority area, following the consultation process.

Councillor Varty questioned whether school governors receive training on relationships, sex and health education (RSHE) done in schools. The Public Health Principal clarified that public health staff work closely with RSHE leads in primary and secondary schools to provide a whole system approach, to identify specific needs within each school.

Mrs Gunn referred to the need for the work in schools to be, not only age appropriate but also developmentally appropriate and she added that healthy relationship work was particularly important for neurodivergent young people. The Public Health Principal confirmed that there is recognition that the strategy must meet different levels of understanding to ensure the same healthy relationship messages are conveyed to all young people at the appropriate time. The Public Health Principal stated that the issue is raised through the alternative provider forum and regional networks will look at guidance to ensure messaging is consistent and new guidance released by the government on the RSHE curriculum is promoted through all education settings.

Councillor Scurfield spoke of the importance of ensuring children and young people looked after and those who are absent from school are included in the work and the officer replied that the development of the plan will include work with parents, foster carers, staff in Residential Homes and alternative providers, to ensure health messages are inclusive.

Councillor Andrews commented on reports of an increase in sexually transmitted infections and the increase of antimicrobial resistance nationally since the Covid-19 pandemic.

The Public Health Principal informed the Committee that the issues are recognised and work will focus on the promotion of prevention interventions.

**Resolved:**

The joint Children and Young People's and Adults Wellbeing and Health Overview and Scrutiny Committee noted the content of the report, presentation and accompanying County Durham Sexual Health Strategy 2023 – 2028.

**9 Such other business**

The Chair reminded members that the next meeting of the Children and Young People's Overview and Scrutiny Committee will be held on Monday 8 January 2024.