

COUNCIL – 19TH NOVEMBER 2020

QUESTIONS RAISED BY MEMBERS OF THE COUNCIL

1. **Question submitted by Councillor Keith to the Cabinet Member for Children, Schools and Safeguarding (Councillor Kelly)**

Subject: Children and Young Peoples Plan Progress Update

As the Cabinet member for Children, Schools, Families and Safeguarding I would hope that you were as horrified as I was at the appalling statistics presented to us at the meeting on 10th November. The dashboard made dismal reading and below are just some examples.

I'm aware that there was some doubt raised at the meeting about the validity of the figures, and we were assured that revised data would be presented. Can you inform me when the revised statistics will be available, and when they are released would you distribute them to all members?

Furthermore, why was there no indication given of the other regions' numerators on 'EYFS SEN' and 'Key stage 2 SEN' and can this please be included in the revised data?

Hospital Admissions - Hospital admissions caused by unintentional and deliberate injuries in children - aged 15-24 was 95 % higher than the National figures and 74% higher than North West. Sefton's current rate of hospital admissions for older children and young adults sits close to the worst in the country.

Attendance at Accident and emergency for under ones. 99% higher than the National average. 69% higher than the North West. Over the last three years Sefton has been significantly above the national and regional picture for this metric.

Hospital admission for Self harm - 10-24 year olds 75% higher than National average 50% higher than the North West. This pattern is contrary to elsewhere which has stayed stable.

EYFS SEN Achieving Good 100% lower than the National Average 100% lower than the North West average - Note that this data will be very volatile due to the relatively small numbers in the numerator for Sefton.

Key stage 2 SEN 67% achieving expected standard 67% lower than the National average and 67% lower than North West average. Note that this data will be very volatile due to the relatively small numbers in the numerator for Sefton.

Key stage 4 Progress 8

94% lower than the North West average Progress 8 performance in Sefton in the years 18/19 is comparatively poor and worsened last year.

Response:

"In April 2020 we launched our new Children and Young People's plan, which details 12 key priorities based on need in Sefton and the UN Convention of the Rights of the Child.

As part of this work we have developed a new Performance Dashboard which focusses on the priorities and helps us to understand the areas that we need to focus on as a partnership response; we recognise this needs to be finessed and reviewed to ensure there is a strong narrative with data.

An update will be going to the next Overview and Scrutiny Committee (Children's Services and Safeguarding) in relation to the specific reference to data and other regions numerators, where available.

It is important to note that responses to the following health related questions have been provided by Southport and Formby and South Sefton CCG's.

Hospital Admissions - *Hospital admissions caused by unintentional and deliberate injuries in children – aged 15-24 was 95 % higher than the National figures and 74% higher than North West. Sefton's current rate of hospital admissions for older children and young adults sits close to the worst in the country.*

Response: This data was taken from 2018/19 supplied to Public Health England by our Acute Trusts. Whilst Sefton's rate is greater than the national average it should be noted that these are admissions 'for any reason' and equates to fewer than two 15-24-year olds per day as of 2018/19 data.

For assurance any child or young person who presents in need of services through A and E departments will be supported to access appropriate services.

The way in which coding of data occurs means that further work is needed locally to understand the figures in relation to under 18 cohort. Sefton is unusual in that it has two paediatric specific A and E services based in acute settings. These are at Alder Hey Hospital and Ormskirk Hospitals as part of the Southport and Ormskirk NHS Trust. In other areas there would be a walk-in offer for our paediatric patients, and we believe this may have affected the data in that all episodes are coded as A and E admissions. This will be rectified going forward.

Work is being undertaken to update the local data with information from 19/20

Attendance at Accident and emergency for under ones. *99% higher than the National average. 69% higher than the North West. Over the last three years Sefton has been significantly above the national and regional picture for this metric.*

Response: This data is correct as reported as of 2018. Sefton's rate is higher than the national average according to this data, but again these admissions are 'for any reason' and reflects naturally higher A&E usage than other areas with higher levels of community-based services.

Sefton is unusual in that it offers of two paediatric specific A and E services. We do not have a walk-in offer in Sefton for our paediatric patients and no specific offer in GP out of hours which we believe has affected this data.

The CCGs are in the process of reviewing other local data and their services for comparative purposes and this will be shared with Children and Education Overview and Scrutiny once it is complete over the next two weeks.

Hospital admission for Self-harm – 10-24-year olds 75% higher than National average 50% higher than the North West. This pattern is contrary to elsewhere which has stayed stable.

Response: This response was provided to me by Sefton and Formby and South Sefton CCG's. This data is correct as reported the latest data available (2018/19). Since this time, the Sefton Clinical Commissioning Groups have been developing a number of services to address the issues.

As part of our integrated commissioning activity in this area, we will review as an all age pathway over the next 12 months to be assured we are maximising the opportunity to access the right level of Mental Health Care and Support.

The Sefton Clinical Commissioning Groups are responsible for the Child and Adolescent Mental Health Services (CAMHS). The specification for this is currently under review. The review will help identify any gaps in service provision. There is currently an increased demand for Mental Health services as is the case nationally and over the last 12 months we have increased our crisis support offer including making this available 24/7. Alongside Public Health and the Council, investments have been made in Kooth and the service is available 24/7 for children and young people to access themselves. The CCGs have also expanded their eating disorder service for young people.

CAMHS performance is managed closely to review key indicators such as waiting times. In response there has been additional short-term funding for Alder Hey CAMHS, and local Community and Voluntary sector organisations Venus, Parenting 2000 and online counselling service Kooth to help meet rise in demand due to external factors.

The CCG have developed a Crisis Support Service which includes a specific offer of support to those young people who self-harm or are at risk of self-harming.

Both admissions from self-harm 10-24 and unintended & deliberate injuries 15-24 showed as sharp rise in 2018/19 and became significant outliers. Admissions from self-harm are a sub-set of unintended & deliberate injuries i.e. in most cases self-harm is recorded as both, but not all injuries are recorded as self-harm.

The rate for unintended and deliberate injuries for 10-14 year old's in 2018/19 is much lower than 15-24; indeed it is lower than the North West average. This indicates that with self-harm 10-24 the large increase in 2018/19 is most likely attributable to the 15-24 age range, that will attend adult A&E.

In 2018/19 'assessment' bays/units were implemented in our local adult Trusts. This saw a significant increase in the number of zero length stays - when a patient is 'admitted' mainly for further assessment and observation but is discharged the same day with no overnight stay. The number of zero lengths of stay rose by over 1500 (60%+) between 2017/18 and 2018/19. This is not matched by the same increase in A&E activity for this age group (which increased by less than 1.5%). 2019/20 figures show that this has continued, but that people staying for more than 1 night is lower than both the two preceding years.

This indicates that a higher proportion of 15-24 presenting with self-harm or unintended/deliberate injury are admitted for further assessment/observation and discharged the same day rather than either no admission or more lengthy stay.

EYFS SEN Achieving Good 100% lower than the National Average 100% lower than the North West average - Note that this data will be very volatile due to the relatively small numbers in the numerator for Sefton.

Response: This data is up to the end of the academic year 2018/2019 as there has been a National suspension of data collection due to COVID.

The Sefton Early Years Team have been working with nurseries and schools to deliver training and support on early language development and SEND. A new Early Years Training page has been developed on the Education Portal. However, due to Covid these areas were halted and have now resumed this term. The Early Years Training group are developing on-line training, resources and videos which will be up-loaded onto the portal and accessible to all early year's staff.

The Early Years team is working closely with the school improvement and the inclusion teams to provide a holistic approach to working across all early years to ensure that children have quality teaching in all settings.

Key stage 2 SEN 67% achieving expected standard 67% lower than the National average and 67% lower than North West average.

Note that this data will be very volatile due to the relatively small numbers in the numerator for Sefton

Response: This data is correct as of the end of the academic year 2018/2019, as there has been a National suspension of data collection due to COVID. This data relates to a small cohort of children.

A working group is in place to develop strategies to support children with English and maths. Training and support will be given to schools. The Graduated Approach Booklet has also been rewritten which provides guidance to teachers on working with pupils with special needs.

The Interim Head of Service for Education is building strong relationships with our schools starting to work on a new Education Strategy. The inclusion team is working in partnership with the school improvement team to identify schools that need further support as well as linking in with the Virtual School to provide targeted support. This will also include training for newly qualified teachers and recently qualified teachers.

Schools identified as causing concern are being held to account through half termly meetings and actions will be agreed and monitored.

Three of our schools are also on the Teach First Leadership Programme to develop leaders across the school. Two of our schools are also benefitting from the Department for Education support through the support due to COVID.

Key stage 4 Progress 8

94% lower than the North West average Progress 8 performance in Sefton in the years 2018/19 is comparatively poor and worsened last year.

Response: The data was produced at the end of the academic year 2018/19 and is correct as presented. as there has been a National suspension of data collection due to COVID. It is important to note that 12 of our 18 mainstream secondary schools are Academies.

Action Taken and Plans moving Forward: (This is not intended to be an exhaustive list but examples of ongoing work)

- Appointed an Interim Head of Education Excellence with a strong background in education who has successfully engaged schools and built relationships with Head Teachers.
- A stronger Focus on School Improvement and refreshed approach which includes representative head teachers developing policies with the Local Authority.
- Greater partnership working with schools for the benefit of children and young people.
- Attendance at the Sefton's Association of Primary head Teachers (SAPH) and the Primary Head Teachers Association and Special Head Teachers by Senior officers including the Chief Executive.
- A comprehensive programme for Newly Qualified Teachers as well as Recently Qualified Teachers developed in partnership with Teaching Schools.
- A new programme for new and Acting Head Teachers, including a mentor and bespoke Continuous Professional Development.
- New arrangements for Monitoring and Intervention of School Performance has been implemented this term and schools causing concern are in the process of having their challenge meetings
- Work across Early Years to provide a consistent approach and training for all nursey aged children regardless of setting (private nursery or school)
- Working groups on Autistic Spectrum Disorder, Social Emotional and Mental Health, inclusion and English and Maths in place.
- Work on a refreshed Education Strategy is underway, which will be fully inclusive for children and Young people 0 to 25.
- Work with Liverpool City Region to develop a programme of support to schools including a Leadership Academy and recruitment of teachers.

Whilst this illustrates the work that has been going on, there has been unprecedented impact on our schools and ability to drive these plans forward due to the impact of Covid-19 during 2020. Our priority was supporting vulnerable children and children of keyworkers to attend schools and this was very successful. Since returning to school in September 20 our priority has been keeping schools open in the face of rising infection rates, Tier 3 and National Lockdown.

The work of Schools, Public Health and Education Colleagues in the LA has assured that our schools have been able to remain open to children, albeit with 'bubbles', year groups and teachers isolating. Despite this our priority remains very much on school Improvement and ensuring that all children in Sefton get the education they deserve."

2. **Question submitted by Councillor Shaw to the Cabinet Member for Regulatory, Compliance and Corporate Services (Councillor Lappin)**

Subject: Proposed PSPO - Dog Control

There is a particular aspect of the proposed PSPO that I have difficulty in understanding, and it relates to the proposed (new) Restricted Areas in Schedule 3, paragraph 1 (4). This would have the effect that, in future, dogs must be kept on leads of not more than 2 metres in length within unfenced (open) playgrounds.

Would the Cabinet Member please advise me: -

- (1) of the location of all the “designated unfenced (open) Playground” areas in Southport and Formby, and
- (2) how much of the total open space area will be “designated” at each of these locations?

Response:

- (1) “Schedule 3 of the proposed PSPO sets out the restricted areas that dogs must be on leads of not more than 2 metres in length and includes requirements contained within the Sefton Metropolitan Borough Council Public Space Protection Order - Dog Control 2017. A number of unfenced (open) playgrounds would have been already captured by these requirements as they sit within family and Picnic areas. The location of additional unfenced (open) playgrounds not already captured by provisions relating to family and picnic areas in Southport and Formby are, Ainsdale Village Park and Botanic Gardens.”
- (2) “It is intended that the requirement applies only to the area in close proximity to children’s play equipment. Each location will be individually assessed but it is anticipated that these areas will be small, leaving open spaces areas.”

3. **Question submitted by Councillor Sir Ron Watson to the Leader of the Council (Councillor Maher)**

Subject: Supplementary Questions at Council

Members of the Council accept that in the current circumstances with Covid-19 it is not possible for the Council to meet in its normal democratic manner.

There were changes to procedure introduced as a temporary expedient for the last Council but it is clear from that experience that the issue of questions from Members has shown that the new conditions are neither practical nor conducive to open government.

This refers in particular to the inability of Members to ask supplementary questions which is a core element of normal procedure.

The reason given for not allowing this was that it would take up too much time but this is self-evidently not correct and the time taken by asking questions at a virtual Council is actually less than the time taken at a normal Full Council Meeting.

Would the Leader of the Council therefore agree that this restriction on Members should now be withdrawn to enable any relevant supplementary questions to be asked at the meeting?

Response:

“Under the new interim measures introduced to deal with remote meetings the answers to all written questions are provided by email to all members no later than 4pm on the day of Council. This means that Members receive the answers at least 2 hours earlier than they would normally do when the answers are passed around the chamber about 6pm on the evening of a meeting.

Members are allowed to ask supplementary questions. They can do so by email by 4pm on the Friday after the Council meeting and they will receive a written reply by 4pm on the Monday after the meeting. All members then receive a copy of the written supplementary questions and answers.

It is not unusual for 20 or so questions to be asked at Full Council meetings and it was felt that the new procedure would allow for a smoother running remote meeting. However, the procedures are new and will be kept under review by officers and may be amended through experience and as circumstances change.

The majority of Members have been content with the new procedure and no member of the Council, other than Cllr Watson in this question, has expressed concern to me.”

4. **Question submitted by Councillor Sir Ron Watson to the Leader of the Council (Councillor Maher)**

Subject: Virtual Council Meetings

Most Members of the Council will agree that virtual Council meetings are a poor substitute for Members meeting on a collective basis which allows a much greater and productive interchange of views.

Would the Leader of the Council please advise what progress has been made in determining the procedure as a first step for the introduction of hybrid Council meetings following the example set by the House of Commons?

Response:

“All Councillors will be aware that we are currently under a ‘National lockdown’ due to the Covid 19 pandemic and as such, public meetings are banned at present. It is my belief that we, as members of the Council, should lead by example in our Borough and that we should not hold any face to face meetings at this time.

I hope the Councillor will agree with me that all necessary precautions should, indeed must, be observed in this time of a national health crisis and that Councillors have an important leadership role in this. As such, and until circumstances change, there are no current plans to resume any Council meetings held in person, hybrid or otherwise.

Having said that, I understand officers in Democratic Services and IT have started looking at technological solutions for holding hybrid meetings should circumstances indeed change but early indications are that the costs of new technology may be prohibitive. Further work will be undertaken and fed back to members through appropriate channels at the appropriate time.

It is worth noting that the government are set to review the manner in which they hold hybrid meetings given the amount of concern expressed by MPs: <https://www.bbc.co.uk/news/uk-politics-54958333>”