Merton Council
Children and Young People Overview and Scrutiny Panel

Date: 26 June 2019
Time: 7.15 pm
Venue: Committee Rooms CDE, Civic Centre, London Road, Morden, SM4 5DX

AGENDA

This is a public meeting – members of the public are very welcome to attend. The meeting room will be open to members of the public from 7.00 p.m.

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Children and Young People Overview and Scrutiny Panel membership

Councillors:
Sally Kenny (Chair)
Hayley Ormrod (Vice-Chair)
Agatha Mary Akyigyina OBE
Omar Bush
Edward Foley
Joan Henry
James Holmes
Russell Makin
Marsie Skeete
Dave Ward

Substitute Members:
Dickie Wilkinson
Thomas Barlow
Billy Christie
Andrew Howard

Co-opted Representatives
Helen Forbes, Parent Governor
Representative - Secondary and Special Sector
Emma Lemon, Parent Governor
Representative - Primary Sector
Colin Powell, Church of England diocese

Note on declarations of interest

Members are advised to declare any Disclosable Pecuniary Interest in any matter to be considered at the meeting. If a pecuniary interest is declared they should withdraw from the meeting room during the whole of the consideration of that mater and must not participate in any vote on that matter. If members consider they should not participate because of a non-pecuniary interest which may give rise to a perception of bias, they should declare this, .withdraw and not participate in consideration of the item. For further advice please speak with the Assistant Director of Corporate Governance.

What is Overview and Scrutiny?
Overview and Scrutiny describes the way Merton's scrutiny councillors hold the Council's Executive (the Cabinet) to account to make sure that they take the right decisions for the Borough. Scrutiny panels also carry out reviews of Council services or issues to identify ways the Council can improve or develop new policy to meet the needs of local people. From May 2008, the Overview & Scrutiny Commission and Panels have been restructured and the Panels renamed to reflect the Local Area Agreement strategic themes.

Scrutiny's work falls into four broad areas:

⇒ **Call-in**: If three (non-executive) councillors feel that a decision made by the Cabinet is inappropriate they can 'call the decision in' after it has been made to prevent the decision taking immediate effect. They can then interview the Cabinet Member or Council Officers and make recommendations to the decision-maker suggesting improvements.
⇒ **Policy Reviews**: The panels carry out detailed, evidence-based assessments of Council services or issues that affect the lives of local people. At the end of the review the panels issue a report setting out their findings and recommendations for improvement and present it to Cabinet and other partner agencies. During the reviews, panels will gather information, evidence and opinions from Council officers, external bodies and organisations and members of the public to help them understand the key issues relating to the review topic.
⇒ **One-Off Reviews**: Panels often want to have a quick, one-off review of a topic and will ask Council officers to come and speak to them about a particular service or issue before making recommendations to the Cabinet.
⇒ **Scrutiny of Council Documents**: Panels also examine key Council documents, such as the budget, the Business Plan and the Best Value Performance Plan.

Scrutiny panels need the help of local people, partners and community groups to make sure that Merton delivers effective services. If you think there is something that scrutiny should look at, or have views on current reviews being carried out by scrutiny, let us know.

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CHILDREN AND YOUNG PEOPLE OVERVIEW AND SCRUTINY PANEL
13 MARCH 2019

(7.15 pm - 9.30 pm)

PRESENT   Councillor Sally Kenny (in the Chair), Councillor Edward Gretton,
                 Councillor Agatha Mary Akyigyina, Councillor Omar Bush,
                 Councillor Edward Foley, Councillor Natasha Irons,
                 Councillor Mark Kenny, Councillor Hayley Ormrod,
                 Councillor Dennis Pearce, Councillor Eleanor Stringer,
                 Helen Forbes, Emma Lemon and Colin Powell

ALSO PRESENT   Councillor Kelly Braund - Cabinet Member for Children's
                 Services
                 Councillor Caroline Cooper-Marbiah - Cabinet Member for
                 Education
                 Rachael Wardell - Director of Children School and Families,
                 Jane McSherry - Assistant Director of Education
                 Paul Angeli – Head of Social Care and Inclusion
                 Sharon Buckby – Interim Head of Policy, Planning and
                 Performance
                 Elizabeth Fitzpatrick – Head of School Improvement
                 Keith Shipman – Social Inclusion Manager
                 Celia Dawson - , Head of Cricket Green School, and Co-Chair of
                 the School Effectiveness Partnership
                 Lisa Jewell – Democratic Services Officer

1   APOLOGIES FOR ABSENCE (Agenda Item 1)

There were no apologies for absence

2   DECLARATIONS OF PECUNIARY INTEREST (Agenda Item 2)

There were no declarations of interest.

3   MINUTES OF THE PREVIOUS MEETING (Agenda Item 3)

RESOLVED: That the minutes of the meeting held on 13 February 2019 were agreed
as an accurate record.

4   SCHOOL STANDARDS ANNUAL REPORT (Agenda Item 4)

The Director of Children, Schools and Families introduced the School Standards
Report and answered some points of clarification made by Members.

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Celia Dawson, Head of Cricket Green School, and Chair of the School Effectiveness Partnership spoke to the Panel and gave an overview of the achievements and progress of pupils at Cricket Green School. She explained that special schools cannot be compared as each cohort will differ. Special Schools will consider the child as a whole, and work on achievements in social skills, communication skills and employment, with the aim of learning skills that will increase independence. Some children will be entered for accreditation and national initiatives such as functional skills in maths and English, Duke of Edinburgh Award, Arts subjects and employability training. Pupils at Cricket Green School have succeeded in obtaining qualifications that allow them to progress to College and/or employment.

The Panel thanked Celia Dawson and said that wonderful to hear about the success of the school.

The Head of School Improvement provided additional information in response to questions about the School Standards Report:

- We are aware that certain groups of children are making less progress, we do scrutinize this and bring schools together to improve outcomes.
- We challenge any under attainment and have ambition. Our Key Stage 1 Maths results are above the national average and have been rising in recent years. We have to ensure that progress is realistic and accurate, often where attainment is low children have still made great progress.
- If a School receives a 'Requires Improvement' from OFSTED then a Support and Challenge group of Officers will meet with the School to look at teaching and learning progress. The School will receive a high level of support between meetings according to the areas of need
- We do not have a high level of involvement with Academy Schools. Benedict School does access some support and some of their results are improving.
- We seek to maximize outcomes for Early Years, but children do start Early Years at very different levels, and we must be mindful of SEMH issues
- Whilst children growing up in poverty are less likely to get good results this gap is narrowing. Pupil Premium numbers are published, and school can run initiatives to support such students
- Early Years Children are all starting from different levels. Key Stage 1&2 writing was an area of concern in the past but has now significantly improved. There is a national Moderator in the Merton team, this is not necessarily replicated in other Local Authorities.
- Key Stage 4; past figures cannot be compared because of changes in GSCE marking. Our recent figures are above London Averages.
- A level results are highlighted in the Executive Summary. We are working with schools and have a robust plan to improve in place, including skilling up teachers.

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- Our Key Stage 2 Reading is 8th in the country and maths is 6th in progress, with strong progress comes rise in attainment.
- Will provide figures for post 16s who don't pass Maths and English

The Head of Inclusion provided additional information in response to questions about the School Standards Report:
- Persistent Absenteeism, defined as 10% or more, is mainly the result of illness, and children need the appropriate support for their illness. We have a low level in Merton. SEN and MH issues can increase absence rates.
- We can use legal powers, starting with penalty warning letters to parents if necessary.
- We do prosecute and fine for taking children out of school to go on Holiday
- Will provide figures and revenue figures for these fines.
- We can refer to the Children Missing Education Panel, this works across agencies to challenge and support and look at all the factors blocking children from attending school

The Director of Children Schools and Families provided additional information in response to questions about the School Standards Report:
- The number of children in Home Education in rising across the Country, but there is no evidence that Schools are forcing children into Home Education. There are a number of possible reasons for Home education. The School Environment can be very challenging for some children particularly those who are not attaining, those with SEN or SEMH needs and those being bullied.
- Schools need to achieve a balance between increasing attainment and having an environment that promotes child's mental health.
- Parents of SEN children may exercise their right to Home Education until the right placement is found.
- We do evaluate the quality of Home Education and if it is not meeting needs then we can put a school attendance order in place.
- EHCP funding is an area of challenge, there is a rising demand, we are spending more but not meeting all needs.
- Have to think about what 'good' looks like, it is different for different children. Children are ready at different times, they are all individual people – we can follow the data but it is only a snapshot; the 2017 cohort is completely different to 2018 cohort. It is Important to emphasise that all children are individuals, and cohorts will be different, these differences are not for lack of a plan.

5   TRACKING AN EHCP COHORT (Agenda Item 5)

The Panel noted the proposal of the Director of Children, Schools and Families, for a Task Group based on a study of individual young people with EHCPs as they transition from Children's to Adult Services. She explained that some would have

needs that would be eligible for Adult services, and some not. She proposed that such a study would last for longer than one year and would give the panel an opportunity to explore how the system worked.

Panel Members noted that although this proposal was not the same as the current Transition Task Group work, they would like to see the results of the Transition Task Group before making a decision on this proposed Cohort Study.

Panel Members suggested discussing it at the Topic Workshop on 20 May 2019.

6   PROGRESS MONITORING - CARE LEAVER ACCOMMODATION (Agenda Item 6)

The Head of Social care and Inclusion presented the report on Care Leaver Accommodation.

The Panel welcomed the report and asked for a further update to come back to the Panel later in the Year.

7   CABINET MEMBER PRIORITIES - VERBAL UPDATE (Agenda Item 7)

Councillor Caroline Cooper-Marbiah, Cabinet Member of Education gave an update:
- Secondary School Offer day was on the 1st March. A small number of children did not get a place but the Admissions Team are working to find places.
- Advice to parents who did not get their first preference is to ensure that you are put on, and stay on, the waiting list for your preferred school but to accept the place that has been offered.
- Attended an Anti-Idling event at Morden Primary School. Members asked to be kept informed of other similar events in the Borough
- In reply to a question regarding School results, the Cabinet Member for Education said that she planned to work with Officers to ensure that they are doing their best for Schools in the borough.

The Vice Chair reminded the Panel that 5 Schools in the Borough had received less than Good in recent OFSTED Inspections. He asked in particular about how performance could be improved at Stanford and Merton Abbey Schools. The Cabinet Member for Education explained that Stanford had gone down to a single form and joined an Academy group with a good record, there are also plans to site a SEN Hub on the School site. Officers reiterated the process for helping schools explained in the Schools Standards Report. A panel member explained that Merton Abbey had a very disadvantaged intake and that their current trend is upwards.

Councillor Kelly Braund, Cabinet Member for Children's Services gave an update:

- Attended the Merton Safeguarding Awayday, it was disappointing that the Police were not able to attend. The priorities up to 2021 were set as:
  1. Early Help with intervention at any Stage
  2. Think Family with particular focus on Domestic Abuse
  3. Contextual Safeguarding
  4. SEND funding
- She also informed the panel that she had signed a joint letter asking Government to properly fund SEN Schools.
- A Panel member asked if Domestic Violence could be an issue for a Task Group. The Cabinet Member for Children's Services informed the Panel that she attended a VAWG (Violence against Women and Girls) board and this could inform any CYP considerations.

8   DEPARTMENTAL UPDATE REPORT (Agenda Item 8)

The Director of Children, School and Families presented her Departmental Report

9   PERFORMANCE MONITORING (Agenda Item 9)

The Interim Head for Policy, Planning and Performance, presented the Performance Report The Panel noted the Report and the contributions of the Performance Monitoring Lead Members; Councillors Eleanor Stringer and Hayley Ormrod.

The Panel paid particular attention to the figure for the percentage of Children that became the subject of a Child Protection Plan for the second or subsequent time. Officers explained that this requirement for repeat child protection plans is very often linked with Domestic Abuse. The Panel noted that the issue of Domestic Violence and Abuse is considered by partnership working across Council departments.

The Panel noted that there are still some areas where more detail on target measures is required.

10   SCRUTINY TOPIC SUGGESTIONS AND WORK PROGRAMME (Agenda Item 10)

The Director of Children, Schools and Families asked the Panel to note the success during the year of 2018-2019, of the Young People's Panel and asked Members to continue to think about how to include the voice of Young People in its work. This was supported as a theme to take forward.

Panel Members asked if they could consider issues linked to Domestic Violence in Families, as mentioned in their discussion during the performance management item, and noted that this was a cross cutting theme.

Panel Members expressed a strong desire to look at the issue for Schools of their PFI contracts and the legacy of these contracts.

The Chair reminded members that they could submit any further items to the Head of Scrutiny.

The Panel noted that the following items are planned for the meeting 26th June 2019:
- Air Quality in Schools
- Report from Children's' Mental Health Task Group
- Presentation from Director and Cabinet Members of Key Challenges and issues for the coming year.

RESOLVED

A.   That the Panel reviewed its 2018/19 work programme, identifying what worked well, what worked less well and what the Panel would like to do differently next year;

B.   That the Panel suggested items for inclusion in the 2019/20 work programme – both agenda items and potential task group review topics; and

C.   That the Panel advised on agenda items for its meeting on 26 June 2019.

Committee: Children and Young People's Overview and Scrutiny Panel
Date: 26 June 2019

Agenda item:

Wards: All

Subject:

Lead officers: Dagmar Zeuner, Director of Public Health

Lead member: Tobin Byers, Cabinet Member for Adult Social Care, Health & the Environment

Contact officers: Mike Robinson, Consultant in Public Health; Clarissa Larsen, Health and Wellbeing Board Manager.

Recommendations:

A.   To consider, note and support the draft Health and Wellbeing Strategy of the Health and Wellbeing Board.

PURPOSE OF REPORT AND EXECUTIVE SUMMARY
This report presents the draft Merton Health and Wellbeing Strategy 2019 – 2024 which will be reported to the Health and Wellbeing Board on 26th June.

BACKGROUND
It is a statutory duty of the Health and Wellbeing Board to produce a Health and Wellbeing Strategy. The draft Strategy has been developed with full involvement of Health and Wellbeing Board members as well as colleagues across the Council, partner organisations and engagement of the voluntary sector and community.

DETAILS

A copy of the cover report to the HWBB is attached to this report together with the full draft of the Strategy.

The Health and Wellbeing Strategy is explicitly intended to align with other strategies and plans across the Council including the new Children and Young People's Plan, the developing Sustainable Communities Strategy and the Local Plan. It also links closely with the Local Health and Care Plan (as detailed in the report).

Development of the Health and Wellbeing Strategy has involved close working with colleagues from Children, Schools and Families including. Think Family is one of the core principles and ways of working of the Health and Wellbeing Board.

1

NEXT STEPS

The draft Health and Wellbeing Strategy was reported to the Health and Wellbeing board on 25th June and will now be reported to the Council's Cabinet and Merton CCGs Governing Body. Fuller details of the timeline are in the attached report.

ALTERNATIVE OPTIONS

N/A

CONSULTATION UNDERTAKEN OR PROPOSED

A comprehensive programme of engagement has taken place as set out in the report and Strategy.

TIMETABLE

As set out in the attached report.

FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS

None

LEGAL AND STATUTORY IMPLICATIONS

It is a statutory duty for the Health and Wellbeing Board to produce a Health and Wellbeing Strategy

HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS

The Health and Wellbeing Strategy is specifically aimed at tackling health inequalities.

CRIME AND DISORDER IMPLICATIONS

N/A

RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS

N/A

APPENDICES

Appendix 1 – Health and Wellbeing Board report.

Appendix 2 – Draft Health and Wellbeing Strategy 2019 - 2024

Background Papers

None

Officer Contact

Dagmar Zeuner, Director of Public Health.

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Committee: Health and Wellbeing Board

Date: 25th June 2019

Subject: Merton Health and Wellbeing Strategy 2019 - 2024 Final Draft

Lead officer: Dagmar Zeuner, Director of Public Health

Lead member: Cllr Tobin Byers, Cabinet Member for Adult Social Care, Health and the Environment

Contact officer: Mike Robinson, Consultant in Public Health; Clarissa Larsen, Health and Wellbeing Board Partnership Manager

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Recommendations:

That the Health and Wellbeing Board:

A. Consider and agree the final draft Health and Wellbeing Strategy 2019 – 2024.

B. Note and agree the proposed annual reporting of the Health and Wellbeing Strategy to the Board.

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1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

The purpose of this report is for the Board to consider and agree the final draft of the Health and Wellbeing Board strategy 2019 – 2024.

2. BACKGROUND

It is a statutory duty for the Health and Wellbeing Board to produce a Health and Wellbeing Strategy and this new Strategy, with its focus on healthy place, reflects the ways of working that this Board has adopted in recent years. Development of the Strategy has included broad engagement and an ongoing conversation with stakeholders and local connectors.

Members of this Board considered and agreed a draft outline of the Health and Wellbeing Strategy 2019 – 2024 at their March meeting. This final draft Strategy includes feed-back and some further details. To keep the main document concise, it is backed by a Supplementary Information Pack.

Health and Wellbeing Board members have driven the engagement process through the themed workshops and these have formed the focus of the Strategy on Healthy Place; building on the established commitment of the Board to promote fairness and reduce health inequalities.

At the Board's March meeting, members helped to refine the approach, their principles and ways of working and the key outcomes emerging from the engagement programme. The Board's continued ownership of the Strategy and its rolling programme of key priorities will be central to future achievement.

Synergy with the Local Health and Care Plan

Throughout the development of the Health and Wellbeing Strategy, close links have existed with the Local Health and Care Plan. We have worked with

colleagues to coordinate both of these plans and make sure they complement each other (see Figure 1. below).

Figure 1: How the Local Health and Care Plan and Health and Wellbeing Strategy fit together

- The Local Health and Care Plan (LHCP) is overseen by the Merton Health and Care Together (MHCT) Board.
- MHCT Board focuses on health and care services and integration and reports to the Health and Wellbeing Board (HWBB).
- The HWBB is the statutory council committee to provide overall vision, oversight and strategic direction for health and wellbeing in Merton, including the wider determinants of health.
- The refresh of the HWBB strategy takes the same life course approach as the LHCP – start well, live well, age well – but with a focus on creating a healthy place.
- We have worked to explicitly align the two plans to make sure they complement each other.
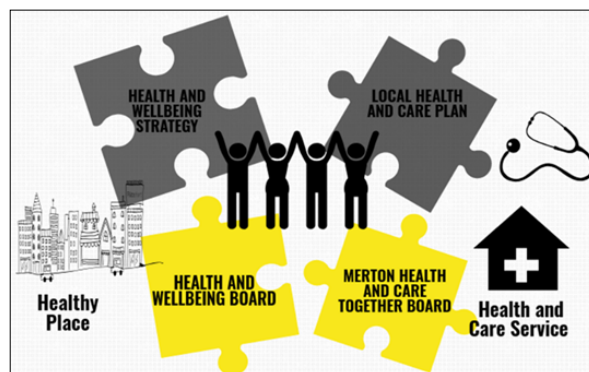
3. DETAILS

Summary of Health and Wellbeing Strategy

The final draft Health and Wellbeing Strategy is attached in Appendix 1. In summary, the Strategy sets out:

P. 2 – 3	A summary of what makes us healthy and an introduction to how the Health and Wellbeing Board works.
P. 4	An outline of the methodology we followed in developing the Strategy.
P. 5 – 6	A brief overview of the Merton Story and learning from the last Health and Wellbeing Strategy.
P. 7 – 8 & Appendix Table 1	The Board's Vision, Principles and Ways of Working (as discussed at the March Health and Wellbeing Board, with the addition of Think Family and working from a strong evidence base).

P. 8 – 9 Table 2 & Appendix Table 3	The key healthy place attributes of:
	    o Promoting mental health and wellbeing
	    o Making the healthy choice easy
	    o Protecting from harm
	and key outcomes for each by stages of the life course

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P. 9 Table 4	The key healthy settings including healthy intergenerational settings, healthy schools, healthy work places and healthy homes.
P. 10	A description of our way of delivery and how we will determine our rolling programme of priority actions
P. 10	How we show progress and learn through our framework for accountability

Supplementary Information Pack

The Strategy has deliberately been kept concise backed by the Supplementary Information Pack included in Appendix 2.

There are links to this pack throughout the draft Strategy. It provides further details of the methodology and findings from the workshops, gives a rationale for each of the key outcomes, provides an explanation of the role of healthy settings and describes the types of actions the Board can take to influence most effectively.

4. NEXT STEPS

In recent years, Health and Wellbeing Board members have recognised that the partnership works best when it focusses at any given point in time on one or two key priorities. Within the new Strategy, we propose to continue this approach.

Initial consideration of priorities took place at the March Health and Wellbeing Board and criteria to identify proposals were discussed. It was agreed that it is important to keep momentum on the current Board priority of tackling diabetes.

Potential additional priorities include scaling up systematic work on promoting Healthy Workplaces - with a focus on mental health and active travel. It is proposed that a report be brought to the Health and Wellbeing Board's October meeting to consider this as a new priority for action together with the ongoing work with the Leadership Centre, to support further board learning in preparation for the future shape of the health and care system.

Subject to agreement, the Health and Wellbeing Strategy will be reported to the Council's Cabinet and partners' governing bodies. Following this, it will be designed, published and shared widely. We also plan to produce an accessible, single page summary.

We continue to work closely to align with the Local Health and Care Plan throughout.

5. ALTERNATIVE OPTIONS

None. It is a statutory duty of the Health and Wellbeing Board to produce a joint Health and Wellbeing Strategy.

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6. CONSULATIONS UNDETAKEN OR PROPOSED

The comprehensive engagement programme is as set out in the report and appendices.

7. TIMETABLE

Date	Meeting	Purpose
June		
25 June 2019	Health and Wellbeing Board	Final HWS for sign off
26 June 2019	Children and Young People Overview and Scrutiny Panel	For information
July		
3 July 2019	MCCG Governing Body	Agreement for publication
15 July 2019	Cabinet	Agreement for publication
TBC	Healthwatch and MVSC	Agreement for publication

8. FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS

The Health and Wellbeing Strategy does not have any additional expenditure implications for partner members for Health and Wellbeing Board. The rolling programme of priority actions will be delivered through decisions within existing governance and, where there is the opportunity, external funding.

9. LEGAL AND STATUTORY IMPLICATIONS

It is a statutory duty for the Health and Wellbeing Board to produce a joint Health and Wellbeing Strategy based on the Joint Strategic Needs Assessment.

10. HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS

The Health and Wellbeing Strategy is directly concerned with improving health equity.

11. CRIME AND DISORDER IMPLICATIONS

A key outcome of the Health and Wellbeing Strategy is to less self-harm and less violence.

12. RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS

N/A.

APPENDICES – the following documents are to be published with this report and form part of the report

Appendix 1: Health and Wellbeing Strategy 2019-24 – Final Draft

Appendix 2: Supplementary Information Pack

BACKGROUND PAPERS

None.

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Merton Health and Wellbeing Strategy 2019-24

# A Healthy Place for Healthy Lives

FINAL DRAFT

FOREWORD

WELCOME

What makes us healthy?

The physical and social conditions that make us healthy are all around us; for example the air we breathe, our schools, workplaces, homes, our relationships with friends and family, the food available, how easy it is to move around in the borough, how safe we feel in our streets.

These are known as the wider determinants of health, shown in the diagram below.

Diagram 1 – Wider determinants of health
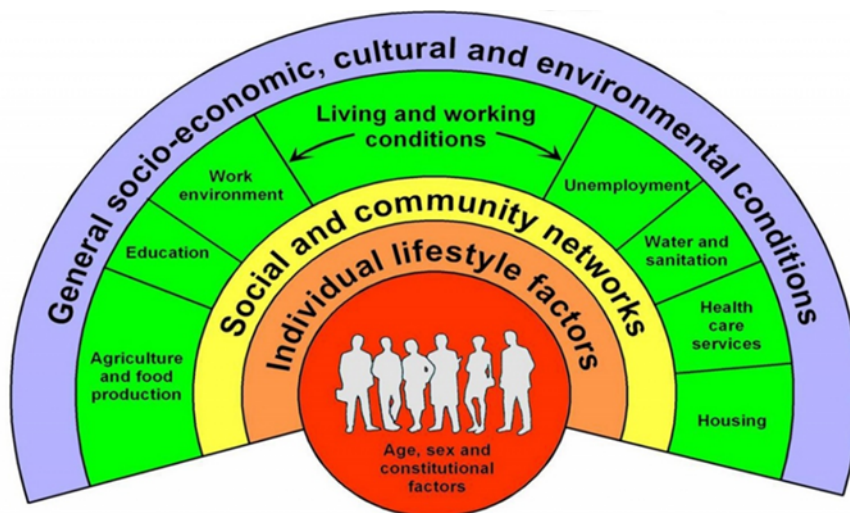
Source: Dahlgren and Whitehead, 1991

Differential access and exposure are the main drivers for health inequality.

The main unhealthy lifestyles that are responsible for over a third of all ill health are smoking, alcohol misuse, poor diet and sedentary behaviour, underpinned by lack of emotional and mental wellbeing. Rather than due to individual choice, they are shaped by the physical and social conditions in which we are born, grow, live, work and age.

This is why our Health and Wellbeing Strategy focuses on making Merton a healthy place for healthy lives.

What is the Merton Health and Wellbeing Board and how does it operate?

The Health and Wellbeing Board is a statutory partnership to provide overall vision, oversight and direction for health and wellbeing in Merton, including service provision and the wider determinants of health. It brings together local Councillors, GPs and community representatives supported by officers, as system leaders to shape a healthy place and health and care services.

The Board operates as a partnership where members are accountable to their respective organisations.

Merton Health and Care Together Board is a separate non-statutory partnership between Council and NHS commissioners as well as the main local health and care providers, including acute and mental health hospitals, community trust and GP federation that reports to the Health and Wellbeing Board. It focuses on health and care service provision and integration.

The Health and Wellbeing Board and Merton Health and Care Together board have agreed to develop complementary strategies to best cover the breadth of health and wellbeing and avoid duplication.

The Health and Wellbeing Strategy focuses on making Merton a healthy place, meaning creating the social and physical conditions in which people can thrive; the Local Health and Care Plan focuses on provision of integrated high quality health and care services, as depicted in the diagram below.

Diagram 2 - Relationship between Health and Wellbeing Strategy and Local Health and Care Plan

Both the Health and Wellbeing Strategy and Local Health and Care Plan commit the Health and Wellbeing Board to championing its guiding principles and key aspirations. Health and Wellbeing Board members have a collective and individual responsibility to ensure these are reflected in the business of their own and partner organisations, are heard in other groups and committees and become embedded in strategies and commissioning across the health and care system.

About the Health and Wellbeing Strategy

The purpose of this Strategy is not to give a comprehensive overview of all major health issues. This is provided by the Joint Strategic Needs Assessment, which in Merton is called the Merton Story. The Health and Wellbeing Strategy is a tool to support the Health and Wellbeing Board as system leader where it can add most value. In particular:

- To champion our guiding principles and ways of working in everything we do;

- To focus on the key health outcomes we wants to achieve for people in Merton to Start Well, Live Well and Age Well in a Healthy Place, considering the key attributes of a Healthy Place and the main healthy settings;

- To select a rolling programme of priorities for action, a few at a time, which will be underpinned by specific implementation plans;

- To be accountable jointly as Board and as individual organisations to partners and the community we serve.

Our Methodology

The Health and Wellbeing Strategy has been developed on the basis of a thorough evidence base and comprehensive engagement programme.

- Desk research including the Joint Strategic Needs Assessment/Merton Story, Resident's Survey, data and latest publications
- A series of engagement workshops, involving over 100 people, led by Health and Wellbeing Board members, finishing with a lively session on Healthy Place.
- In-depth surveys circulated to workshop attendees, their networks and contacts.
- Stakeholder engagement with partners and learning from the Local Health and Care Plan deliberative event.

Navigating the Strategy

The Health and Wellbeing Strategy is divided into four main sections:

1. Our starting position
2. What we want to achieve
3. Our way of delivery
4. Our framework for accountability

The Strategy is a concise document with a separate *Supplementary Information Pack* for further details.

1. OUR STARTING POSITION

How healthy are people in Merton?

The Joint Strategic Needs Assessment, Merton Story, shows us that, overall, Merton is a safe and healthy place, rich in assets such as green spaces, libraries, good schools and strong transport connections and compares favourably with other London boroughs. Our main challenges are:

- Significant social inequalities between the East and West of the borough that drive a health divide including a persistent gap in life expectancy and ill-health;
- Large numbers of people with unhealthy lifestyles (smoking, poor diet, sedentary behaviour and alcohol misuse underpinned by poor emotional/mental health and wellbeing);
- Child and family vulnerability and resilience, i.e. increase in self-harm;
- Childhood obesity;
- Increasing numbers of people with complex needs and multi-morbidity including physical and mental illness, disability, frailty and dementia; and
- Hidden harms and emerging issues such as air pollution, loneliness, violence and exploitation.

The below diagram shows an infographic summary.

**Diagram 3 – Merton story infographic summary**
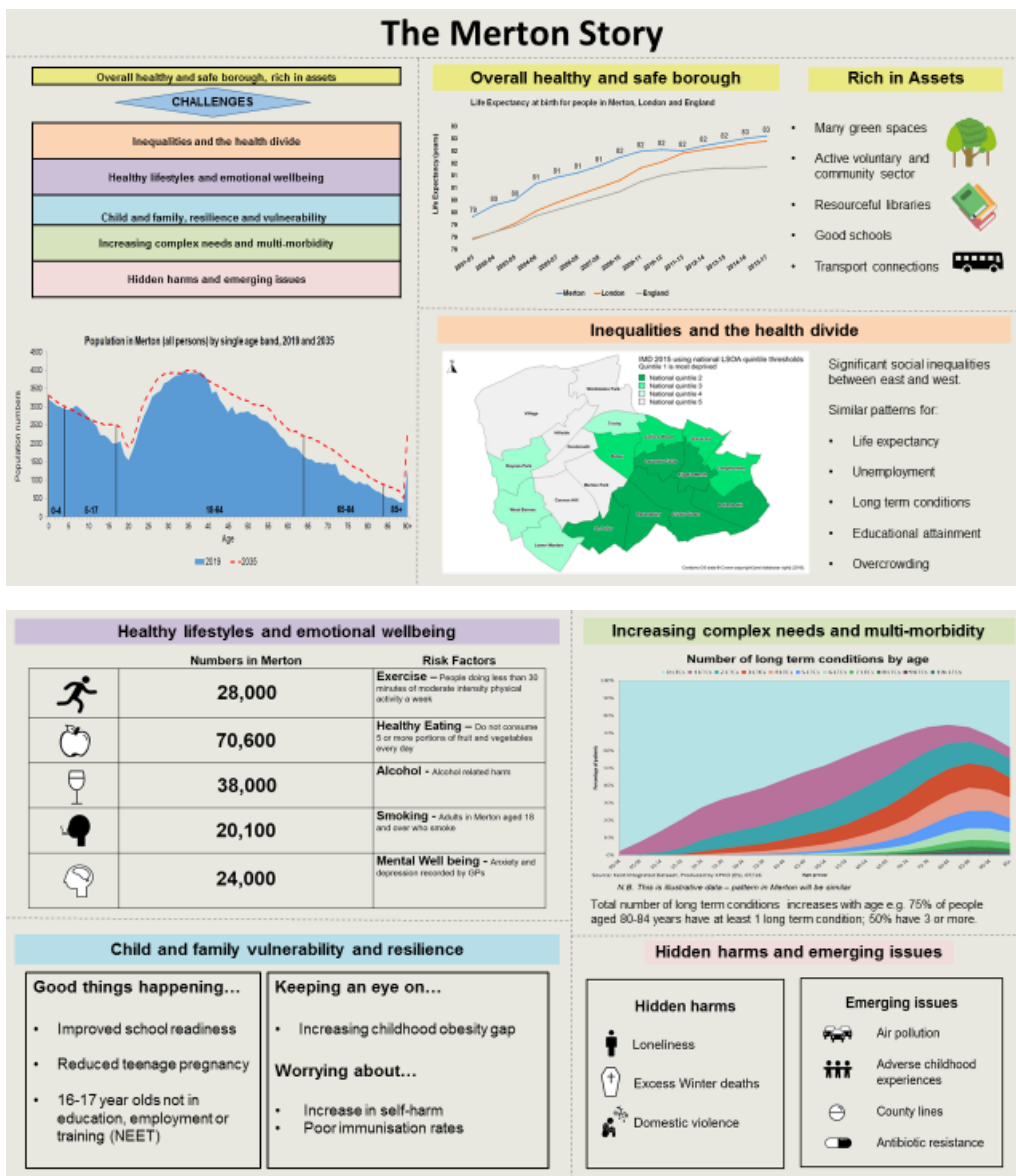
What people tell us matters to them about a healthy place

The following topics have emerged as being particularly important to local people:

- Mental health, good relationships and feeling connected to their communities and networks is one of the most frequently raised topics;
- Air quality is a top concern to people of all ages, but especially young people;
- Inter-generational opportunities had significant support, to connect older and younger people and build social cohesion;
- The food system needs to be tackled as adverts, fast food outlets, price of food, lack of healthy alternatives make the healthy choice difficult;
- Libraries and green spaces are assets that are very valued and people would like more use of community spaces and places to connect socially;
- Work places are a key setting with influence on people's health and offer a great opportunity to improve mental wellbeing and healthy lifestyle choices; and,
- Safety of the physical and social environment was another recurring theme of importance for people of all ages

The diagram below is a summary drawing of the findings from our Healthy Place workshop.

Diagram 4 - Healthy Place workshop illustration
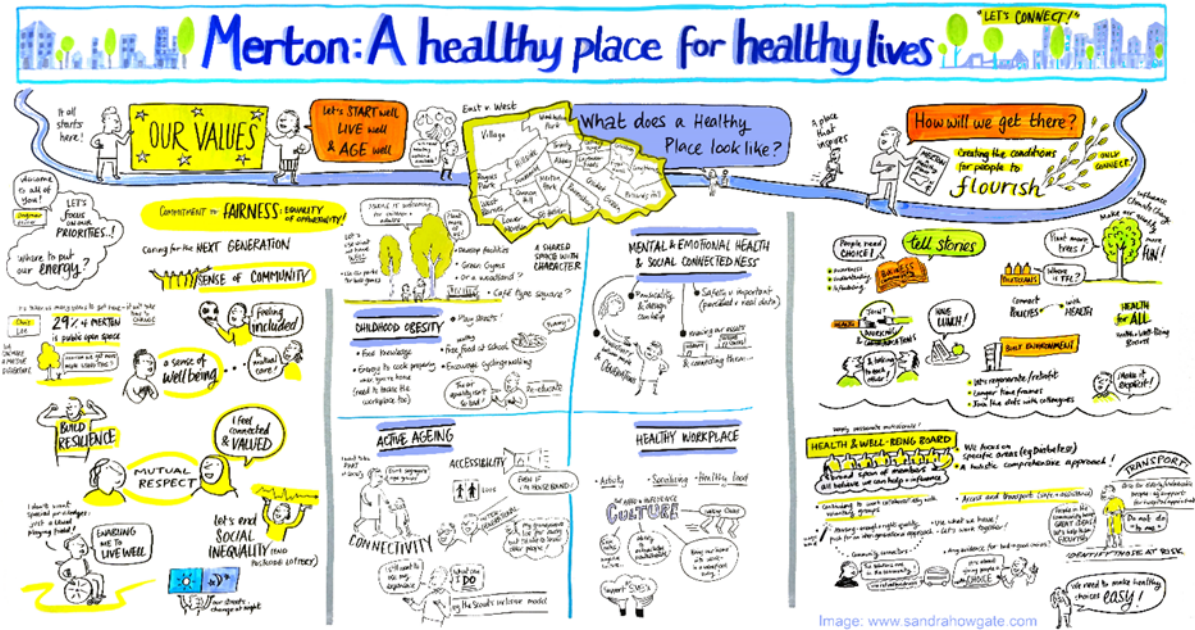
Learning from the last Health and Wellbeing Strategy

Over the three- year period of the last Health and Wellbeing Strategy (2015-18) the Board has explicitly sought to experiment and learn about its challenge to add value and be an effective system leader. This covered:

- Reflective Board development work with the Leadership Centre;

- Promoting and embedding principles and ways of working based on shared values including social justice in partner organisations;
- Quarterly dashboard reviews replaced by an annual review that combines quantitative and qualitative information to produce insights for the Board role, rather than replicate performance management approach;
- Practical role for of all members in community engagement (i.e. community conversations about the Wilson health and wellbeing campus and the Diabetes Truth programme, where members were connected to residents with diabetes bringing to life the day-today challenges);
- Selecting a small number of priority areas for action as a rolling programme, with clear rationale for concerted effort, rather than trying to cover a wide range of issues at the same time (i.e. whole system approach to tackle diabetes and childhood obesity; spotting the value of social prescribing and championing its development and roll out);
- Making best use of the fact that the Board is more than the sum of its individual members' contributions; and in a similar way it is part of a set of partnerships and other Boards whose potential impact as a system is greater than the sum of its parts.

2. WHAT WE WANT TO ACHIEVE

Vision for Health and Wellbeing Strategy

Working together to make Merton a healthy place by creating the physical and social conditions for all people to thrive, and to complement the provision of holistic health and care services.

Vision for Merton Local Health and Care Plan

Working together to provide truly joined up, high quality, sustainable, modern and accessible health and care services, for all people in Merton, enabling them to start well, live well and age well.

Principles and ways of working

The Health and Wellbeing Board has prioritised the following principles and ways of working underpinning everything that we do including delivery of this strategy:

- Tackling health inequalities - especially the east/west health divide in the borough that is driven by social inequality and the wider determinants of health.
- Prevention and early intervention – helping people to stay healthy and independent and preventing, reducing or delaying the need for care.
- Health in All Policies approach – maximising the positive health impacts across all policies and challenging negative impacts.
- Community engagement and empowerment- working with and for the people and communities we serve; explicitly using and developing assets and strengths.
- Experimenting and learning- the problems we want to tackle are complex and there are no single or neat solutions; using the evidence base, data and intelligence transparently to understand and monitor impact and adjust accordingly.

- Think Family – taking a whole family approach where seeing the parents means seeing the child and seeing the child means seeing the parents as a routine.

Table 1 in the Appendix shows the impact we can make through applying the above Principles and Ways of working and how we propose to measure progress.

Key Outcomes

For people in Merton to Start Well, Live Well and Age Well in a Healthy Place we have brought together a set of key health outcomes based on the main attributes of a healthy place. These are proposed to form the core of the Health and Wellbeing Strategy.

They are meant to be specific enough to clearly articulate the direction for the Board without unduly constricting its ability to adapt over the five- year period.

The key attributes for a Healthy Place that the Health and Wellbeing Board has identified are:

- Promoting good mental health and emotional wellbeing.
- Making the healthy life style choice easy (with focus on food, physical activity, alcohol & drugs, tobacco).
- Protecting from harm, providing safety (with focus on air quality, violence).

Table 2 below shows how our outcomes for people to Start well, Live Well and Age Well fit within a matrix of the key attributes for a healthy place and allow easy cross reading to the Local Health and Care Plan.

Table 2 – Outcomes matrix of the Health and Wellbeing Strategy

Life course stage	Start Well	Live Well	Age Well
Key Healthy Place attributes:	**Key Outcomes of the Health and Wellbeing Strategy:**		
Promoting mental health & wellbeing	Less self-harm Better relationships	Less depression, anxiety and stress	Less loneliness Better social connectedness
Making healthy choice easy	More breastfeeding Less childhood obesity	Less diabetes More active travel More people eating healthy food	More active older people
Protecting from harm	Less people breathing toxic air Less violence		

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Table 3 in the appendix shows a set of indicators to track progress against each of the key outcomes. We are working with partners to develop targets where appropriate which will be included in the annual review to the Health and wellbeing Board.

The *Supplementary Information Pack* provides a rationale for the key outcomes*.*

Delivering Outcomes through Healthy Settings

People live their lives in various places or settings such as home, school and work. They experience a healthy place in a setting where the three attributes - promotion of mental health and wellbeing, easier healthy choices and protection from harm – come together. This forms a 'healthy setting' and creating healthy settings is a way to deliver on our key outcomes. The Health and Wellbeing Board has identified the most relevant healthy settings for people in Merton as shown in the table below.

Table 4 – Key Healthy Settings

Life course stage	Start Well	Live Well	Age Well
Healthy settings Key attributes of a Healthy Place • **Promoting mental health and wellbeing** • **Making the healthy choice easy** • **Protecting from harm**	**Healthy inter-generational settings (i.e. connecting care homes and nursery schools, links to Dementia-friendly Merton); Healthy Homes**		
	Healthy early years; **Healthy schools;** **Healthy school neighbourhoods**	**Healthy work places;** **Healthy libraries**	**Healthy health and care organisations**

Each of the above healthy settings has or can work towards a quality mark or level to help us track progress. Examples include the London Healthy Early Years scheme, London Healthy Schools award scheme, London Healthy Work Place Award, and Transport for London Healthy Streets descriptor.

We will work with partners to develop our healthy settings as part of our rolling programme of priorities for action, which will be included in the annual review to the Health and Wellbeing Board.

More details about healthy settings and their quality marks are set out in the *Supplementary Information Pack.*

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3. OUR WAY OF DELIVERY

To deliver this Strategy the Health and Wellbeing Board will:

- Apply the Principles and Ways of Working set out earlier to all routine and statutory Health and Wellbeing Board business.
- Champion Principles and Ways of Working in our respective partner organisations and embed them into other strategies and plans.
- Focus on a rolling programme of a few priority actions at a time to promote key attributes of a healthy place, main healthy settings and corresponding outcomes using explicit rationale based on criteria below:

  - ➢ Consider evidence of need (using the Merton Story and community voice) together with an opportunism to tackle emerging and/or topical issues.
  - ➢ Investigate how the proposed priority will address the principles of the Health and Wellbeing Board (specifically promoting fairness, engaging and empowering communities and demonstrating a health in all policies / Think Family approach).
  - ➢ Be clear how will the Health and Wellbeing Board add value in a way that cannot be delivered in another way; how will the partner contributions create something bigger and more impactful together than individually, and how this will contribute to wider local and regional work.

    Examples of different types of actions that the Board might use for best influence are summarised in the *Supplementary Information Pack*.

4. OUR FRAMEWORK FOR ACCOUNTABILITY

The Health and Wellbeing Board is committed to learning and wants to understand whether it is delivering on its commitments.

An annual review of the Health and Wellbeing Strategy will be reported to the Health and Wellbeing Board. This will include:

- Progress on chosen priorities for action, including any chosen healthy settings.
- Application of Principles and Ways of Working.
- A summary dashboard of key outcomes.
- Ongoing development of the Health and Wellbeing Board as effective system leadership team (including work with the Leadership Centre).

There will also be ad-hoc exception reports to the Health and Wellbeing Board for any issue that requires the Board's attention.

Appendices

Table 1 – Applying our principles and ways of working – how we will track progress

Principle	Expected outcomes/impact	How we will know*	Timescale†
Tackling health inequalities *	People in deprived areas live longer healthier lives	Reduction in childhood obesity gap between east and west Merton.	Long
Prevention and early intervention *	Reduction in premature mortality from main long-term conditions	Proportion of the population meeting the recommended '5-a-day' on a 'usual day' (adults).	Medium
		Percentage of physically active adults	Short
		Smoking Prevalence in adults (18+).	Short
Health in all policies	Impacts on health are considered across main policy areas	An annual review will be reported to the Health and Wellbeing Board which will include a qualitative description of significant Board activity across these four principles. This will be backed by any relevant quantitative data including for example from the Merton Resident's Survey.	Short
Community engagement and empowerment	More focus on main health challenges as residents perceive them		Medium
Experimenting, learning and applying the evidence base	Complex problems are tackled and evidence base applied		Short
Think Family	Policies and practice reflect impact on the whole family		Medium

*Indicators have been chosen as 'markers' for Tackling Health Inequalities and Prevention - as we cannot measure everything and the Health and Wellbeing Board cannot deliver alone but as part of a wider system.

†Timescales for impact vary, as shown in final column. "Short" means an estimate of 1-2 years before we will see an effect; "Medium" 3-5 years, "Long" 6 or more years

Table 3 –Key outcomes and corresponding indicators to track progress

Key Healthy Place attributes:	Key outcome of the Health and Wellbeing Strategy:	Indicator*	Timescale†
Promoting mental health & wellbeing	Less self-harm Better relationships	Hospital admissions for self-harm aged 15-19	Medium
	Less depression, anxiety and stress	Prevalence of depression as recorded by GP Quality Outcomes Framework	Medium
	Less loneliness Better social connectedness	% adult carers reporting as much social contact as they would like	Short
Making healthy choice easy	More breastfeeding	Prevalence at 6-8 week check	Short
	Less childhood obesity	Overweight or obese in Year 6	Medium
	Less diabetes	Diabetes: Quality Outcomes Framework prevalence (17+)	Long
	More active travel	% adults cycling three or more times per week for travel	Short
	More people eating healthy food	Percentage of adults eating recommended five portions of fruit and vegetables per day	Medium
	More active older people	Percentage of adults aged 65+ walking for travel at least three days per week	Short
Protecting from harm	Less people breathing toxic air	Deaths attributable to particulate matter (PM2.5)	Short
	Less violence	Violent offences per 1000 residents	Medium

* as for Table 1 above.

† as for Table 1 above

MERTON HEALTH AND WELLBEING STRATEGY 2019 - 2024

Supplementary Information Pack
June 2019

Preface

This supplementary information pack is to be read in conjunction with the main Health & Wellbeing Strategy, "A Healthy Place for Healthy Lives".

This is not all the background information which has been developed, please refer to section 7, for a list of other material, which will be made available later in 2019 alongside the final version of the main document.
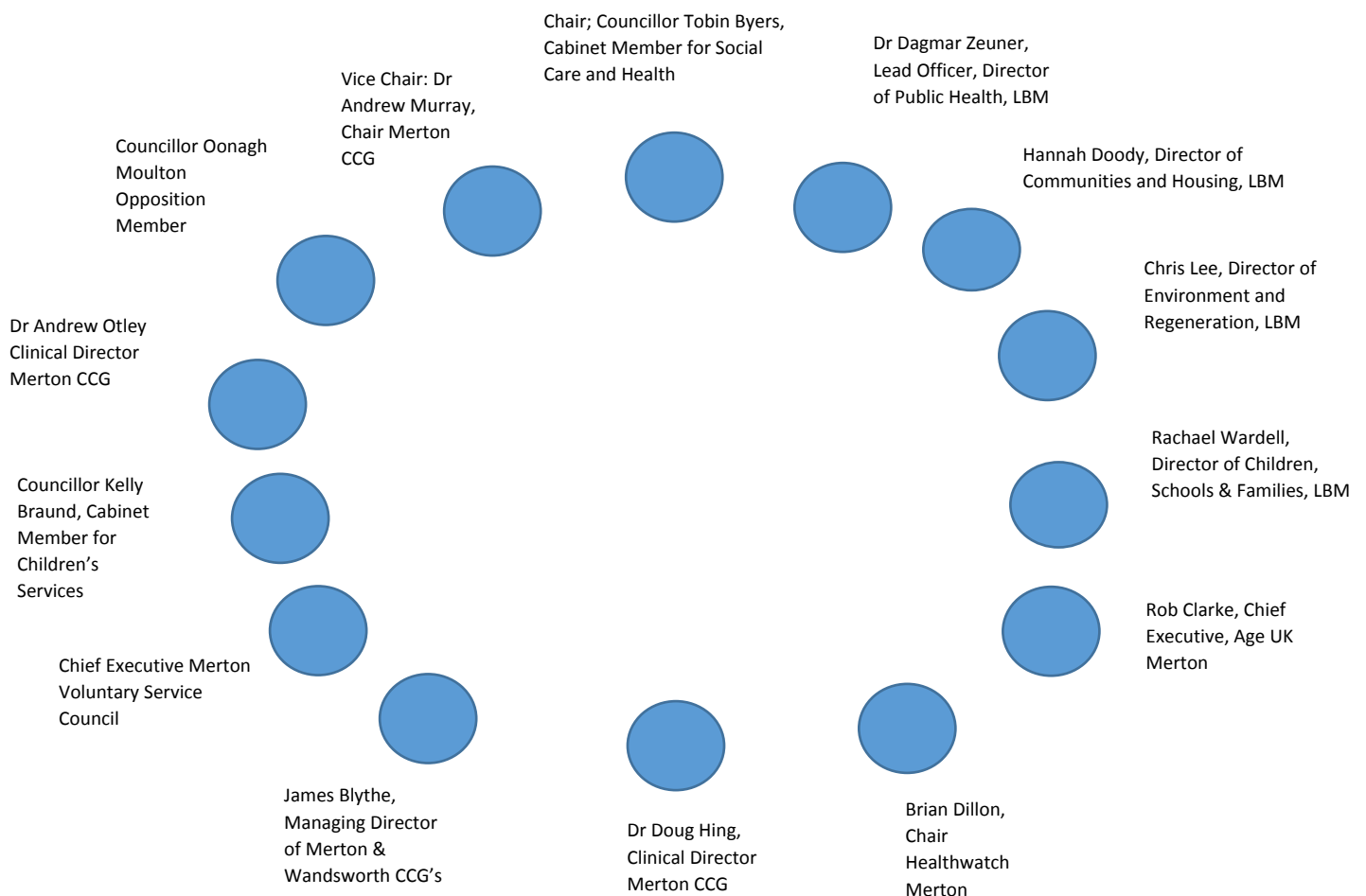
Contents

1. Who the Health and Wellbeing Board are and what they do

Merton Health and Wellbeing Board brings together a group of senior leaders from different sectors who provide leadership for health and who help mobilise the Council, the NHS and the Community to take action towards the vision set out in the Health and Wellbeing Strategy. The Health and Wellbeing Strategy is a document that sets out a vision for Merton residents to live healthy lives. The Health and Wellbeing Board (HWBB) are responsible for taking forward this vision.

See figure 1 for who the Board are. The Board also has agreed principles and ways of working, these can be found in the main strategy document.

Figure 1: The Health and Wellbeing Board

Chair; Councillor Tobin Byers, Cabinet Member for Social Care and Health

Vice Chair: Dr Andrew Murray, Chair Merton CCG

Councillor Oonagh Moulton Opposition Member

Dr Dagmar Zeuner, Lead Officer, Director of Public Health, LBM

Hannah Doody, Director of Communities and Housing, LBM

Chris Lee, Director of Environment and Regeneration, LBM

Dr Andrew Otley Clinical Director Merton CCG

Councillor Kelly Braund, Cabinet Member for Children's Services

Rachael Wardell, Director of Children, Schools & Families, LBM

Chief Executive Merton Voluntary Service Council

Rob Clarke, Chief Executive, Age UK Merton

James Blythe, Managing Director of Merton & Wandsworth CCG's

Dr Doug Hing, Clinical Director Merton CCG

Brian Dillon, Chair Healthwatch Merton

2. The workshops: what we did

The programme of four workshops on the themes of the Strategy allowed stakeholders to reflect on where the Health and Wellbeing Board can add most value, through its role in bringing the people of Merton together to work towards a shared vision of health and wellbeing.

Members of the Health and Wellbeing Board helped to lead the four themed workshops to facilitate discussion around the priorities for Start Well, Live Well, Age Well and Healthy Place.

In the workshops we discussed and reflected on what we think about the priorities for Start Well, Live Well and Age Well with a particular focus on what a healthy place would look like to help people flourish.

In the workshops we also discussed values and ways of working. Past experience suggested that the Health and Wellbeing Board is most effective when it focuses efforts on a few select priority areas, rather than a broader range of issues. Its success partly lies in the commitment of its members to promote shared values in their own organisation including social justice, prevention and a desire to learn and experiment. To build on this, there were opportunities in the workshops to help us further explore people's interests, motivations and values regarding the Start Well, Live Well and Age Well stages of the life course.

The Strategy refresh also builds on current work, for example continuing to promote 'health in all policies' and 'Think Family' as tools to create the conditions in Merton that help people lead healthy lives, as well as to explore new areas.

We also created short online surveys on the four themes, which were circulated to workshop attendees to circulate to their networks so more people could be reached. In total the workshops involved over 100 people and our online surveys received 78 responses, and the Children and Young People's Survey (whose findings also contributed) received around 1,300 responses.

Workshop timetable

Workshop	Date
Start Well	5 Nov 2018
Live Well	18 Dec 2018
Age Well	31 Jan 2019
Healthy Place	12 Feb 2019

3. Values that emerged from the workshops

Values identified in the workshops
Start Well
- The importance of freedom   - The right to play   - Sense of belonging/identity   - Access to healthy places and spaces   - Building strong relationships   - Family   - Reducing inequality
Live Well
- Empower people   - Collaborate   - Ask what matters to people   - Social responsibility   - Build a strong community and social cohesion
Age Well
- Empower communities   - Social and intergenerational awareness   - Holistic approaches   - Collaborate & play to strengths   - Sense of belonging   - Think creatively   - Tackle stigma
Healthy Place
- Children are our future   - Build a sense of community   - Reduce inequality (health, social)   - Create a healthy place that creates health and wellbeing   - Mutual care, support and respect   - Accessibility (to physical environment) and connectedness (social networks)   - Space is intergenerational-push for an intergenerational approach   - Give people a healthy choice   - Build on what we already have and our assets   - Family

At all the workshops we also asked the workshop participants where they thought the Health and Wellbeing Board could add most value. This is what they said:

Galvanise all the levers **we have in Merton to make change happen**

Build **on what is already happening and the** assets **we have**

Ensure a sustained focus **on specific priorities (e.g. childhood obesity) and promote them**

Listen to, engage and partner **with communities,** empower **them by giving them a voice (e.g. community conversations)**

Share **positive stories and** learning **across the community**

Advocate **more for children and younger residents**

Connect, build awareness and influence **the key players in the system; community, voluntary and business sector, health and care sector, politicians and LBM – to take action on creating a healthy place**

Push for health in all policies

Communicate **about the link between health and wellbeing and healthy place (e.g. healthy workplace) and promote** action **on it**

Build an aspiration/vision for healthy places **across the whole borough, rather than in pockets**

Promote the importance of healthy workplaces focusing on mental health**, by** modelling the way**, supporting businesses to do so (e.g. by providing a framework for action) and share learning about what works**

Promote the importance of air quality **and** make it fun **(rather than focusing on punitive policies)**

Push for intergenerational **working**

Use Councillors' knowledge **of their local places to understand where improvement is needed**

Be brave **and take risks**

4. Rationale for Key Outcomes

The purpose of this section of the supplementary information is to describe the rationale for each of the key outcomes in table 1 of the main report.

There are 12 key outcomes in total, 4 for Start Well, 4 for Live Well, 2 for Age Well and 2 which cover all 3 as part of the life course.

Key Outcomes
Start Well
Less self-harm **Self-harm is when somebody intentionally damages or injures their body. It's usually a way of coping with or expressing overwhelming emotional distress.[1]** • We have the fifth highest rate in London for emergency stays in hospital for self-harm by young people • Feeling emotionally overwhelmed as well as experiencing loneliness can lead to self-harm. Situations such as poverty, bullying, violence, illness, disability, death, loss, relationship problems, family problems, abuse and pressure lead children and young people to feel emotionally overwhelmed • The key causes/contributors to people self-harming and continuing to self-harm are the environment (culture social expectations, media, social media, spaces), services, processes, policies and people[2]
Better relationships **Connection occurs when a person is actively involved with another person, object, group or environment, and that involvement promotes a sense of comfort, well-being and anxiety reduction.[3]** • Connectedness can have a protective effect increasing the probability of a person overcoming disadvantage • Research has found that young people who felt more connected to their parents and schools reported lower levels of depressive symptoms, suicidal ideation, non-suicidal self-injury, conduct problems as well as higher self-esteem and more adaptive use of time. • Connectedness includes satisfaction with 'place' (e.g. parks, leisure spaces) offering increased opportunities for social interaction and play.

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[1] https://www.nhs.uk/conditions/self-harm/
[2] Children and Young People Mental Wellbeing workshop, 28 February 2018, South West London Health and Care Partnership
[3] http://www.copmi.net.au/professionals-organisations/what-works/evaluating-your-intervention/youth-interventions/connectedness original source: Hagerty, Lynch-Sauer, Patusky & Bouwsema, 1993, p. 293

- Close links with family, friendship groups, community and schools can safeguard children and young people from harmful risk factors and may be an important aspect of early intervention.

Breastfeeding

Breastfeeding is a way of providing young infants with the nutrients they need for healthy growth and development[4]

- Breastfeeding is good for a child because it provides all the energy and nutrients the child needs in its first few months of life, promoting a strong immune system as well as sensory and cognitive development[5]
- Research has shown that infants who are not breastfed are more likely to have infections and become obese in later childhood.[6]
- Evidence shows that improving breastfeeding rates can also reduce hospital admissions and attendances in primary care, thus leading to financial savings.[7]
- Women are less likely to breastfeed at 6-8 weeks in the eastern wards of the borough including Cricket Green, Figges Marsh, Pollards Hill, St Helier and Lower Morden.[8]
- Data shows that in Merton and Sutton in 2012-13, (the most recent year for which this is available) breastfeeding initiation was 86.2% compared with 86.8% for London and 73.9% for England

Less childhood obesity

Overweight and obesity are defined as "abnormal or excessive fat accumulation that presents a risk to health".[9]

- Childhood obesity is one of the most serious public health challenges of the 21st century.
- In Merton, around 4,500 primary school children are estimated to be overweight or obese-this is equivalent to 150 primary school classes.[10]
- One in five children entering reception are overweight or obese and this increases to one in three children leaving primary school in Year 6.
- Rates of childhood obesity are higher in some communities in the east of Merton. For example, at age 4-5 years, one in ten children are obese in the east of the borough, whereas in the west one in 20 children are obese.

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[4] https://www.who.int/topics/breastfeeding/en/
[5] https://www.breastfeedingwelcomescheme.org.uk/news/report-highlights-breastfeeding-welcome-scheme/
[6] https://www.merton.gov.uk/healthy-living/publichealth/jsna/children-and-young-people-and-maternal-health/breastfeeding
[7] https://www.merton.gov.uk/healthy-living/publichealth/jsna/children-and-young-people-and-maternal-health/breastfeeding
[8] https://www.merton.gov.uk/healthy-living/publichealth/jsna/children-and-young-people-and-maternal-health/breastfeeding
[9] WHO https://www.who.int/dietphysicalactivity/childhood_what/en/
[10] https://www2.merton.gov.uk/annual_public_health_report_2016.17.pdf

- Obesity affects children's social and emotional wellbeing, and can lead to children experiencing low self-esteem, anxiety and depression. This can affect how well they do at school which in turn can have a negative impact on their employment opportunities as adults.
- Childhood obesity increases the risk of developing health conditions including asthma, type 2 diabetes and cardiovascular risk factors during childhood. It also increases the risk of long term chronic conditions in adulthood and can lead to premature death.
- The estimated cost of being overweight or obese to the NHS in Merton is £52 million annually.
- Over half of young people agree that fast food is too widely available. More than half agree that schools do not support them to eat healthily. [11]
- 74% of respondents to the Great Weight Debate Merton stated that tackling obesity should be given top or high priority.[12]
- Respondents felt that children in Merton could be better supported to lead healthier lives through: cheaper healthier food and drink (51%); making parks safer & more accessible for people to be active in (35%); less marketing and advertising of high fat and sugary food and drink (33%); more places for children to be active in (31%)[13]
- The most valued local assets for encouraging a healthy lifestyle in children are parks (77%), local Leisure Centres (47%) and local sport and youth activities (35%)[14]

Live Well

Less depression, anxiety and stress

Common mental health disorders include depression and anxiety disorders. These mental health problems are called 'common' because they affect more people than other mental health problems.[15] Stress is the feeling of being under too much mental or emotional pressure.[16]

- There are an estimated 24,000 adults in Merton (16-74 years) with common mental health disorders such as depression and anxiety (2014/15), representing 16.1% of the adult population.[17]
- GP data shows for recorded mental health prevalence, the difference between east and west Merton is 0.24 percentage points (1.01% prevalence in east Merton compared to 0.77% in west Merton), using 2016/17 data
- Parental mental health problems, parental misuse of alcohol and drugs and domestic violence are the most significant risk factors that impact on a child's health and wellbeing

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[11] CYPP Consultation 2019
[12] Great Weight Debate Merton 2017
[13] Great Weight Debate Merton 2017
[14] Great Weight Debate Merton 2017
[15] NICE https://www.nice.org.uk/guidance/cg123/ifp/chapter/Common-mental-health-problems
[16] https://www.nhsinform.scot/healthy-living/mental-wellbeing/stress/struggling-with-stress
[17] Merton Story 2018

- Work can help people look after their mental health by providing: a source of money and resources; a sense of identity; social contact and friendship; routine and structure; a healthy place where the healthy choice is easy; and opportunities to gain achievements and contribute. Healthy workplaces are one of the key settings identified in Table 2 of the main Strategy.
- It has been estimated that the cost to UK employers of mental-health related absence is £7.9 billion.[18]
- Research has found that people who are diagnosed with a chronic physical health problem like diabetes are 3 times more likely to be diagnosed with depression than people without it.   Diabetes in Merton is increasing. In 2017/18 there were 11,160 people aged 17 years or over in Merton who had been diagnosed with the condition, equating to 6.2% of the population, (see diabetes on p4)

Less diabetes

Diabetes is a serious health condition that occurs when the amount of glucose (sugar) in the blood is too high because the body cannot use it properly.[19]

- Diabetes prevalence is increasing in Merton and predictions show this trend will continue into the future unless we take action.
- Recorded diabetes prevalence is 8% in east Merton compared to 4.85% in west Merton.
- Life expectancy for those with diabetes is on average 10 years shorter than for those without the disease.
- Diabetes can cause significant health problems including damage to vision, poor circulation, damage to kidney function and cardiovascular diseases.
- Health and care costs are substantial. In England, diabetes costs the NHS about £10 billion, or 10% of the total NHS budget.
- In Merton in 2016, the total cost of diabetes was £25.1 million. If nothing changes, costs will increase by an extra £2.4 million per year in 5 years' time

Active Travel

Active travel means building walking and cycling and sustainable transport into daily routines and is one of the most effective ways to increase physical activity.[20]

- The most popular activities across all ages are walking, gardening and swimming.[21]
- One of the main barriers to physical health for 55-74 year olds is time, whereas 75+ is pain and mobility.[22]

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[18] Mental health and employers: The case for investment. Supporting study for the Independent Review, October 2017
[19] Merton Diabetes Annual Public Health Report 2019
[20]https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/523460/Working_Together_to_Promote_Active_Travel_A_briefing_for_local_authorities.pdf
 [21] Active Ageing Survey 2018
[22] Active Ageing Survey 2018

11

- People with caring responsibilities are less likely to be physically active. 91% said they would like to be more active, compared to an average of 80%. The main barriers to physical activity which carers report are time and family/caring responsibilities.[23]

People eating healthy food

A healthy place is one where healthy choices are the easy choices. This means healthy food is easily available & affordable and advertising of unhealthy food and drink is restricted

- See 'less diabetes' and 'less childhood obesity'
- When there are fast food outlets (FFO) close to a primary school, the easy choice is an unhealthy one. 81% of schools in the east have 1 or more FFO within 400 metres, whilst 68% of schools in the west have 1 or more.
- Since 2010, there has been a 31% increase in the numbers of children eligible for free school meals and in 2014/15 of the over 2,000 people who accessed support from food banks in Merton, 78% lived in the east of the borough[24]
- In Merton, 52.8% of children reported that they ate the recommended amount of fruit and vegetables each day; at least five portions[25]

Age Well

Less loneliness

Loneliness is a subjective feeling about the gap between a person's desired levels of social contact and their actual level of social contact. It refers to the perceived quality of the person's relationships.[26]

- People aged 50 and over are more likely to be lonely if they do not have someone to open up to, are widowed, are in poor health, are unable to do the things they want, or feel that they do not belong in their neighbourhood . [27]
- 15% of the older population in the UK are reported to experience loneliness.
- Social isolation, living alone and loneliness are linked with an approximate 30% higher risk of early death[28]

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[23] Active Ageing Survey 2018
[24] https://wimbledon.foodbank.org.uk/2019/05/09/40-increase-in-parcels-given-out-last-year/
[25] NCMP & Child Obesity Profile, Public Health England
[26] Age UK https://www.ageuk.org.uk/our-impact/policy-research/loneliness-research-and-resources/loneliness-isolation-understanding-the-difference-why-it-matters/
[27] https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/reports-and-briefings/loneliness/loneliness-report.pdf
[28] Association for Psychological Science. Loneliness and Social Isolation as Risk Factors for Mortality: A Meta-Analytic Review. 2015. Available from:
www.ahsw.org.uk/userfiles/Research/Perspectives%20on%20Psychological%20Science-2015-Holt-Lunstad-227-37.pdf

- Loneliness can impact our physical and mental health and has been linked to conditions such as coronary heart disease, high blood pressure, cognitive decline and depression.[29]
- 59% of adults aged over 52 who report poor health say they feel lonely some of the time or often, compared to 21% who say they are in excellent health [30]
- For 3.6 million people aged 65, television is the main form of company.[31]

Better social connectedness

Social connectedness is an objective measure about the number of contacts that people have. The opposite is social isolation, which is linked to, but different from loneliness. Both can lead to the other and both can have detrimental impacts on our health and wellbeing. [32]

- In Merton, many people who use social care services would like more social contact. Only 39.5% of users reported that they had as much social contact as they would like (2016/17).
- Social activities can help older people feel less lonely, but they have to be supported to access these services
- Neighbourhoods that feel safe, welcoming, attractive and have things to do for all residents can help prevent people from becoming lonely[33]
- 38% of people with dementia said that they had lost friends after their diagnosis.[34]
- More than 1 in 3 people aged 75 and over say that feelings of loneliness are out of their control.[35]

Active older people

Approximately 4 million older people in the UK live with a limiting long-term condition, many of which are lifestyle related could have been preventable.[Error! Bookmark not defined.]

- Physical inactivity puts older people's physical, mental and emotional health at risk
- Physical activity can improve strength, balance, stamina, and it also has positive impacts on mental health, feelings of self- worth and social connection.
- It is a misconception that physical inactivity is a natural process of ageing

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[29] https://www.campaigntoendloneliness.org/threat-to-health/

[30] Beaumont 2013

[31] https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/reports-and-briefings/active-communities/rb_dec17_jocox_commission_finalreport.pdf

[32] https://www.ageuk.org.uk/our-impact/policy-research/loneliness-research-and-resources/loneliness-isolation-understanding-the-difference-why-it-matters/

[33] https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/reports-and-briefings/loneliness/loneliness-report.pdf

[34] https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/reports-and-briefings/active-communities/rb_dec17_jocox_commission_finalreport.pdf

[35] https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/reports-and-briefings/active-communities/rb_dec17_jocox_commission_finalreport.pdf

- UK Active reports that 'a concerted effort to encourage older people to be active can reduce, or even reverse, a decline in health and save billions across the health and social care system'.[36]

All Life Course Stages

Less people breathing toxic air

Air pollution refers to harmful substances in the air we breathe due to high levels of particulate matter

- Poor air quality is the largest environmental risk to public health in the UK.[37]
- Long term exposure to poor air quality (over several years) can reduce life expectancy due to cardiovascular and respiratory causes and from lung cancer
- Short term exposure to poor air quality (hours or days) can exacerbate asthma, affect lung function and lead to an increase in respiratory and cardiovascular admissions and mortality
- An estimated 9,000 deaths a year in London are attributable to the damaging impact of air pollution[38]
- In Merton about 70 deaths per year are attributable to the damaging impact of air pollution [39]
- In Merton, almost 60% of young people think that cleanliness of the air in their areas is a problem, a big problem, or a very big problem[40]
- Costs to society are estimated at more than £20 billion every year[41]

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[36] UK Active, Moving More, Ageing Well, 2017

[37] PHE 2019 Evidence Review
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/784055/Review_of_interventions_to_improve_air_quality.pdf

[38] Understanding the health impacts of air pollution in London:
https://www.london.gov.uk/sites/default/files/hiainlondon_kingsreport_14072015_final.pdf

[39] Calculated using Public Health Outcomes framework and number of deaths for people over 30yrs in Merton

[40] Merton Children and Young People's Survey 2019

[41] Royal College of Physicians (RCP). Every breath we take: the lifelong impact of air pollution. Report of a working party 2016. Accessed 19/07/18. Available from:
www.rcplondon.ac.uk/file/2914/download?token=qjVXtDGo.

Less Violence

Tackling violence means looking at violence not as an isolated incident or solely a police enforcement problem, but as a preventable consequence of a range of factors, such as adverse early-life experiences, or harmful social or community experiences and influences[42].

- Overall crime in Merton has risen during 2017/18 by 2.2%, however results from the 2017 Merton resident's survey show that almost 96% of residents feel safe when outside in their local area during the day and 85% after dark[43]
- In 2018/19 there were 1,815 cases of domestic abuse offences recorded in Merton. This is a 19.4% increase from 2017/18 where 1,520 offences were recorded.[43]
- In 2018/19 there were 3,809 total violence against the person offences. This was a 7.96% increase on the figures for 2017/18. In relation to total sexual offences, during 2018/19 there were 354 offences. This was a 5.35% reduction on the figures for 2017/18.
- In 2018/19, 220 knife crime offences were recorded in Merton. This is a 17.7% increase from 2017/18. In 2018/19, the sanction detection count for knife crime was 30, this was one less than in 2017/18.[44]
- The Mayor of London has introduced an initiative to bring together public sector institutions, voluntary organisations and communities to act together to help cut violence. The Violence Reduction Unit (VRU) has been set up to tackle violent crime and the underlying causes, through information sharing on what works in spotting the early signs of what might lead to criminal behaviour and focusing attention and resources on what can make a difference. [42]

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[42] https://www.london.gov.uk/what-we-do/mayors-office-policing-and-crime-mopac/violence-reduction-unit-vru/public-health-approach-reducing-violence
[43] Resident Satisfaction Survey 2017. Available at
https://www.merton.gov.uk/assets/Documents/residents_survey_research_report_2017.pdf
[44] MPS FY 2018/19 Crime Statistics. Available at https://www.met.police.uk/sd/stats-and-data/met/year-end-crime-statistics/

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5.   Healthy Settings

People experience a healthy place in a setting where the three attributes (promotion of mental health and wellbeing, easier healthy choices; protection from harm) come together. This forms a healthy setting and healthy settings are vital in order to deliver our priorities.

Here is a brief description of each key setting for the Strategy. Each of the healthy settings has or can work towards a quality mark or level that is also set out below.

Box 1: Healthy Settings and quality mark

Healthy Setting	Quality mark
Healthy Early years settings Early years settings support young children to have a healthy start to life across themes that include healthy eating, oral and physical health and early cognitive development.	London Healthy Early Years London awards scheme https://www.london.gov.uk/what-we-do/health/healthy-early-years-london
Healthy schools Schools support the mental, emotional and physical wellbeing of young people and provide an environment that meets their needs.	London Healthy Schools awards scheme https://www.london.gov.uk/what-we-do/health/healthy-schools-london/awards/home
Healthy school neighbourhoods Schools are surrounded by a healthy urban zone that contributes to creating the conditions for good physical, mental and emotional wellbeing.	School Neighbourhood Approach https://publichealthmatters.blog.gov.uk/2019/03/05/creating-healthier-spaces-for-londons-children-to-live-learn-and-play/
Healthy Work places Businesses and workplaces that proactively respond to the physical and mental health needs of their staff and the wider community	London Healthy Workplace Award https://www.london.gov.uk/what-we-do/health/london-healthy-workplace-award
Healthy Libraries A community hub where people of all ages and backgrounds can be supported to become more enterprising, offering support, help, education, digital technology	Libraries Taskforce Outcomes Framework (2016) https://www.gov.uk/government/groups/libraries-taskforce

and awareness of the health solutions available to the community.	
Healthy Health and Care organisations Easy to access, efficient and high quality health and care services that provide holistic care	NHS Employers Health and Wellbeing Framework (2018) https://improvement.nhs.uk/resources/workforce-health-and-wellbeing-framework/
Healthy Homes Housing that makes the healthy choice easy and minimises risks to safety. Homes which are smoke free.	Smoke Free Homes Promise http://ash.org.uk/wp-content/uploads/2018/11/FINAL-2018-Smokefree-Housing-report-web.pdf
Healthy Streets Welcoming spaces, where people choose to walk and cycle, feel safe and relaxed, easy to cross, clean air, places to stop and rest, things to do and see, and shade and shelter.	Transport for London descriptor http://content.tfl.gov.uk/healthy-streets-for-london.pdf

6. Examples of Different Types of Board Actions

There are a number of different types of actions that the Board can take to maximise impact. These examples are demonstrated in the table below.

Box 2: Types of Actions

Types of Action	Examples
Engagement/Community Conversations	Understanding the patient on chronic diseases e.g. COPD
Bringing different sectors together to problem solve	Less tobacco dependency
Supporting whole systems exemplars	Social prescribing
Spotting opportunities for quick wins	Active travel
Raising awareness for emerging or hidden issues	Self-harm in children and young people
Further board development to be fit for changing health and care systems	Work with the Leadership Centre
Resurrecting previous priority actions to keep momentum	Diabetes

A definitive list of actions will be agreed as part of the rolling priorities (please see the main strategy for more details).

7. Other Materials

There are a number of other documents which contain further background material, most of which will be published on the website to accompany the main strategy.

Aspect of strategy to which document refers	Title	Location
Population need for heath	Joint Strategic Needs Assessment and Health of the borough	https://data.merton.gov.uk/jsna/
Context	Map of how the Health and wellbeing strategy fits in with other strategies and partnerships	Not currently available. To be published with final version
Start Well	Young people what matters to them mind map	
Live Well	DsPH Briefing – Mayors transport strategy	
Age Well and all other aspects	Health and Wellbeing strategy learning pack	

Further additional material may be added in response to feedback from the Board and others.

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Committee: Children and Young People's Scrutiny

Date: 26 June 2019

Wards: All

Subject: **Key Challenges and Issues for the Coming Year – Director of Children's Services**

Lead officer: Rachael Wardell

Lead member: Cllr Kelly Braund, Cllr Eleanor Stringer

Contact officer: Rachael Wardell

Recommendations:

A. To note the Key Challenges and Issues for the Coming Year for the Children, Schools and Families Directorate, from the perspective of the Director of Children's Services.

1	PURPOSE OF REPORT AND EXECUTIVE SUMMARY

1.1.   Because the Director is unable to be present for this first scrutiny meeting of the municipal year, the usual verbal account of the key challenges and issues is replaced by this short report.

2	DETAILS

2.1.   Key challenges and issues for the coming year (2019/20) for the Children, Schools and Families Directorate are:

2.1.1   *Hearing children and young people's voice.* We are serious about placing children at the heart of what we do. We will build on our existing children and young people's voice mechanisms to increase the participation of young people in our organisational structures. We are re-designing our Corporate Parenting Board to increase young people's involvement; we will be repeating our successful use of young people's scrutiny, we will be making better use of Symphony – our children in care council, the Youth Parliament and our young inspectors and young advisers. We will also be appointing a young scrutineer to our Safeguarding Partnership (see below).

2.1.2   *Keeping Merton's children safe.* In particular, this means ensuring that our Early Help services meet families' needs; that MASH and First Response teams respond promptly and appropriately to contacts and referrals; that assessments are carried out in a timely way and that planning for children in need of help or protection is child- and family-centred, SMART, and makes a positive difference in their lives. Where children can no longer safely remain at home, we must make suitable alternative arrangements for them, prioritising keeping them with their extended family where possible, and if not, placing them within families (foster care) and in borough as a priority, making use of out of borough and residential care only as a last resort, unless this is required as part of a plan to meet the child's specific needs. We must also respond to risks that children and young people face outside

the home, including the increasing threat of serious youth violence, using our opportunity as part of the 'Contextual Safeguarding' expansion to develop our practice in this area. Finally, some of the most vulnerable young people in Merton arrive from overseas as unaccompanied asylum-seeking children. Our objective will be to ensure that those young people are looked after as 'Merton children' with access to the same care and support to meet their needs as children who have grown up here.

2.1.3   *Closing the gap in outcomes for Merton's more vulnerable children.* Where children are 'in need' (CIN), have a child protection plan (CP), are in our care (LAC), have an education, health and care plan (EHCP) or are more likely to have poor outcomes for any other reason, we must strive to improve their life chances by addressing their educational, health, social and other wellbeing needs. This will include through the provision of support directly to children, young people or their families, and also through support to early years' settings, schools and other partners to help them to take appropriate steps to improve children's outcomes. Our objective will be for these children to do at least as well, across all domains of wellbeing, as their more advantaged peers.

2.1.4   *Developing our practice.* We have a well-established practice model for our social work which includes a systemic culture, 'Signs of Safety' approach and a set of key skills to uphold these ways of working. We will be seeking to embed this more deeply in the social work service and more broadly across all the domains of our work, including early help, so that children, young people and families receive a consistent, family centred response from all our services and practitioners.

2.1.5   *Managing within our budget.* We will seek to achieve our objectives while spending within, or close to, our allocated budget. This is challenging because the growth in funding to the directorate is less each year than the growth in demand, and many new pressures are unfunded. At the end of 2018/19, Children, Schools and Families was overspent both in the general fund and in the Dedicated Schools Grant (DSG). For the DSG this overspend was significant enough for Merton to be required to provide a 'recovery plan' to the Department for Education. During the course of this year, the department is required to deliver a savings programme of £572k. At the same time, the grant funding to our Transforming Families Programme will be coming to an end. We will be incorporating the work of our Transforming Families service into our early help re-design as part of our strategy to mitigate the impact of this grant cut.

2.1.6   *Adapting to significant staff changes in the directorate.* In March 2019 the Assistant Director for Children's Social Care left Merton to join another local authority. More recently two Heads of Service from Children's Social Care have also left for neighbouring boroughs, and another has a period of maternity leave. Although good appointments have been made to the permanent posts, and a very good acting up arrangement has been established to cover the maternity leave, this is a significant amount of change in a core service in a short period of time. In the Education Service, a new Head of Policy, Planning and Performance has joined us. This is another good appointment, but again leads to some disruption. In parallel, we have been pursuing the establishment of a Regional Adoption Agency

with a number of other south London boroughs. During the course of the year, the adoption service will therefore cease to be part of the directorate. This will lead to a restructure of teams around those service areas that remain. At the same time, a Business Administration redesign will also be implemented across the directorate.

2.1.7   *Establishing new systems.* The Children, Schools and Families Directorate continues to embed the MOSAIC system implemented in 2017, with ongoing work to improve performance reporting and also to implement the second phase of the work, which will support our 'Signs of Safety' approach. This year will also see the implementation of an Education Health and Care Plan 'hub' to enable speedier completion of the steps of the EHCP assessment process, and a SEN Case Management System, because this aspect of our work is not covered in the MOSAIC system. In the Youth Justice Team the eCINS system will be implemented.

2.1.8   *Responding to changes in legislation policy:* The Merton Safeguarding Board has come to an end, and in accordance with the Children and Social Work Act 2017 and the new Working Together 2018 guidance, we have now implemented a new Safeguarding Partnership, in collaboration with our two statutory partners in the new arrangements, the Metropolitan Police and Merton and Wandsworth CCG. To comply with the new arrangements, we will be appointing a new Independent Person to chair our partnership meetings, an Independent Scrutineer to carry out the scrutiny function required by the legislation, and a Young Scrutineer to work alongside the adult scrutineer with a core purpose of making sure young people's voices are heard throughout our safeguarding arrangements.

2.1.9   *Implementing our new Children and Young People's Plan.* Through a process of significant consultation with children and young people and other partners, we have developed a new Children and Young People's Plan, which we hope will be adopted by the Council in September of this year. The ambitious plan covers six domains of children and young people's wellbeing, and will require the Children, Schools and Families directorate not only to make sure the services we deliver to the children and families of Merton are high quality, but also to act as system leaders and champions for children so that our partners and the wider Merton community rise to the challenge of making Merton a great place for children to grow up.

2.1.10 *Being 'inspection ready'.* Children's Services are the most heavily inspected area of local government service delivery. In 2019/20 we will be responding to the outcome of our SEND Inspection (which took place between 10 and 14 June 2019), and will also be preparing for an anticipated inspection of our Youth Justice Team, a possible Joint Targeted Area Inspection (JTAI) centred on children living with mental health issues (any time from September 2019 onwards) and the full Inspection of Local Authority Children's Services (ILACS) which falls due three years after our last inspection under the SIF framework in 2017.

3   ALTERNATIVE OPTIONS

3.1.   None.

4   CONSULTATION UNDERTAKEN OR PROPOSED

4.1. None.

5   TIMETABLE

5.1. N/a

6   FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS

6.1. None for the purposes of this report.

7   LEGAL AND STATUTORY IMPLICATIONS

7.1. None for the purposes of this report.

**8   HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION
            IMPLICATIONS**

8.1. None for the purposes of this report.

9   CRIME AND DISORDER IMPLICATIONS

9.1. None for the purposes of this report.

10   RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS

10.1. None for the purposes of this report.

**11   APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE
            PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT**

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12   BACKGROUND PAPERS

12.1. None.

Committee:	Children and Young People Overview and Scrutiny Panel
Date:	26 June 2019
Wards:	All
Subject:	Children and Young People Overview and Scrutiny Panel Work Programme 2019/20
Lead officer:	Rosie Mckeever Scrutiny Officer
Lead member:	Cllr Sally Kenny, Chair of the Children and Young People Overview and Scrutiny Panel
Contact officer:	Rosie Mckeever: Rosie.Mckeever@merton.gov.uk, 020 8545 4035

Recommendations:

That members of Children and Young People Overview and Scrutiny Panel:

i.   Consider their work programme for the 2019/20 municipal year, and agree issues and items for inclusion (see draft in Appendix 1);

ii. Consider the methods by which the Panel would like to scrutinise the issues/items agreed;

iii. Identify a Member to lead on performance monitoring on behalf of the Panel;

iv. Identify a Member to lead on budget scrutiny on behalf of the Panel;

v.   Agree on an issue for scrutiny by a task group and appoint members to the Task Group (Appendix 5);

vi. Consider the appointment of co-opted members for the 2019/20 municipal year, to sit on the Panel and/or on the Task Group;

vii. Consider whether they wish to make visits to local sites and engage with topic experts; and

viii. Identify any training and support needs.

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1.   **PURPOSE OF REPORT AND EXECUTIVE SUMMARY**

1.1   The purpose of this report is to support and advise Members to determine their work programme for the 2019/20 municipal year.

1.2   This report sets out the following information to assist Members in this process:

a) The principles of effective scrutiny and the criteria against which work programme items should be considered;

b) The roles and responsibilities of the Children and Young People Overview and Scrutiny Panel;

c) The findings of the consultation programme undertaken with councillors and co-opted members, Council senior management, voluntary and community sector organisations, partner organisations and Merton residents;

d) A summary of the discussion by councillors at a topic selection workshop held on 20 May 2019 and

e) Support available to the Children and Young People Overview and Scrutiny Panel to determine, develop and deliver its 2019/20 work programme.

2. **Determining the Children and Young People Overview and Scrutiny Panel Annual Work Programme**

2.1 Members are required to determine their work programme for the 2019/20 municipal year to give focus and structure to scrutiny activity to ensure that it effectively and efficiently supports and challenges the decision-making processes of the Council, and partner organisations, for the benefit of the people of Merton.

2.2 The Children and Young People Overview and Scrutiny Panel has a specific role relating to children and young people. This includes education, children's social care, child protection, youth services and performance monitoring that should automatically be built into their work programme.

2.3 The Children and Young People Overview and Scrutiny Panel may choose to scrutinise a range of issues through a combination of pre-decision scrutiny items, policy development, performance monitoring, information updates and follow up to previous scrutiny work. Any call-in work will be programmed into the corporate calendar as required.

2.4 The Children and Young People Overview and Scrutiny Panel has six scheduled meetings over the course of 2019/20, including the scheduled budget meeting (representing a maximum of 18 hours of scrutiny per year – assuming 3 hours per meeting). Members will therefore need to be selective in their choice of items for the work programme.

Principles guiding the development of the scrutiny work programme

2.5 The following key principles of effective scrutiny should be considered when the Panel determines its work programme:

- **Be selective** – There is a need to prioritise so that high priority issues are scrutinised given the limited number of scheduled meetings and time available. Members should consider what can realistically and properly be reviewed at each meeting, taking into account the time needed to scrutinise each item and what the session is intended to achieve.

- **Add value with scrutiny** – Items should have the potential to 'add value' to the work of the council and its partners. If it is not clear what the intended outcomes or impact of a review will be then Members should consider if there are issues of a higher priority that could be scrutinised instead.

- **Be ambitious** – The Panel should not shy away from carrying out scrutiny of issues that are of local concern, whether or not they are the primary responsibility of the council. The Local Government Act 2000 gave local authorities the power to do anything to promote economic, social and environmental well being of local communities. Subsequent Acts have conferred specific powers to scrutinise health services, crime and disorder issues and to hold partner organisations to account.

- **Be flexible** – Members are reminded that there needs to be a degree of flexibility in their work programme to respond to unforeseen issues/items for consideration/comment during the year and accommodate any developmental or additional work that falls within the remit of this Panel. For example, Members may wish to question officers regarding the declining performance of a service or may choose to respond to a Councillor Call for Action request.

- **Think about the timing** – Members should ensure that the scrutiny activity is timely and that, where appropriate, their findings and recommendations inform wider corporate developments or policy development cycles at a time when they can have most impact. Members should seek to avoid duplication of work carried out elsewhere.

Models for carrying out scrutiny work

2.6   There are a number of ways the Children and Young People Overview and Scrutiny Panel can deliver its work programme. Members should consider which of the following options is most appropriate to undertake each of the items they have selected for inclusion in the work programme:

2.7

Item on a scheduled meeting agenda/ hold an extra meeting of the Panel	▪ The Panel can agree to add an item to the agenda for a meeting and call Cabinet Members/ Officers/Partners to the meeting to respond to questioning on the matter ▪ A variation of this model could be a one-day seminar-scrutiny of issues that, although important, do not merit setting up a 'task-and-finish' group.
Task Group	▪ A small group of Members meet outside of the scheduled meetings to gather information on the subject area, visit other local authorities/sites, and speak to service users, expert witnesses and/or Officers/Partners. The Task Group can then report back to the Commission with their findings to endorse the submission of their recommendations to Cabinet/Council ▪ This is the method usually used to carry out policy reviews
The Panel asks for a report then takes a view on action	▪ The Panel may need more information before taking a view on whether to carry out a full review so asks for a report – either from the service department or from the Scrutiny Team – to give it more details.
Meeting with service Officer/Partners	▪ A Member (or small group of Members) has a meeting with service officers/Partners to discuss concerns or raise queries. ▪ If the Member is not satisfied with the outcome or believes that the Panel needs to have a more in-depth review of the matter they take it back to the Panel for discussion
Individual Members doing some initial research	▪ A member with a specific concern carries out some research to gain more information on the matter and then brings his/her findings to the attention of the Panel if s/he still has concerns.

	- A new model of scrutiny review has recently been developed and trialled; a rapporteur review where an individual member undertakes a review with the endorsement of the Panel.

2.8   Note that, in order to keep agendas to a manageable size, and to focus on items to which the Panel can make a direct contribution, the Panel may choose to take some "information only" items outside of Panel meetings, for example by email.

Support available for scrutiny activity

2.9   The Overview and Scrutiny function has dedicated scrutiny support from the Scrutiny Team to:

- Work with the Chair and Vice-Chair of the Panel to manage the work programme and coordinate the agenda, including advising officers and partner organisations on information required and guidance for witnesses submitting evidence to a scrutiny review;

- Provide support for scrutiny members through briefing papers, background material, training and development seminars, etc;

- Facilitate and manage the work of the task and finish groups, including research, arranging site visits, inviting and briefing witnesses and drafting review reports on behalf on the Chair; and

- Promote the scrutiny function across the organisation and externally.

2.10   The Children and Young People Overview and Scrutiny Panel will need to assess how it can best utilise the available support from the Scrutiny Team to deliver its work programme for 2019/20.

2.11   The Panel is also invited to comment on any briefing, training and support that is needed to enable Members to undertake their work programme. Members may also wish to undertake visits to local services in order to familiarise themselves with these. Such visits should be made with the knowledge of the Chair and will be organised by the Scrutiny Team. Additionally, Members may wish to seek the input of acknowledged subject experts.

2.12   The Scrutiny Team will take on board the views of the Children and Young People Overview and Scrutiny Panel when developing the support that is provided.

3.   Selecting items for the Scrutiny Work Programme

The Children and Young People Overview and Scrutiny Panel sets its own agenda within the scope of its terms of reference. It has the following remit:

- Education, children's social care, child protection, youth services and performance monitoring.

3.1   The Scrutiny Team has undertaken a campaign to gather suggestions for issues to scrutinise either as agenda items or task group reviews. Suggestions have been received from members of the public, councillors and partner organisations including the Merton Voluntary Service Council. The Scrutiny Team has consulted departmental management teams in order to identify forthcoming issues on which the Panel could contribute to the policymaking process.

3.2   A description of all the suggestions received is set out in Appendix 2.

3.3   The councillors who attended a "topic selection" workshop on 20 May 2019 discussed these suggestions. Suggestions were prioritised at the workshop using the criteria listed in Appendix 3. In particular, participants sought to identify issues that related to the Council's strategic priorities or where there was underperformance; issues of public interest or concern and issues where scrutiny could make a difference.

3.4   A note of the workshop discussion relating to the remit of the Panel is set out in Appendix 4.

3.5   Appendix 1 contains a draft work programme that has been drawn up, taking the workshop discussion into account, for the consideration of the Panel. The Panel is requested to discuss this draft and agree any changes that it wishes to make.

4.   Task group reviews

4.1   The Panel is invited to select an issue for in-depth scrutiny and establish a task group. Topics identified for potential task group review at the workshop on 20 May 2019 are set out for further review and discussion in Appendix 5.

5.   Co-option to the Panel membership

5.1   Scrutiny Panels can consider whether to appoint non-statutory (non-voting) co-optees to the membership, in order to add to the specific knowledge, expertise and understanding of key issues to aid the scrutiny function. Panels members may also wish to consider whether it may be helpful to co-opt people from "seldom heard" groups.

6.   Public involvement

6.1   Scrutiny provides extensive opportunities for community involvement and democratic accountability. Engagement with service users and with the public can help to improve the quality, legitimacy and long-term viability of recommendations made by the Panel.

6.2   Service users and the public bring different perspectives, experiences and solutions to scrutiny, particularly if "seldom heard" groups such as young people, disabled people, people from black and minority ethnic communities and people from lesbian gay bisexual and transgender communities are included.

6.3   This engagement will help the Panel to understand the service user's perspective on individual services and on co-ordination between services. Views can be heard directly through written or oral evidence or heard indirectly through making use of existing sources of information, for example from surveys. From time to time, the Panel/Task Group may wish to carry out engagement activities of its own, by holding discussion groups or sending questionnaires on particular issues of interest.

6.4   Much can be learnt from best practice already developed in Merton and elsewhere. The Scrutiny Team will be able to help the Panel to identify the range of stakeholders from which it may wish to seek views and the best way to engage with particular groups within the community.

7.   ALTERNATIVE OPTIONS

7.1   A number of issues highlighted in this report recommend that Panel members take into account certain considerations when setting their work programme for 2019/20. The Children and Young People Overview and Scrutiny Panel is free to determine its work programme as it sees fit. Members may therefore choose to identify a work programme that does not take into account these considerations. This is not advised as ignoring the issues raised would either conflict with good practice and/or principles endorsed in the Review of Scrutiny, or could mean that adequate support would not be available to carry out the work identified for the work programme.

7.2   A range of suggestions from the public, partner organisations, officers and Members for inclusion in the scrutiny work programme are set out in the appendices, together with a suggested approach to determining which to include in the work programme. Members may choose to respond differently. However, in doing so, Members should be clear about expected outcomes, how realistic expectations are and the impact of their decision on their wider work programme and support time. Members are also free to incorporate into their work programme any other issues they think should be subject to scrutiny over the course of the year, with the same considerations in mind.

8.   CONSULTATION UNDERTAKEN OR PROPOSED

8.1   To assist Members to identify priorities for inclusion in the Panel's work programme, the Scrutiny Team has undertaken a campaign to gather suggestions for possible scrutiny reviews from a number of sources:

a. Members of the public have been approached using the following tools: articles in the local press, request for suggestions from all councillors and co-opted members, email correspondence to partner organisations and to a range of local voluntary and community organisations, including those involved in the Inter-Faith Forum and members of the Lesbian Gay and Transgender Forum, publicity in libraries and on social media;

b. Councillors have put forward suggestions by raising issues in scrutiny meetings, via the Overview and Scrutiny Member Survey 2019, and by contacting the Scrutiny Team direct; and

c. Officers have been consulted via discussion at departmental management team meetings.

9.   FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS

9.1   There are none specific to this report. Scrutiny work involves consideration of the financial, resource and property issues relating to the topic being scrutinised. Furthermore, scrutiny work will also need to assess the implications of any recommendations made to Cabinet, including specific financial, resource and property implications.

10.   LEGAL AND STATUTORY IMPLICATIONS

10.1   Overview and scrutiny bodies operate within the provisions set out in the Local Government Act 2000, the Health and Social Care Act 2001 and the Local Government and Public Involvement in Health Act 2007.

10.2 Scrutiny work involves consideration of the legal and statutory issues relating to the topic being scrutinised. Furthermore, scrutiny work will also need to assess the implications of any recommendations made to Cabinet, including specific legal and statutory implications.

11. HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS

11.1 It is a fundamental aim of the scrutiny process to ensure that there is full and equal access to the democratic process through public involvement and engagement. The reviews will involve work to consult local residents, community and voluntary sector groups, businesses, hard to reach groups, partner organisations etc and the views gathered will be fed into the review.

11.2 Scrutiny work involves consideration of the human rights, equalities and community cohesion issues relating to the topic being scrutinised. Furthermore, scrutiny work will also need to assess the implications of any recommendations made to Cabinet, including specific human rights, equalities and community cohesion implications.

12. CRIME AND DISORDER IMPLICATIONS

12.1 In line with the requirements of the Crime and Disorder Act 1998 and the Police and Justice Act 2006, all Council departments must have regard to the impact of services on crime, including anti-social behaviour and drugs. Scrutiny review reports will therefore highlight any implications arising from the reviews relating to crime and disorder as necessary.

13. RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS

13.1 There are none specific to this report. Scrutiny work involves consideration of the risk management and health and safety issues relating to the topic being scrutinised. Furthermore, scrutiny work will also need to assess the implications of any recommendations made to Cabinet, including specific risk management and health and safety implications.

14. APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT

14.1 Appendix 1 – Children and Young People Overview and Scrutiny Panel draft work programme 2019/20

14.2 Appendix 2 – Summary of topics relating to the Children and Young People Overview and Scrutiny Panel's remit suggested for inclusion in the scrutiny work programme

14.3 Appendix 3 – Selecting a Scrutiny Topic criteria

14.4 Appendix 4 – Notes of the Children and Young People Scrutiny Topic Selection Workshop on 20 May 2019

14.5 Appendix 5 – Task group options as identified at the workshop on 20 May 2019.

15. BACKGROUND PAPERS

15.1 None

DRAFT CYP Work programme 2019/20

26 June 2019 (agenda deadline: 12pm 17 June 2019)

Item/Issue
• Health and Wellbeing Strategy 2019-24
• Cabinet Member and Director: Key Challenges and issues for the coming year
• Departmental update
• Performance monitoring
• Setting the work programme for 2019-20 (plus agree task group)

7 October 2019 (agenda deadline: 12pm 27 September 2019)

Item/Issue
• School maintenance costs
• Troubled families
• Task group (TBC): approval of terms of reference
• Report of the Children's Mental Health Task Group
• Cabinet Member priorities
• Departmental update
• Performance monitoring
• Work programme

6 November 2019 (agenda deadline: 12pm 28 October 2019)

Item/Issue
• Pre-decision scrutiny: Budget/business planning (round 1)
• Support for failing schools
• Cabinet Member priorities
• Departmental update
• Performance monitoring
• Work programme

15 January 2020 (agenda deadline: 12pm 6 January 2020)

Item/Issue
• Pre-decision scrutiny: Budget/business planning (round 2)
• Corporate parenting report
• Cabinet Member priorities
• Departmental update
• Performance monitoring
• Work programme

12 February 2020 (agenda deadline: 12pm 3 February 2020)

Item/Issue
• Harris Wimbledon
• Merton Safeguarding Children Board - Annual report
• Cabinet Member priorities
• Departmental update
• Performance monitoring
• Work programme

11 March 2020 (agenda deadline: 12pm 2 March 2020)

Item/Issue
• Schools standards - Annual report
• Cabinet Member priorities
• Departmental update
• Performance monitoring
• Work programme

Topic suggestions received in relation to the remit of the Children and Young People Overview and Scrutiny Panel 2019/20

The following topics have been suggested by residents, members and officers:

Recommended Must Do's (Due to DMT recs, standing items, Member and resident interest)

- Air Quality around schools
- Budget/Business planning
- Cabinet Member priorities
- Corporate parenting report
- Department update report
- Education Health and Care Plans (EHCP)
- Harris Wimbledon
- Merton Safeguarding Children Board annual report
- Performance monitoring
- School Standards annual report

Other suggestions (Recommended to accept a max of 4)

- Health and wellbeing strategies for children and young people
- How are the Council helping schools that are not rated good or outstanding
- Personal technology in the classroom
- School Standards Panel
- Troubled families
- Transition to adulthood
- Universal Credit

AIR QUALITY AROUND SCHOOLS	
Who suggested it?	Members through the topic suggestion process
Summary	At the November meeting a panel member expressed concern about high levels air pollution surrounding the Harris Wimbledon School site. Therefore the Panel agreed to include a report on air quality around schools to the work programme. Points to consider; • The lack of publically available monitoring statistics on the boroughs air quality • Air filtration systems which will include carbon filters. • Considering ways to reduce idling traffic. • When results of the Mayor's air quality monitoring backpacks trial are published, they may provide insight into other ideas to explore. Representatives from Public Health and Environmental Health have a number of joint projects that are underway and planned for schools they would like to report on at the June meeting. This is a broad issue which crosses over with multiple other topics, E.g. the road safety task group – anti idling (OSC Panel), diesel levy implementation, and results of the public consultation on parking charges report (SC Panel), Harris Wimbledon (CYP).
Scrutiny type	Executive oversight
Timing	26 June 2019
Experts	• Miar Crutchley, Principal AQ Officer, Dagmar Zeuner, Public Health. • Local Air Quality Management Helpdesk (set up on behalf of DEFRA) could attend with information and guidance on improving air quality and answer Members questions on air quality monitoring. • Breathe London project, the most comprehensive city-wide network of air quality monitors of its kind in the world, devised by City Hall.
Guests	As reflected on social media, there has been a high resident interest in air quality of the borough. It is likely that should this item proceed, there will be a number of residents interested in making representations.

BUDGET/BUSINESS PLANNING

Who suggested it?	This is a standing, annually returning item.
Summary	Members are asked to consider and comment on all aspects of the budget that relate to the Children, Schools and Families Department. This can include: • Amendments to previously agreed savings; • New departmental saving proposals; • Budget growth proposals; • The resulting impact on the Medium Term Financial Strategy; and • Relevant service plans.
Scrutiny type	Pre-decision scrutiny
Timing	This takes place in two rounds; 6 November 2019 and 15 January 2020

CABINET MEMBER PRIORITIES

Who suggested it?	This is a standing item, taken at every meeting.
Summary	The Cabinet Members for Education and Children's Services are asked to present their current priorities to Panel members who are then given the opportunity to ask questions.
Scrutiny type	Executive oversight
Timing	Every meeting (**agreed**)

CORPORATE PARENTING REPORT

Who suggested it?	This is a standing, annually returning item (part of Ofsted's requirements).
Summary	To review the provision of services for looked after children and care leavers against a number of benchmarks (including statutory requirements and outcomes for all Merton pupils and similar cohorts nationally). To identify and recognise areas of good service as well as where there needs to be additional and on-going focus on service development.
Scrutiny type	Executive oversight/performance monitoring
Timing	15 January 2020 (suggested to occur a full year after the last report was received
Guest(s)	A representative from the Looked After Children's Health team at Epsom and St Helier, to provide the opportunity to scrutinise LAC health services provided by partners. This has been attempted two years in a row without success. This would also address the Ofsted recommendation on

	health histories.
Expert	Kathy Bundred, Children's Improvement Adviser for the Local Government Association could be invited to return to the Panel.
Visit	The Children in Care Council could be consulted in advance. Delegated members may attend a meeting of the Council to gather views. Alternatively, representatives of the Children in Care Council may be invited to attend the Panel and provide first hand insight/make a direct representation.

DEPARTMENT UPDATE REPORT	
Who suggested it?	This is a standing item, taken at every meeting.
Summary	This gives the Department the opportunity to update members on key developments that have occurred since the last meeting. This might include forthcoming changes in Government policy and legislation, service successes and/or changes, Ofsted inspection outcomes etc. The report is not presented by officers but members are encouraged to read it in advance of the meeting and ask questions on the information provided.
Scrutiny type	Performance monitoring
Timing	Every meeting (**agreed**)

EDUCATION HEALTH AND CARE PLANS (EHCP)	
Who suggested it?	This is a continuation of the Panel's focus on Education Health and Care Plans during the past municipal year.
Summary	The Panel has taken a lead over the last year on scrutinising the progress being made with the transfer to Education, Health and Care Plans (EHCPs);

Following the introduction of EHCPs, all existing statements of educational need (1,023) had to be transferred. This was a big process that had to be done in parallel to meeting requests for new EHCPs.

The Government introduced a deadline of 20 weeks between the initial request for an EHCP being accepted and production of the resulting plan.

There has been a significant improvement in performance with 52% of EHCP's completed within the 20 week target. Of the remaining 48%, 70% are completed within 26 weeks.

This is in comparison to the previous year results of 37% of new EHCP's being achieved within the target timescale.

It is recommended that this is further reviewed through the performance monitoring report with the scope for members |

	to request a more detailed update should they consider it necessary.
Scrutiny type	Performance monitoring
Timing	Every meeting (through the performance monitoring report)
Expert	Performance Monitoring Lead

HARRIS WIMBLEDON	
Who suggested it?	Continuation of the Panel's role in scrutinising the on-going development of the new secondary school.
Summary	An update report was received by the Panel during the last municipal year. It is recommended that members take an update report during the coming municipal year with other updates being provided through the departmental report and/or Cabinet Member updates.
Scrutiny type	Executive oversight/performance monitoring
Timing	12 February 2020 (suggested to occur a full year after the last report was received)
Guest(s)	Representative(s) of the Harris Federation to update members directly on the operation of the school and plans for its future.
Visit	Visit Harris Merton, to see the expansion project and to hear from the provider of the new school first hand

HEALTH AND WELLBEING STRATEGIES FOR CHILDREN AND YOUNG PEOPLE	
Who suggested it?	With local authorities now having responsibility for public health in localities, the Panel has embraced its responsibility for scrutiny of health and wellbeing strategies for children and young people.
Summary	The remit of the Panel embraces all services for children and young people including health and wellbeing outcomes.
	During the last municipal year, the Panel took a report from the public health team looking at childhood obesity and Child and Adolescent Mental Health Services (CAMHS) with the latter supported by colleagues from the Merton Clinical Commissioning Group.
	In addition to this, the Panel may wish to receive an opportunity to comment on Merton's Health and Wellbeing Strategy 2019-24 particularly in relation to the 'Start Well' children and young people's theme. Officers were in the process of updating this strategy in February and working closely with partners, stakeholders and the wider community

	and voluntary sectors.
Scrutiny type	Update report
Timing	26 June (before the strategy proceeds to Cabinet in July)
Expert	Public Health Officers

HOW THE COUNCIL ARE HELPING SCHOOLS THAT ARE NOT RATED GOOD OR OUTSTANDING	
Who suggested it?	Members through the topic suggestion process
Summary	5 schools currently rated as 'requires improvement' in Merton. The Council offers a Merton School Improvement (MSI) service. The team are dedicated to improving outcomes for children and young people in Merton schools where standards are declining or where significant groups of pupils are underperforming. Case study: Hall School, Wimbledon (Inadequate - June 2017 to Good – February 2019)
Scrutiny type	Executive oversight
Timing	Seek member suggestions
Expert	Elizabeth Fitzpatrick, Head of School Improvement Service (MSI)

MERTON SAFEGUARDING CHILDREN BOARD ANNUAL REPORT	
Who suggested it?	This is a standing, annually returning item (part of Ofsted's requirements).
Summary	The MSCB annual report provides members of the panel with an overview of performance of the Merton Safeguarding Children Board for the past year. The report presents an annual update on what is going well, the key challenges and the actions that the Council will take to address these challenges. This item gives members the opportunity to question the independent chair of the Merton Safeguarding Children Board, a suitable police representative, and the Directors and Cabinet Member about safeguarding provision for Merton's children and young people.
Scrutiny type	Executive oversight/performance monitoring

Timing	12 February 2020 (suggested to occur a full year after the last report was received)
Guest(s)	• Keith Makin, the Independent Chair of the Merton Safeguarding Children Board; and • A suitable police representative.
Expert	A representative from the Association of Independent LSCB Chairs is suggested.

PERFORMANCE MONITORING	
Who suggested it?	This is a standing item, taken at every meeting.
Summary	The performance report features a range of key performance indicators. This therefore acts as a health check for the Panel and as such is over and above the more detailed thematic reports scheduled to the Panel.
Scrutiny type	Performance monitoring
Timing	Taken every meeting (**agreed**).
Expert	Every year the Panel can decide to appoint a lead member for monitoring performance data who will work closely with officers to build their understanding of the data and drive the effectiveness of performance monitoring. It is within the Panel's gift to determine whether or not to appoint a performance lead for this year and then for them to determine how they may wish to work in order to support the Panel in this aspect of its work.

PERSONAL TECHNOLOGY IN THE CLASSROOM	
Who suggested it?	A Member through the topic suggestion process
Summary	The Panel could explore the benefits of the rise in technology in the classroom, how it's being used in other Local Authorities and whether Merton can grow in this area. Studies show that with countless online resources available, technology can help improve teaching. Teachers can use different apps or trusted online resources to enhance the traditional ways of teaching and to keep students more engaged. Consider; • Will the rise in technology lead to a loss of core skills i.e. handwriting and spelling • What subjects show the most benefit from the use of technology

	• Provides opportunity for children who do not have access to computers at home • Cost implications - how will it be funded? • Is it a distraction? • Virtual reality • Impact of technology glitches/fails/Wi-Fi problems • Online safety / safeguards • Could it provide different tools for teaching SEND students This is an area of interest for the Member who suggested it and they are keen to share research about this topic should it be added to the work programme.
Scrutiny type	Potential task group
Timing	Seek member suggestions

SCHOOL STANDARDS ANNUAL REPORT	
Who suggested it?	This is a standing, annually returning item (part of Ofsted's requirements).
Summary	Members receive the detailed annual schools report giving them the opportunity to focus on attainment for all key stages as well as at foundation stage and for post 16. As a result of the presentation of the school's annual report during the last municipal year, members noted the need to retain their focus on the attainment and progress of children on SEN support as well elective home education.
Scrutiny type	Executive oversight/performance monitoring
Timing	11 March 2020 (suggested to occur a full year after the last report was received)
Guest(s)	Representatives of Merton head's group (i.e.: one primary, secondary and special) to provide members with first hand insight into the information contained in the annual report.

SCHOOL STANDARDS PANEL	
Who suggested it?	The CYP Departmental Management Team
Summary	How effective is the link between the School Standards Panel and Scrutiny. Could we review the effectiveness and structure of the Panel? Would a Cabinet Member on the Panel add value?
Scrutiny type	Scrutiny review
Timing	7 Oct 2019

TROUBLED FAMILIES

Who suggested it?	The CYP Departmental Management Team
Summary	The Panel noted that although there was no formal performance monitoring target for Troubled Families, the number was increasing and the funding for this programme was due to end in 2020.

The Head of Social Care and Inclusion said the department was waiting to see if this program would continue to be supported by The Government.

Would the Panel want to be kept informed on this subject and updated on the funding arrangements? |
| **Scrutiny type** | Update report |
| **Timing** | Seek Member suggestions |

TRANSITION TO ADULTHOOD

Who suggested it?	Departmental Management Team
Summary	During the March meeting, the Panel noted the proposal of the Director of Children, Schools and Families, for a Task Group based on a study of individual young people with EHCPs as they transition from Children's to Adult Services.

She explained that some would have needs that would be eligible for Adult services, and some not. She proposed that such a study would last for longer than one year and would give the panel an opportunity to explore how the system worked.

The Panel may wish to work in partnership with members of the Healthier Communities and Older People Overview and Scrutiny Panel, officers from housing, adult services, mental health services, SEND etc. Working across Departments and bringing together a range of officers to look collectively at a specific issue, is a real benefit that can be provided by the scrutiny process. |
| **Scrutiny type** | Scrutiny review/task group |
| **Visit** | It would be good for Panel members to engage with Merton's young people to help inform them on this issue. This might be done through the youth clubs operating in the borough. |

UNIVERSAL CREDIT	
Who suggested it?	Departmental Management Team and Officers through the topic suggestion process
Summary	The CYP Departmental Management Team suggested the Panel scrutinise the Department for Work and Pensions over the roll out of Universal Credit, why Merton were not briefed and what is the impact of this change on families. A suggestion was also received from a Housing Needs Officer through the topic suggestion process that the Panel explore the link between Universal Credit and how it has implications for families, child poverty and tenancies. Universal Credit aims to simplify the benefits system by replacing six existing benefits into a single monthly payment. Housing Benefit is now part of Universal Credit and helps pay for rent for residents on a low income or benefits. With the roll-out of Universal Credit, tenants no longer receive Housing Benefit and instead receive a rent element in their monthly Universal Credit payment which is paid directly into their bank rather than having their rent paid for them. Report by the Smith Institute found that a quarter of all new UC claims in 2017 were paid late, with one in five of these claimants waiting 5 months or more which has had a huge impact on rent arrears due to late payments. Nationwide there is a strong reluctance of private landlords to house tenants in receipt of Universal Credit due to a lack of assurance that they will receive payments on time, or at all, in the case of tenants with complex needs. The Panel can choose to look at this in great depth; to explore what impact the roll out of Universal Credit has had on children and young people in Merton and whether it has contributed to levels of child poverty: • How many residents in the borough have been affected by the roll out • Contact Merton Citizens Advice Bureau for details on

	how many UC applications they have assisted with / provided information and advice for. • Survey/invite Merton residents in receipt of UC to ask first-hand how the change is affecting them – including the need for emergency food aid and dealing with rent arrears and debt. • What help and support is available for those claiming benefits. • What more can we do to support families
Scrutiny type	Scrutiny review/Task Group
Timing	Seek suggestions from Members
Expert	David Keppler, Head of Revenues and Benefits. Richard Jackman, DWP. Housing Needs. Merton CAB.

Selecting a Scrutiny Topic – criteria used at the workshop on 20 May 2019.

The purpose of the workshop is to identify priority issues for consideration as agenda items or in-depth reviews by the Panel. The final decision on this will then be made by the Panel at its first meeting on 27June 2019.

All the issues that have been suggested to date by councillors, officers, partner organisations and residents are outlined in the supporting papers.

Further suggestions may emerge from discussion at the workshop.

Points to consider when selecting a topic:

o   Is the issue strategic, significant and specific?

o   Is it an area of underperformance?

o   Will the scrutiny activity add value to the Council's and/or its partners' overall performance?

o   Is it likely to lead to effective, tangible outcomes?

o   Is it an issue of community concern and will it engage the public?

o   Does this issue have a potential impact for one or more section(s) of the population?

o   Will this work duplicate other work already underway, planned or done recently?

o   Is it an issue of concern to partners and stakeholders?

o   Are there adequate resources available to do the activity well?

Notes of the Children and Young People Overview and Scrutiny Panel topic selection meeting on 20 May 2019

Attendees:

Councillors Sally Kenny (Chair), Hina Bokhari, Omar Bush, Pauline Cowper, Ed Foley, Joan Henry, James Holmes, Russell Makin, Hayley Ormrod,
Emma Lemon (Co-opted member)
Cabinet Members – Kelly Braund and Eleanor Stringer
Rachael Wardell (Director for Children, Schools and Families)
Karl Mittelstadt (Head of Policy, Performance and Partnerships)
Mike Robinson (Consultant in Public Health)
Julia Regan (Head of Democracy Services)

Summary of agreed actions

Agreed to have three standing agenda items – departmental update report, cabinet member priorities and performance monitoring.

Also agreed:

Agenda items	Departmental update	Potential task group
Budget and business plan	Education, Health & Care Plans	Educational technology in the classroom
Corporate parenting	Harris Wimbledon	Child poverty
Harris Wimbledon	PFI contracts	Home-schooled children
Health & Wellbeing Strategy	Knife crime	
Support for failing schools	SEN funding	
Safeguarding	Early years provision	
Standards annual report		
Troubled families		
School maintenance costs		

Air quality around schools

AGREED to refer this issue to the Sustainable Communities Overview and Scrutiny Panel and to ask the Panel to take into account the particular impact that poor air quality has on children's health and wellbeing. Requested that the Sustainable Communities Panel invite members of the Children and Young People Panel to attend for agenda item discussion or to join any task group scrutinising this issue.

AGREED to ask the road safety around schools task group to include recommendations on anti-idling and enforcement of anti-idling in its report.

Budget and business planning

AGREED to continue with this standing item at the November and January meetings.

Members expressed an interest in finding out more about how school budgets are financed and how value for money is ensured. The Director explained that school budgets are overseen by the Schools Forum (a representative group of headteachers) and that the council has no say over the funding decisions that schools make, though it does offer advice and support. The Director undertook to talk to finance colleagues to identify whether there is scope for scrutiny to add value.

Cabinet Member priorities

AGREED to invite the Cabinet Member for Schools and Adult Education and the Cabinet Member for Education and Children's Services to present their current priorities and answer questions at each Panel meeting.

Corporate parenting report

AGREED to continue to receive this agenda item on an annual basis at the Panel's January meeting. Also AGREED to invite an expert witness (Kathy Bundred, Children's Improvement Adviser, Local Government Association) and to consult the Children in Care Council to gather views in advance of the meeting.

Department update report

AGREED to continue to take this as a standing item at each meeting.

Education Health and Care Plans (EHCP)

AGREED to continue to monitor through the performance monitoring report.

The Director said that she would advise on when she would be able to provide a more detailed update following the implementation of a new web-based tool that should help to speed up processes. This could be included within the departmental update.

Harris Wimbledon

AGREED to include as a standing item in the departmental update.

Also AGREED to receive a fuller report in February 2020 and to invite the Principal or Executive Principal of Harris to attend to discuss progress and proposed operation of the new school.

Health and wellbeing strategies for children and young people

AGREED to receive Merton's Health and Wellbeing Strategy 2019-24 on 26 June 2019 so that the Panel's views could be taken into account when it is presented by the Health and Wellbeing Board to Cabinet on 15 July.

Members expressed a wish to be sighted on agenda items for future meetings of the Health and Wellbeing Board. ACTION: Scrutiny Officer to include in the work programme item that is received at each meeting of the Panel.

Support for failing schools that are not rated good or outstanding

AGREED to receive a report to provide information on the work of the school improvement service, the support that the council is providing to the 5 schools that are not good or outstanding and what those schools are doing to improve.

Members expressed an interest in visiting schools to increase their understanding of how they work and what support is provided by the council. The Director offered to invite members to accompany her on her programme of school visits – one member per school - so that they can observe successful and less successful schools in operation. ACTION: Director of Children Schools and Families; Scrutiny Officer

Merton Safeguarding Children Partnership annual report

The Director explained that the Merton Safeguarding Children Board has been reconfigured and, from September, will become the Merton Safeguarding Children Partnership. An Independent Person chairs the Partnership and there will also be an Independent Scrutineer and a Young Scrutineer. In addition to council and police representative there will now be a health representative on the partnership.

AGREED to continue to receive an annual report – the Director suggested the February meeting. The Chair, health and police representatives will be invited to attend.

Performance monitoring

AGREED to continue to take this as a standing item. Also AGREED that Councillor Hayley Ormrod should continue to be the Panel's lead on performance monitoring.

Educational technology in the classroom

AGREED to consider this as a potential task group review – terms of reference to be drafted for consideration by the Panel at its meeting on 26 June. Members would like the review to consider the advantages and disadvantages of using technology in the classroom. Background documents would include the DfE's Education Technology Strategy and a report from the Education Endowment Foundation "using digital technology to improve learning".

Schools standards annual report

AGREED to continue to receive this item on an annual basis.

School Standards Panel

AGREED that this was not a priority for inclusion in the 2019-20 work programme.

Troubled families

The Cabinet Member for Children's Services said that funding for this programme will end in 2020 and it would be very helpful if the Panel could scrutinise performance and comment on options for the future.

AGREED to receive a report at the Panel's meeting in September and to invite the lead officer (Roberta Evans) and the Assistant Director of Youth Inclusion (Elle Mayhew) to the meeting.

Transition to adulthood

Noted that a task group review by the Healthier Communities and Older People Panel on transition between children's and adults' services for children with special educational needs and disabilities is just concluding. Also noted that the Children and Young People Panel had conducted a task group review in 2016-17 of routes into employment for vulnerable cohorts in Merton.

AGREED that this would not therefore be a priority area for scrutiny in 2019-20. ACTION: Scrutiny Officer to send both task group reports and implementation plans to all Panel members.

Universal Credit

AGREED to refer to the Overview and Scrutiny Commission for consideration.

Also AGREED to consider a potential task group review on child poverty. Terms of reference to be drafted for consideration by the Panel at its meeting on 26 June

Additional topic suggestions made by members at the workshop:

Review of PFI contracts

The Director advised that the PFI contracts for a number of schools would come to an end within the next 10 years and that the council would need to ensure premises were returned in good repair.

AGREED that the Director should provide information on this in the departmental update in the first instance and then the panel would consider inviting providers to a meeting to discuss the issues.

Knife crime

ACTION AGREED:

- Director to include in the departmental update
- Head of Democracy Services to circulate the knife crime action plan on a confidential basis to all members of the Panel.

School maintenance costs

AGREED to receive an information report itemising the council's spending on school maintenance and how this is prioritised. The Director will advise on whether this would be ready in time for the Panel's June meeting.

Spend on agency staff in schools

AGREED not to take further action on this because the Overview and Scrutiny Commission carried out a task group review of the recruitment and retention of teachers in 2017-18 and the actions have now been implemented by Cabinet (with the exception on one on rent deposit loan which is awaiting further response).

ACTION: Head of Democracy Services to send task group report and action plan to Councillor Makin.

SEN funding

AGREED to include information in the departmental update on how the council spends its SEN budget allocation (information on each how school spends the pupil premium grant is published on the school's website).

Noted that the DfE had required a deficit reduction plan for our overspend in the High Needs Block of the DSG, and we agreed that the deficit reduction plan should come to scrutiny.

Home-schooled children

Noted that there had been an increase in the number of children being home schooled in Merton. Expressed interest in finding out why and what the council is doing to support these families and to monitor the quality of the education provision.

AGREED to consider as a potential task group review - terms of reference to be drafted for consideration by the Panel at its meeting on 26 June.

<u>Early years provision</u>

AGREED that information on this should be included in the departmental update in the first instance, describing the provision and commenting on the performance indicator on the take-up of funded nursery hours for 2 and 3 year olds.

Task group options as identified at the workshop on 20 May 2019

1. **Educational technology in the classroom**

A dedicated task group review would allow the Panel to explore the advantages and disadvantages of using technology in the classroom, how it's being utilised in Merton and other Local Authorities and whether Merton could grow in this area.

Studies show that with countless online resources and platforms available, technology can be an effective tool to help reduce teacher workload, increase efficiencies, engage students and provide tools to support excellent teaching.

However, there may also be cons to this tools such as slow internet connections and outdated networking and devices, the impact of increasing screen time and privacy, safety and data security issues.

Broadly, a task group could explore the benefits and disadvantages of Educational Technology, including personalised learning, look at what Merton Schools are already offering, explore best practice/results/available studies and consider alternatives.

Task group members could undertake visits to schools to observe lessons.

Consult with Head teachers, governors, parents and DfE.

The draft terms of reference are:

- To scrutinise the technology already in place in local schools and receive information about the alternatives that are available;

- To identify existing best practice in Merton and elsewhere that could inform the council's future approach to Education Technology, make comparisons with the Ed tech offered by our neighbouring boroughs;

- To consider how technology impacts children with behavioural issues, SEND and

- To make recommendations on how the Educational Technology tools and Personalised Learning support offered by Merton Schools might be enhanced with an estimation of the impact. This would need to be accompanied by an understanding of the cost implications of any recommendations and how these will be funded.

Background documents

Education Endowment Foundation report: Using digital technology to improve learning.

https://educationendowmentfoundation.org.uk/tools/guidance-reports/using-digital-technology-to-improve-learning/https://educationendowmentfoundation.org.uk/tools/guidance-reports/using-digital-technology-to-improve-learning/

DfE's Education Technology Strategy:

https://www.gov.uk/government/publications/realising-the-potential-of-technology-in-educationhttps://www.gov.uk/government/publications/realising-the-potential-of-technology-in-education

2. Home schooled children

There has been an increase in the number of children being home schooled in Merton with 2018's figure standing at 169 children electively home educated.
The draft terms of reference are:

- To identify the key issues that result in elective home education
- To scrutinise what the schools do to resolve those issues
- To review what the Council is doing to support these families
- To scrutinise how the quality of the education provision is being monitored and whether results are impacted
- To make recommendations on how the support offered by might be enhanced

Task group members could consult with the Education Welfare Service, Home Education Advisors and parents that home educate.

3. Child Poverty and Universal Credit

The CYP Departmental Management Team suggested the Panel scrutinise the Department for Work and Pensions over the roll out of Universal Credit, why Merton were not briefed and what the impact of this change is on families.

The task group could explore what impact the roll out of Universal Credit has had on children and young people in Merton and whether it has contributed to levels of child poverty, including the need for emergency food aid, dealing with rent arrears and debt caused by late payment and the implications it has had on tenancies.

A task group would want to understand these issues fully and might use a variety of means including:

- Talking to Housing Needs Officers about the variety of issues raised with them;
- Desk research to investigate how many residents in the borough have been affected by the roll out
- Directly consulting with residents in receipt of UC about the issues they face - Ask first-hand how the change is affecting them, including the need for emergency food aid and dealing with rent arrears and debt.
- Contact Merton Citizens Advice Bureau for details on how many UC applications they have assisted with/provided information and advice for.
- Task group members could also consult with the Head of Revenues and Benefits and the DWP.

The draft terms of reference are:

- To scrutinise the Merton roll out of Universal Credit, hold the DWP to account for not briefing the Local Authority
- Examine the impact locally and how it compares nationally
- The possibility of influencing any change on the DWP system is limited, but the task group could look at what recommendations could encourage more help and support being made available for those claiming benefits in Merton

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