

Minutes

of the Virtual Meeting of

The Children and Young People's Services Policy and Scrutiny Panel

Thursday, 11 March 2021

Virtual Meeting via Microsoft Teams

Meeting Commenced: 10.00 am

Meeting Concluded: 12.00 pm

Councillors:

Wendy Griggs (Chairman)

Steve Hogg (Vice-Chairman)

Mark Aplin

Steve Bridger

Caroline Cherry

Ciaran Cronnelly

Mark Crosby

Ann Harley

Nicola Holland

Ruth Jacobs

Huw James

Lisa Pilgrim

Apologies: Councillors: Timothy Snaden and Richard Westwood.

Absent: Councillor Hugh Gregor

Other Councillors in attendance: Councillors Catherine Gibbons, Sandra Hearne

Right to Speak: Kenton Mee, North Somerset Parent Carers Working Together (The Parent Carer Forum in North Somerset)

Officers in attendance: Michele Chesterman (Democratic and Electoral Services Officer), Brent Cross (Democratic and Electoral Services Support Officer), Carolann James (Assistant Director, Children's Support & Safeguarding), Katherine Sokol (Finance Business Partner), Ayesha Tinsley (Digital Apprentice) and Mike Newman (Strategy and Policy Development Manager).

Other persons in attendance: Lorraine McMullen, Associate Director of Children's Services, Sirona Care and Health, Heather Kapeluch, Head of Operations for CAMHS, Avon & Wiltshire Mental Health Partnership NHS Trust, Sarah Jones, Clinical Director, CAMHS, Avon & Wiltshire Mental Health Partnership NHS Trust, Anna Norris, Senior Contracts Manager, NHS Bristol, North Somerset and South Gloucestershire CCG

**CAY
18 Chairman's Welcome**

The Chairman welcomed everyone to this virtual Children and Young People's Policy and Scrutiny Panel meeting.

She explained the procedures to be followed at the meeting and confirmed that proceedings would have the same standing and validity as if they had taken place at a physical meeting of the Children and Young People's Services Policy and Scrutiny Panel meeting in the Town Hall

The Chairman reminded everyone that the meeting was being livestreamed on the internet and that a recorded version would be available to view within 48 hours on the North Somerset Council website.

The Chairman welcomed everyone to the meeting with a particular welcome to health colleagues, Kenton Mee, North Somerset Parent Carers Working Together (The Parent Carer Forum in North Somerset) and Ann Hartley from Shropshire Council, LGA Advisor.

At the invitation of the Chairman a roll call was taken of the Panel members by Democratic Services for the benefit of those in attendance and members of the public watching the meeting online.

**CAY
19 Declaration of disclosable pecuniary interest (Standing Order 37) (Agenda item 3)**

None

**CAY
20 Minutes (Agenda Item 4)**

Resolved: that the minutes of the last meeting held on 29 October 2020 be approved as a correct record.

**CAY
21 SEND Action Plan Update Report (Agenda Item 6)**

The Strategy and Policy Development Manager, Children's Services presented the report. Members were informed that the report was an update on the progress of the SEND action plan, presented at the panel meeting on 18 June 2021. The paper noted specific actions and risks, and graded each area of work as green, amber or red based on risk. Finally, the recommendations of the recent LGA Peer Review and feedback from the Department of Education and NHS England were considered in terms of the Authority's current plans.

Members were reminded that the SEND Action Plan was agreed by partners across the local area in January 2020 alongside the first joint SEND Strategy and Co-production charter.

The aim of the plan was to provide an overall strategic view of the programme of work required to bring together all remaining actions required to meet the issues raised in the Ofsted/CQC Local Area Review (LJAR) and to detail further actions required to ensure that outcomes were sustainable, and that the impact of the work on the lives of children and young people could be demonstrated.

The plan had an horizon of two years, with a review to be undertaken by the SEND Programme Board in early 2021. Each area of work was expected to be subject to more detailed delivery planning, including development of timescales, by partners.

Members' attention was drawn to the highlights of the work undertaken since the update to the June 2020 Panel meeting which included:

- The reduction in the rate of 'refused assessments' (which were often the result of inappropriate referrals by partners) from 50% to 6%
- The agreement to jointly fund the Supportive Parents SENDIAS service and North Somerset Parent Carers Working Together forum with BNSSG CCG on a three-year agreement, providing some certainty and sustainability for these key services.
- The use of accurate projections and analysis to ensure that capacity in key services was improved and capital projects supported
- A range of capital projects were now at various stages of positive progress: a second site for Baytree School's expansion, a new Free School supporting children with Social, Emotional and Mental Health Needs (SEMH) and hubs at mainstream schools to support children with Autistic Spectrum Conditions.
- Additional investment in CAMHS and forthcoming expansion of Off The Record pre-CAMHS services into North Somerset
- Relationships with parents and carers were improving, with considerable progress made in delivering new guidance documents
- The Inclusion Summit took place in November 2020 and renewed a commitment to inclusion and mutual support across mainstream and special schools

Many of the district's vulnerable children and young people had continued to attend school throughout the pandemic and the schools had served them well in sometimes very challenging circumstances. North Somerset had one of the highest attendance rates during the pandemic in the South West and had recovered much quicker than other authorities with 85% attendance in schools

which was encouraging to hear and a vote of thanks to them.

Members noted that alongside highlights there were also Risks which included:

- Continued pressure in terms of increased assessment requests, EHC plans and requests for places in specialist provision with projections showing this increase was set to continue;
- The rate of EHC assessments delivered within the 20-week statutory timescale was recovering, but still low (16%) following issues with Educational Psychology capacity;
- A significant number of the 'refused assessments' which were received resulted from partners being unable to access CAMHS mental health services for children with anxiety and EHCPs being seen as a 'last resort' by schools;
- While the equity of health provision across the BNSSG footprint had been improving and clearer leadership around SEND health services was in place, there were further actions needed to agree how complex care packages were jointly commissioned;
- Waiting lists for Autism assessment were still too long despite improvement, with parents reporting little support whilst on the journey to diagnosis;
- Parents' confidence in home to school transport (HST) arrangements remained low following challenges in September 2020 (there had been issues around home to school transport which had been an issue over the course of the last few months but it was hoped that some progress was being made);
- There was still some way to go to ensure that parents engaged in all decisions about services, and in particular to engage children and young people in co-production. Plans for this work had been heavily impacted by Covid-19. (Schools had been so compromised and challenged that getting into schools to carry out some of that work had been really difficult but it was something that the Authority was expected to get back to soon)
- Further improvements in the use of technology to support the EHC system needed to be progressed, including funding the online EHCP portal.

Members were directed towards the RAG rated action plan in the report and also some of the responses noted on the LGA recommendations – where they were picked up, those that the Authority differed on and what the Authority proposed to do. The action plan referred to a Head of Education Partnerships. Members were advised that instead of a Head of Education Partnerships the Authority would now be recruiting for an Assistant Director of Education Partnerships.

The Strategy and Policy Development Manager and Interim Assistant Director, Children's Support and Safeguarding responded to the following Members' queries (with officers' responses in italics):-

- I wondered whether it would be possible to be provided with some more information about Home to School Transport and when members will be involved in it next? I was aware there was due to be an update in January 2021 but that did not happen - *I am waiting for the same meetings to happen. I know there have been some meetings and an action plan has been drawn up with the Integrated Transport Unit which is in the Place Directorate. They have been in touch with the SEND team to see how links can be improved with the team and also to be more aware of students' needs and issues that may arise. More work is being undertaken and hopefully there should be an update soon.*(MN)
- North Somerset Parent Carers Working Together raised a number of challenges in relation to home to school transport that arose in September 2021. A number of meeting had taken place with the home to school transport team and there had been significant progress. The organisation was just waiting for some reassurances from the home to school transport team that the issues in relation to the electronic system for scheduling and recording information and delivering information to parent carers had been resolved and that the same challenges would not be faced again – *The priority at the moment is the fully re-opening of schools and testing but I will get a specific update to all councillors about the progress we have made so far in relation to home to school transport and what we still have to address before the end of March 2021* (CJ).
- I was reading about the Inclusion Summit that took place in 2020 and was expecting to hear more detail about it. It sounded like it was a very interesting discussion - *Yes it was. It was an opportunity for us to get together what is quite a disparate group of schools. As you are probably aware school leadership is more disaggregated than it used to be and sometimes schools have grown apart from each other. The summit brought them back together into a collegiate sense of how schools worked together to present an education system in North Somerset which is coherent, works together and avoids exclusions and parents feeling that they need to leave the formal education system to teach their children at home – a growing issue nationally and certainly one that has been growing in North Somerset.*

- *The summit also provided the opportunity for the Authority to reaffirm its role as commissioner of education in North Somerset. With a new Assistant Director joining the Authority there was an opportunity to provide not just the helpful role to schools, to bring them together, but also to provide a little challenge to them around standards and outcomes and inclusion. The summit was the start of that and schools have been working together quite effectively since. Some of the impacts have been seen, particularly in secondary schools. There are inclusion panels that meet every couple of weeks to look at children who are at risk of perhaps falling out of the school system. There has been excellent joint working between some of our secondary schools. Some of that joint working was in place before but since the Inclusion Summit they have begun to understand how each other work and effectively join up. It is hoped that this will be replicated in the primary sector but there are many more of those schools so this is more challenging but very positive.*
- *A follow up meeting took place at the end of the Inclusion Summit. One of the commitments for inclusion was trying to work together across all the SENCOs based in schools to equip people with the skills to be able to better support children and young people in mainstream education. Academies and local authority-maintained schools across North Somerset shared skills, knowledge and ideas to be able to support and work together and also to improve on the Inclusion Panels. That also includes primary areas.*
- *I noted the anxiety in relation to EHCPs being seen as a last resort by schools and would like to know whether, with BNSSG joining, North Somerset has the same funding and whether there will be any funding from the government for Covid? - In terms of EHCPs – there is the issue around schools tending to refer people in for EHCPs when they feel it is a last resort and they are not managing very well. The inclusion summit and some of the joint working is the way we have looked to address that. Skilling up schools to recognise and address need and to be able to meet by sharing their expertise is much more effective than trying to pull children out of the system into a separate system except where that is absolutely critical and the only way of meeting that need. We have said in our education commissioning strategy we want children in North Somerset to go to a local school, to be educated in their community and to grow up and become independent in that community. We want that to be the same for children with SEND. Only in very few cases should it need to be different. In terms of parity of funding this issue will come up in the next agenda item. Colleagues are here from BNSSG and AWP and also Anna Norris, the Contract Manager from BNSSG CCG will be able to answer the parity of funding across the areas. I know we have seen some improvements and some changes but she will be able to answer that.*

- It is important to engage all parents and carers. I have some concerns about issues when children return to schools. How do we as an authority deal with communicating to parents that their child needs help. Is there anything in the action plan to identify where there will be need and how to address it? - *All of our work has indicated that parents are recognising needs and quite often demands on us are increasing as a result. I am confident that parents are telling us when they need services. Organisations such as Parent Carers Together and Supportive Parents are very helpful in terms of helping parents to formulate questions, challenges and requests for services. I am not too worried about parents not engaging with us. Schools and our early years team have some excellent ways of working with parents and children to detect some of those issues very early. MAISEY (Multi-agency Identification and Support in the Early Years) supports provision planning from early identification of need until school entry, ensuring where possible that transfers to pre-school and school are successful for every child. It is nationally regarded as a very strong way of identifying need and that transfer into schools is managed really effectively through MAISEY. Our primary school SENCOs are very adept at supporting parents. Whilst I recognise the concern it is not something we are seeing in North Somerset at the moment.*
- Should we be using 'we will ensure' in the action plan? Unless it is statutory it is saying we are going to do it. This means that unless we do it we will be held to account - *Generally speaking the actions in the action plan are drawn from our statutory responsibilities so 'we will' is a sensible thing to write. I think some of it is also about the commitments we have made to parents and carers that we will absolutely do those things. It is an action plan and we are a year in and we have made some progress on it. I am not aware of anything that we haven't made any progress on despite the circumstances. I am therefore confident that where we have said 'we will' we will do those things. We will keep reviewing it because it is important.*
- I read SEND action plan with interest and can see there has been a great deal of progress but there was a reference to background information that was not included. I do hope that we as CYPS can be shown the co-production charter and have some input on the child sufficiency strategy. In terms of how we improve access to our local offer I have seen that there is reference to online portals for obtaining EHCPs and that this has been trialled in other areas. Is this something we are going to do? – *The charter and action plan is published and I can certainly make sure that it is circulated to members of the Panel. In terms of the online offer the online EHCP portal is something that we are committed to, has been very successful in other areas, and the Department for Education is very committed to areas having. We are aware that the process of applying for*

an EHCP is quite demanding on parents and requires them to do quite a bit of work and input. At the moment they need to chase and challenge by phoning the SEND team during office hours (9-5). The ability to log in at a time when a parent has some time to think about what they want to write to us or what they want to put in their plan, check on progress or be able to access the feedback from health or from educational psychologists is invaluable to improving the experience for parents. We have looked at a number of systems and we are currently identifying funding. This ties into the local offer on which we have received support from the CCG and external partners in terms of usability and how we can invest in making sure that it is more accessible to parents and particularly to children and young people who we know want to use it and to improve the quality and the coverage. That work is underway. It has been interesting to work with outside people who have a totally different view of LA websites to us and have challenged us to think differently. Thank you to the CCG for setting that up for us and getting us in touch with them.

- *Sufficiency strategy is predominately around ensuring there are placements for children - children in care and care leavers. There are two aspects to sufficiency. The one that is referenced in the SEND strategy is around those school placements for children in relation to when the children need to be in a residential school. A document is being drawn up and the draft will be circulated for comments. It is a statutory requirement. There is a smaller community of children with SEND who are not children in care but those will be addressed as well and that includes their emotional health and wellbeing. Sometimes we place children in care in 24 hour curriculum where their care, education and emotional health needs are placed in one environment. There is also the sufficiency of school placements which is an area of challenge particularly around the SEMH needs of young people. That links back to the inclusion strategy and our vision for children to keep them in mainstream education with the right support where that is right for the child as opposed to alternative or external or out of the area education. These areas are very much aligned because you cannot work in isolation. Historically we haven't worked as strongly as we can but we are on a journey.*
- *Could I ask about the shortfall of educational psychologists? – that was part of a contract with Somerset County Council as part of their traded services arm. There was an underestimate in the number of EHCPs that they needed to service in 2019. We have carried out some projection work and we have increased what we have contracted them for 2020 and 2021. We now have the appropriate amount in place and the Authority is in much better position.*

The Chairman thanked the officer for the report.

Concluded:

- (1) that the panel receive the update on the SEND Action Plan and the initial response to the LGA recommendations;
- (2) that the panel consider the highlights and risks identified;
- (3) that the panel identify any responses necessary via the Chairman of the Panel (who sits on the SEND Programme Board)
- (4) that the Interim Assistant Director, Children's Support and Safeguarding provide an update to Members on Home to School Transport

CAY 22 SEND Presentation & Q&A Session (Agenda item 7)

The Associate Director of Children's Services, Sirona Care and Health provided Members with a presentation on an Introduction to the Children's Community Health Partnership (CCHP), a copy of which was filed in the minute book.

Members were informed that Sirona was the prime provider and directly accountable to the CCG and the three local authorities (Bristol, North Somerset and South Gloucestershire) on how children's commissioning services were run. The services provided under the umbrella of Children's Community Services were outlined to Members.

Members noted the complex landscape of how business was carried out in children's services across BNSSG. It provided an opportunity for Sirona to think BNSSG wide and create an equitable, responsible, responsive service for all children, families and communities. Strategically Sirona was reviewing every service within the Children's Directorate to ensure that it was responding to the needs of local services such as those in North Somerset. The Associate Director of Children's Services had created strategic leads that sat across the whole BNSSG framework to lead on the service reviews and to make sure that services were being delivered within the geographies that were consistent and equitable across all the areas served.

The Associate Director of Children's Services outlined the staffing structure in Sirona with particular reference to the Head of Children's Services Therapies, Autism and SEND whose responsibilities included therapies (speech and language therapy, occupational therapy, physio therapy), early years practitioner service, autism hub service, associate designated clinical officer service, associate designated clinical officer service and children's traded service.

Particular attention was drawn to the fact that it was crucial to ensure the SEND and EHC requirements were correct across the three local authority areas. It was the responsibility of the Head of Children's Services for Therapies to ensure that Sirona had the commitment and interface between education, health and the local authority via the SEND partnership.

Reference was also made to the Head of Specialist Services for Children whose

responsibilities covered children in care, lifetime immunisations, neurodevelopmental services, continence services and transition. The specialist nursing team who were looking at transitions and some of the 'cliff edges' that needed to be addressed in supporting young people as they moved into adult services.

It was reported that a new Clinical Director had been appointed (supporting the Associate Director of Children's Services in the community paediatrics framework, some of the ASD and education health care requirements and children in care). Responsibilities of the role were paediatrics (BNSSG), delivery of service, paediatricians, safeguarding.

The Associate Director of Children's Services, Sirona (LM) and Head of Operations for CAMHS, AWS (HK) responded to the following queries from panel members (with responses in italics):-

- With regards AWP who you subcontracted – it is very difficult as part of the CYPS to work out how we can scrutinise some of the performances of so many disparate partners. One of the things I was looking at was 'Kooth' and 'Off the Record'. Who commissioned them and how are these scrutinised? 'Kooth' is an American funded app and I can't see how we work out its effectiveness. 'Off the Record' is more open because it is a charity based organisation in Bristol and we would be able to see the trustees. How do we manage 'Kooth's' performance? - *I will begin to describe the contractual responsibilities if that would be helpful. Ultimately, myself, Sirona, is responsible for all of the prime and I am responsible in a contractual and commercial basis and for the whole service offer. Within the prime responsibility I share that responsibility in a sub-contracted way to AWP. AWP subcontracts 'Off the Record' and 'Kooth'. Ultimately, I am responsible for everything that is delivered in Children's Services. However, there is a responsibility from a professional and commercial basis and that scrutiny goes in a matrix so that Sirona commissioners have a line of sight to all sub-contractors in order to test, understand, review and reflect around service offers. (LM)*
- Have you reviewed 'Kooth' and can you share with us what their performance has been? – *I don't have the data in terms of 'Kooth'. 'Kooth' is an online professionally qualified children's counselling provision. There are a number of performance measures – assuring that young people meet a number of goals and they set goals with young people. We can measure the goals and check improvements against that. Kooth also maintain a large library of resources and peer led resources that are available online which is moderated, not unlike 'Off the Record'. The entire platform is online and national. Wherever they set up across the country (and I have worked with them in different parts of the country) they always have to have close links with the mental health providers and clear mechanisms for escalating any concerns about young people as well as safeguarding young people. There are very detailed quarterly reports monitoring their performance as part of this contract. (HK)*

- I was going to ask where children's mental health fitted into that structure LM but I think you have said you manage that relationship with AWP. Given the pandemic that area is huge and has grown even more over the last 12 months - *As children return to school we will learn more and more about the challenges facing children over the next 12 months. In relation to the children in need of crisis intervention there is something for them going forwards but it is the well kids that would have been ok that we need to make sure there are tools in place for them to face some of the challenges.* (LM)

The Head of Operations for CAMHS, AWS Partnership NHS Trust (HK) outlined the key members of the team which included herself as responsible for the day to day running of the service, Clinical Director CAMHS, Clinical, Lead CAMHS, Associate Director, CAMHS, Head of Operations – BNSSG CAMHS, North Somerset CAMHS Service Manager.

The services provided by CAMHS were as follows:-

- Children's and Adolescents Mental Health Services (CAMHS)
- Eating Disorders
- Substance Misuse (not within North Somerset)
- Youth Offending Teams (within the LA in North Somerset)
- Urgent Care Assessment Team
- Provide a specialist in patient specialist CAMHS provision primarily for Bristol, North Somerset and South Gloucestershire – closed at the moment for refurbishment but providing a day provision. Will be re-opening with an increase in beds in June.

The Head of Operations for CAMHS, AWS, explained that one of the first actions that had been carried out very early in the contract moving to AWP was the introduction of an electronic patient record. This had resulted in there being a very robust record and also enabled the monitoring and support of both the risks young people presented with and also the waiting list in North Somerset.

The focus was on developing the workforce and new members of staff were now joining the team. The team had been without a substantive psychiatrist for some time but the first one was starting in May and another advertisement had been published to attract some more applicants.

There had also been investment in crisis. Previously there had been a very small team in North Somerset. After benefitting from some new investment a recruitment campaign had been undertaken to ensure that it would be available 24-7. This would have a significant effect in terms of improvement in the area.

'Off the Record' would be introduced which was similar to the offer to Bristol and South Gloucestershire – face to face counselling and wider resilience particularly focused pre specialist CAMHS. Members were informed there was a strong working relationship with 'Off the Record'.

There was also a desire to incorporate mental health support in schools. It would not be possible for there to be a team in North Somerset this year as the goal had been to introduce Off the Record and get that support into North Somerset over the next year and introduce the mental health team the following February. There would be pre-CAMHS support and the recruitment process was currently taking place.

Members raised the following questions/queries (with responses in italics):

- What does North Somerset want from you and what do you want from North Somerset as a partnership? – *to think in terms of the offer and the parity of the offer in North Somerset compared to Bristol and South Gloucestershire is an ambition. At the moment the offer is quite different. There is something about how we come together within specialist CAMHS. It is a very small resource. We need to think about the model and framework of delivery and how we can strengthen some of those pathways. Some of that has been covered in the strategy going forwards (HK).*
- I am concerned in relation to children's mental health. I can understand you are in a difficult situation but I want to see that we have people who can deal with it now. A year down the line is not acceptable. I would like to see something done and an urgency put on it. It is not one fix fit all – you have to identify something and if it is not done it will have consequences. What is going to be put into CAMHS now? – *The service does still have quite a long waiting list. We are working very hard to re-develop the pathways to make sure children are being seen quickly. There has been focused investment there and there is a much bigger piece of work to see what we do pre-specialist provision. We are seeing a lot more children presenting. There needs to be focus on what we can do earlier with early intervention and prevention. The mental health teams in schools will be part of it. We may not have seen some of the children pre-Covid (increasing anxiety etc). We are investing in our specialist practitioners who are trained in the evidence to treat anxiety. We are over recruiting around supporting children with eating disorders as that is one of the areas we are seeing an increase in. We are re-aligning services. There is a lot of work to be done but we are really thinking about the pathway and working in partnership is the way forward. At the moment I have some additional funding. We have spoken to 'Off the Record' which will go live in April 2021. We will be able to support a lot of people in terms of lower level resilience. I have a whole re-design project in terms of what that community should look like across the areas. (HK)*

Mental health is everyone's business and we are trying to raise that profile with parents and schools so that they have some of the tools to deal with that. It is also crucial that we have specialists to deal with high

levels of need. (LM)

- Comparing North Somerset to South Gloucestershire and Bristol can you clarify how much per unit we receive? How do we also compare with waiting times? – *I don't have the splits to hand and we are working with North Somerset and AWP to identify what the funding is in both the areas. They are contracted and commissioned differently and have now moved across to AWP. CAMHS need to look at the funding available to all services and ensure equity across the 3 areas. This includes working with the local authority and public health as in Bristol and South Gloucestershire. I am happy to find out and feedback to you with those figures. (AN)*

We recognise there is a gap in the service offer in North Somerset from a health perspective. As Sirona, the provider, I have got to make sure as a result of North Somerset being part of my portfolio it does not dilute the offer to Bristol and South Gloucestershire and we work with North Somerset in respect of the levelling opportunity that needs to happen. We are really trying to work with what is an offer for Bristol and South Gloucestershire (mental health and therapies perspective) and how does that compare with North Somerset and how do we get that up rather than dilute the offer. (LM)

We want to look at levelling up the services. We have contributed additional funding to the CAMHS services in North Somerset on a recurrent basis, for example funding for 'Off the Record and the other end re crisis services – moving North Somerset from a 9-5 offer to 24/7. (AN)

The waiting list is longer in North Somerset. The key success of some of the waiting list work in Bristol and South Gloucestershire (and we are now bringing that learning into North Somerset) is that it is not just about us bringing in additional resources, although that is part of it. It is also about the re-design of the service so that young people are supported in the right pathway (and don't have to go through so many hoops to get the specialist provision) and access it earlier on in the process, where appropriate. We are already doing that in terms of how we are changing some of the systems and processes. There is a benefit for North Somerset as it is joining a much larger service. Some of the transformation will be different in North Somerset but there is a lot of learning that we are already doing in North Somerset. (HK)

- I am not getting the impression that North Somerset is getting access to CAMHS services for this year and instead we are getting 'Off the Record' but they are not yet appointed. I am concerned there is going to be a gap. We, as a local authority, have a statutory duty to provide adequate services. It is absolutely at a crisis point because it is impacting specifically SEND pupils in particular. There is a huge need. I do not accept that North Somerset can be left out and told to wait. We need details about levelling up and we need to do it now. The amount of need is extraordinary. I appreciate that CAMHS is spread out and you are dealing with other areas, other than just North Somerset but can

we please have some feedback and honesty on this. There aren't appointments yet at 'Off the Record' and I am afraid children will fall through the gap. Can you tell us when CAMHS will be covering North Somerset? – *CAMHS services are available in North Somerset already. They require some pathway development and changes to bring them in line with Bristol and South Gloucestershire now that AWP are providing them, but CAMHS services are absolutely available to our North Somerset population (AN).*

We are seeing young people in North Somerset. We are doing a significant piece of work to reduce the wait times. We have put in additional practitioners now in terms of crisis. I have already doubled that offer since April in terms of the staff who I have providing that support. We have a very large recruitment campaign and we have had some very successful appointments joining the existing CAMHS team. It is not a quick piece of work. I agree that with the pandemic we are talking of what additional resources can come on side to support traditional services too. (HK)

- In respect of the services you offer – what, if any, specialist teams and advice have you got for young people struggling in terms of anxiety over sexuality, sexual orientation and gender identity? I feel the pandemic has magnified these concerns for many young people. I receive communications from families that they are not getting the support and finding it hard to find – *We have a pathway for young people that we support within CAMHS and we also have support from some of our national colleagues from London who work alongside us to support us. We will also refer to some of the specialist pathways who provide support and some charities as well. We could certainly look at the pathway and I know 'Off the Record' also provide support alongside our services (HK).*

It is important to create health awareness of those issues so that we signpost people to the services and there is no wrong door. We make sure our health visitors understand it and encourage parents to talk about it and teachers and therapists. Where there is a child who has need and it gets to a level of need to create that specialist pathway it is there. (LM)

- Could we work more closely with the LGBTQ in this area? – *we are in the process of developing our new website as well and absolutely that is a critical part of our service provision (HK).*
- I have seen countless times children waiting for CAMHS appointments. It is not a new phenomenon. What makes the service new now that you are offering? You are realigning resources, when you mention pre-CAMHS, is this the triage system? With the CAMHS situation and the number of children needing urgent attention we are not hitting the goals. Why have we not managed it before and how are we going to manage it now? - *It is difficult to talk about the historical issues in North Somerset. It is well recognised that children's mental health is a key priority. There is a need for increased investment in children's mental health both in a specialist pathway but also early intervention. Apologies if I have said*

we have got it right. We are making improvements. Within North Somerset there is a need to think about children's early emotional wellbeing support, mental health support pre-specialist and having some of those services available. 'Off the Record' will be the starting point for that. There is more that can be done and more investment in schools of which the mental health teams will be a part of particularly around young people presenting with anxiety and behavioural problems. What we need in terms of the specialist provision is to make sure children are seen as quickly as possible. We have changed the triage system. Young people are reviewed every day. Young children who are on the waiting list are telephoned. We have a robust RAG rating for risk. We have increased the crisis provision for the North Somerset team. The pathway redesign is really important. It is about ensuring that children have the right support. Triage is critical in terms of understanding the issues that children are presenting, having a really comprehensive assessment of that young person and getting the right pathway. We are emphasising that support around high risk at the moment but that needs to be across all of our pathways (HK).

A discussion took place on the parity of funding. It was agreed to set up an investigative working group to look at the parity of funding and access issues to service – pathway and service re-design.

The Chairman thanked the NHS representatives for attending the Panel meeting and for the presentation.

Concluded:

(1) that the Panel convene a Joint CAMHS (CYPS & HOSP) Working Group (to include Cllrs Wendy Griggs, Huw James, Caroline Cherry, Steve Hogg, Sandra Hearne, Kenton Mee and NHS representatives - Anna Norris, Heather Kapeluch, and Lorraine McMullen).

(2) that panel members submit any further questions via meeting chat or to the Democratic and Electoral Services Officer to be answered by the health representatives after the meeting and attached as an appendix to the minutes.

CAY 23 Children's Improvement Focus Group Feedback (Agenda item 8)

The Chairman referred Members to the Panel's Work Plan in relation to the work of the Children's Improvement Focus Group. Members were informed that a separate update Teams meeting had been organised for Wednesday 17 March 2021 at 4.00 pm to provide an update on the Improvement Plan.

Concluded:

(1) that Panel Members noted the Improvement Plan update session scheduled for Wednesday 17 March at 4.00 pm via Teams.

**CAY
24 Corporate Parenting Report (Agenda item 9)**

The Interim Assistant Director, Children's Support and Safeguarding presented the report. The report informed panel members of the key current issues in relation to children who were looked after, young people leaving care and the fostering service to thereby enable panel members to evaluate how effectively the whole council was discharging its Corporate Parenting Responsibilities and Duties. In particular, in relation to determining how effectively the council and its partners were achieving key plans and objectives for children and young people's services and to provide appropriate challenge and suggestions to improve performance.

Members were informed that the report outlined key updates and described how children's services continued to deliver its services despite the global pandemic and a third National Lockdown. Despite the challenges posed by Covid-19, Children's Services had continued to deliver face-to-face support wherever safe to do so, and when necessary undertaken more creative practice to support children looked after, young people leaving care and foster/kinship carers. Such creativity had seen a greater use of digital technology to support visits and interactions with children, young people and carers. As well as presenting significant challenge it had also opened opportunities to consider new ways of working with children and families that had not been tried or tested previously. There had been a great deal of resilience within young people, foster carers and staff members during this time which had been positive.

It was reported that in the re-alignment of Children's Services which concluded in February and was effective from 1 March 2021 the area that covered corporate parenting had been renamed Corporate Parenting with a new role set up as Head of Corporate Parenting. Children's commissioning would be moving over to Children's Services which would help in the sufficiency area with the team being part of Children's Services instead of being merely linked to it. Also, as part of the re-alignment participation had been moved under one section. A vacant head of service post covering quality assurance and participation was in the process of being filled. In terms of participation this would involve working with all young people rather than focusing on children in care and care leavers.

Members noted that North Somerset had 221 children in care at the end of Q3 which equated to a rate of 51 per 10,000. This was lower than the Authority's statistical neighbours (53) and England (67). It was not necessarily a negative but it meant that the Service was able to support, through aligning with its visions, children and their families to remain at home or within their family network as opposed to becoming children in care.

In relation to unaccompanied asylum seekers Members were informed that in Q1 there were 12 whilst in Q3 that figure was reported as being 18. The Authority had participated in the national challenges with colleagues in Kent whose numbers were becoming unmanageable. There were challenges in North Somerset in terms of language, culture and identity but the Authority was ensuring that planning was taking place for those children to ensure their best interests. Unaccompanied asylum seekers were generally older children (16+) but there were some under 16 year old asylum seekers.

The primary reason for a child becoming looked after) in the first three quarters of 2020/21 was abuse or neglect.

Members were advised that 74% of the Authority's children at the end of Q3 lived in foster care either the Authority's own or outside the district's foster cares. The number of children living in North Somerset was increasing. It was noted that close to home was better for children in the majority of cases but for some children it was safer and better for them to be out of area or live with extended family members. This percentage being 65% compared to 58% for the same period in 2020. Whilst these were not large numbers it was a positive.

In relation to health assessments and dental appointments, Members noted there was a period of time during the pandemic when dentists were closed and when they re-opened they were required to take priority cases first. The Authority was working nationally and locally on this issue as sometimes children who were neglected could have major dental issues.

Members were informed that in 2020, 16 children secured permanence through Special Guardianship orders. This was a significant increase from 2019 and 2018. Members were re-assured that there would be a robust drive to keep children with their families wherever possible and explore and seek out all family options with care planning for children's futures as a priority.

An improvement from Q1, were 19-21 year old care leavers, not in education, employment and/or training (NEET) which was 2% above the Q1 figure. This continued to be a clear focussed area for improvement. Partnership work was ongoing with schools, further education, education and skills, colleagues in the LA and health colleagues to identify ways to resolve this. It was stressed to Members that this was not just an issue for care leavers but for all children in North Somerset. The Authority had participated in research with the Universities of Oxford and York with five local authorities. It was hoped to glean some knowledge to identify the barriers to employment and address the area of temporary employment or zero hours contracts which for many care leavers was their only option due to their educational status. Further, with Rebutte the Authority was seeking to extend Social Impact Bonds with trauma informed care leavers across the west of England extending to 2024 with a bid submitted for an additional 20 North Somerset care leavers.

It was reported that permanency was an area in the Children's Improvement that was challenged in the Ofsted Inspection in 2020 in respect of the fact that the Authority did not match permanency for children in long term fostering quickly enough. An improved computer system and tracking system had been introduced to ensure that all pieces of work were joined up. An action had been completed for all of the young people.

Members were reminded that missing children was an area that was part of the children's improvement journey. Contextual safeguarding was a very key area. A children's society survey was being undertaken with police colleagues and the LA taking the form of a self-evaluation of North Somerset.

Members were informed that In Q1 there had been 116 episodes of children missing. Examples included those children and young people that did not return home when they expected, those who were supposed to remaining inside due to COVID but went out. It could also be more worryingly, in the case of a child or young person who was missing over 24 hours which the Authority was not aware of. In Q1 there were 116 episodes with 48 children (18 children in care) Q3 103 episodes 56 children (20 children in care) – less episodes but more children. A robust operational system had been instigated which had been very effective because it not only looked at the individual children but also the strategic aspect in terms of what actions needed to be taken.

In discussing emotional wellbeing, a consultation service was in place, partly funded by North Somerset and CCG working with children and young people. There was a continuum of need from acute specialist (CAMHS) to awareness raising as problems emerged. A local Somerset Company 'Painted Horse' provided equine therapy which research indicated was impactful particularly with children in care. A grant was available to support 330 children in care and the Authority had been offered a minimum of 20 of those places.

The Children in Care Awards ceremony had been hosted virtually using Theatre Orchard. The feedback had been positive from both young people and foster carers. The advantage of hosting a virtual ceremony was that it had been possible to invite more young people than usual. Permission was currently being sought to share the Awards Ceremony video with members.

In terms of sufficiency for foster carers the positive news was that there were more children in in-house foster placements than before. This move was in the right direction but not at the pace required. There were also more children in North Somerset. Members noted that 18 additional foster carers had been recruited. A marketing post had been established in the Fostering Team working across health and schools. The previous sufficiency strategy referred to developing the range of in house foster placements for some of the more complex young people as opposed to placing them in independent fostering or residential care (when that was not their need but because a foster carer was not available locally) but the support of CAMHS colleagues would be needed to enable the wrap around support package to be in place for the young person.

Young people had referred to mental health and emotional support as being a real issue for them. Peer mentoring had been requested for older children in care and care leavers. The Interim Assistant Director, Children's Support and Safeguarding had confirmed this would be implemented but emphasised that it needed to be done correctly and in a safe way for young people.

The Interim Assistant Director, Children's Support and Safeguarding responded to the following questions from members (with responses in italics):

- Just over a year ago the central role of being a corporate parent was emphasised to members including how seriously we should take our role which was not just about scrutinising but also sharing experiences from work. A number of us submitted a list of offers outlining we would like to help. In terms of mental health, I would have been already able to help. However, my offer was not taken up. I did raise this with the Executive Member for Children's Services and Lifelong

Learning and was reassured it would happen but nothing has happened. We have talked about the effect of the pandemic on children's mental health and I find it really disappointing that no-one has come back to me. Can we please do something about those offers which are still there. If we need to re-submit we can do so and alternatively if it is not the right thing to do we can stand down. - *As Executive Member for Children's Services and Lifelong Learning I have had a number of conversations with the Interim Assistant Director of Children's Support and Safeguarding in relation to this. The pandemic has affected much of what we can progress. We have gone forward with some of the offers and the team is going through what they can push forward. It is hoped that with the easing of lockdown things will begin to happen. The thing we always have to remember is that it is very much driven by what the young people want.*

The Interim Assistant Director, Children's Services and Safeguarding responded that she was aware of a couple she had passed on in Corporate Parenting Panel and agreed to obtain a copy of the list of offers and circulate it to those councillors on the list before the end of March 2021 to identify whether the offers were still live and whether there were further offers to add. She agreed to meet with the heads of service and convene a meeting with councillors to discuss the way forward (either progressing the offer or explaining the reasons why it could not be progressed).

We all have talents that can be utilised. We should be identifying the skills that young people have to guide them to where they can go. In terms of missing children, are we conducting interviews with them when they return and in the case of asylum seekers – do we interview them to find out where they come from and if they have any contacts and pick up on any trafficking issues? - *We have a statutory responsibility for every child in care and education to understand their needs and issues. Plans are reviewed and there are supervision systems for monitoring. In terms of missing children there is a statutory requirement that the police carry out a welfare call and that a return interview takes place. We will be addressing all of these areas. In relation to the return home interviews the take up is not as strong as it could be. There is a duty to assess unaccompanied asylum seekers. It addresses whether they already have family living in the UK and whether they have been trafficked. Not all of the children have arrived by airport – some arrive via Gordano and some via Kent. We work with them very closely. They have an allocated social worker in placement. We also investigate whether we can contact their family but in a safe way. Some are very vulnerable. We work with them to identify if they have been exploited. We have a small group of young people who have accessed emotional support and education areas. We need to make sure that we are going to be a good corporate parent to those young people.*

The Chairman thanked the Interim Assistant Director of Children's Support and Safeguarding for the report.

Concluded:

- (1) that the Panel receive and consider the updated information presented in the report;
- (2) that the Panel offers comments on both areas for improvement and areas of good performance;

(3) that the Panel raises the profile of corporate parenting responsibilities among elected members;

(4) that the Interim Assistant Director of Children's Support and Safeguarding to convene a meeting with councillors to provide an update on offers submitted in relation to Corporate Parenting.

**CAY
25 Executive Member Report - The 2021-2022 Budget - What does it Mean for
our Children? (Agenda item 10)**

The Executive Member for Children's Services and Lifelong Services provided members with a verbal report on the 2021/22 Budget covering what it meant for the children in North Somerset

Members noted that although there had not been a cut in funding in Children's Services nationally there was disappointment that children were not specifically mentioned in the chancellor's budget. The Executive Member explained that she would be focussing on where the additional £150k of funding that had been put into children's services this year was being spent. Much of the work was in connection with supporting all the work in the children's improvement plan. Members of the Executive had to identify a few short-term priorities for this money which was essentially a one-off uplift for this year.

The Mockingbird project was being progressed along with another constellation. It had been an incredibly successful programme offering a support network to foster carers.

Emphasis on fostering during the pandemic included streamlining the process of approving foster carers. The Authority had recruited additional foster carers. The priority was to work around children's centres. Funding was being provided to three children's centres to transform them into family hubs. Some of the money would go towards making the environment more attractive and accessible to families with older children and encourage them to engage with services there.

It was hoped there would be a relationship with a movement in Weston to create food clubs. Representatives from children's services had attended the steering group meeting. The concept was for the Authority to work with Fair Share and other agencies in North Somerset to locate food clubs in some of North Somerset's children's centres. Members were informed that the scheme worked well in Bristol, for example, addressing food poverty. But the main purpose was to address food waste. It provided opportunities for families to pay a small subscription fee of £3 per month to shop at food clubs buying a minimum of £20 worth of food and also quite often access free vegetables that might come from allotments that could not sell the excess.

Members noted the benefits of food clubs which included developing a community feeling around food, sharing recipes, talking about health and nutrition. Considering the issues around childhood obesity this was considered to be very important. The food club was just one area where the Authority was developing its children's centres into something wider which tied into other elements of what was

going on in the community and benefited all members of the community.

The main priorities identified had been addressing the barriers care leavers had to getting into education, employment training. A small amount of money had been set aside in the budget to put towards a dedicated programme of mentoring working very closely with the economy team. Conversations were ongoing around combining money available in children's services with money around skills and targeting care leavers in particular. There should be an opportunity to develop a dedicated programme of mentoring, careers advice and careers support for the young people of North Somerset.

This would tie into a lot of work around the skills agenda generally. A consultation would be taking place and it was hoped to carry out that initially with care leavers so that they had the first opportunity to respond and identify what skills they required to achieve their goals and what support they needed from North Somerset.

The Chairman thanked the Executive Member for Children's Services and Lifelong Learning for the report.

Concluded:

(1) that Panel members receive the verbal report of the Executive Member for Children's Services and Lifelong Learning;

(2) that Panel members contact the Executive Member for Children's Services and Lifelong Learning with any questions/comment in relation to the verbal report.

CAY 26 Month 9 Children's Services Budget Monitor (Agenda Item 11)

The Finance Business Partner (Adults and Children's Services) provided a brief summary of the main highlights of the report. Members were reassured that Month 9 was an improving position and it was hoped to get closer to a balanced budget at the end of the financial year. The savings were more than hoped for savings – efficiency savings, not cuts.

It was reported that there was growth in the Children's Services budget for next year. This included technical growth to reflect the demand in the area and the savings were things that the Authority wanted to do, for example, getting more appropriate local placements for looked after children. They would save the council money as well as being good for young people.

The Chairman thanked the Finance Business Partner (Adults and Children's Services) for the report.

Concluded:

(1) that panel members receive the 2020/21 forecast spend against budget for children's services and the risks and opportunities associated with the Medium-term position;

(2) that panel members forward any questions in relation to the Month 9 Children's

Services Budget Monitor to the Finance Business Partner (Adults and Children's Services)

CAY 27 Performance Monitoring Report (Agenda item 12)

The Interim Assistant Director, Children's Support and Safeguarding reported that the Performance Monitoring Report had been presented in a more simplified format than the previous panel meeting in October 2021.

Members were informed that there was anxiety about further demand. There was currently capacity but if more was required the Service would have to provide for that and were prepared for it, if necessary.

The Chairman thanked the Interim Assistant Director, Children's Support and Safeguarding for the report.

Concluded:

- (1) that the Panel receive and consider the report;
- (2) that the Panel members forward any questions to the the Interim Assistant Director, Children's Services and Safeguarding.

CAY 28 Panel's Work Plan (Agenda item 13)

Members considered the Panel's Work Plan.

Concluded:

- (1) that the Work Plan be received and any comments forwarded to the Democratic and Electoral Services Officer.

CAY 29 Appendix 1 – Members' Questions and Responses provided after the meeting in relation to Agenda Item 6

Q Could you provide the following:-

A) details of the services that you are providing

In April 2020, Specialist Children's Community Services transferred from Weston Area Health Trust and North Somerset Community Partnership to Sirona Care & Health and Avon & Wiltshire Mental Health Partnerships.

This included:

Sirona care & health

- Community Paediatrics
- Therapies (Speech and Language, Occupational Therapy, Physiotherapy)
- Continence Services
- Autism Pathway
- Safeguarding
- Children in care
- Neurodevelopmental services
- Lifetime
- School Nursing (due to be recommissioned by North Somerset Council)
- Health Visitors (due to be recommissioned by North Somerset Council)

AWP

- Children & Adolescent Mental Health Services (CAMHS)
- Urgent Care Assessment Team (UCAT)
- Kooth
- Off the Record (commissioned post service transfer and is currently being implemented with expected delivery from July 2021).
- Crisis Helpline – implemented during COVID-19. Helpline that can be accessed by children and young people, parents and carers, and professionals 24/7.
- 24/7 Crisis Service (commissioned post service transfer and is currently being implemented across BNSSG during 2021)

It is important to note that there were known issues relating to the CAMHS services prior to the service transfer with an inadequate rating from CQC in place. There were a number of Must Do's from CQC that the service was required to undertake. Once it transferred to AWP in April 2020, AWP embarked on a project to ensure that an action plan was in place to address the issues identified by CQC and to make the service 'safe'. This included:

- Risk and Incident training and processes
- Implement processes to ensure that children on the waiting list are prioritised based on need and contacted whilst they are waiting
- High risk - booked in for an immediate assessment
- Medium risk are placed on the waiting list with contact every 4 weeks to review the situations and risk.
- Low risk are placed on a waiting list and are contacted every 12-weeks

- Implementation of an electronic record system, transferring paper records and data validation
- Significant workforce issues remain and AWP have implemented a recruitment plan to incentivise people to work in North Somerset

Sirona, AWP and the CCG have met with North Somerset Parent Carers Working Together, twice during 2020/21. At the recent meeting, Sirona & AWP outlined the additional work that has been undertaken since the transfer of services and as a result of parent carer feedback. This included:

- Piloting drop in clinics for parents, carers and professionals with North Somerset Therapies service
- Setting up advice and guidance lines
- Commissioning Off the Record to provide sub CAMHS provision for children and young people
- Identifying service gaps in North Somerset
- Restructuring Sirona management to ensure a BNSSG focussed service
- Implementation of an electronic record system for CAMHS and Community Paediatrics services which was achieved in September 2020.
- New project taking place to ensure all children's community health services are on an electronic record system

B) What the measures of success are and performance against these measures

There are a number of local and national measures that the service must report against. This includes access to services, referrals data, and children and the time children and young people are waiting for services. The provider works towards the following KPIs (though to be aware, due to current pressures within services these are extremely challenging to meet)

- Emergency referrals within 24 hours
- Urgent referrals assessed within 1 week
- Routine referrals assessed within 4 weeks
- New people receiving treatment (At least 2 sessions)

There are challenges within the North Somerset services such as long waits to be seen which was inherited at transfer. This is partially due to the high numbers of referrals received coupled with the capacity of the service to undertake assessments. As noted above, AWP are working to recruit into vacancies and to build the resilience of the services as well as develop a pre CAMHS service (Off the Record). These capacity issues are having a significant impact on AWP's ability to achieve national and local measures.

Additionally, it is known that there is a gap in service provision in North Somerset which is currently being identified by Sirona and AWP and being discussed with the CCG. A plan will be developed to address the historical gaps in service to ensure that North Somerset services are developed and aligned to the offer in Bristol and South Gloucestershire.

As mentioned, AWP have now implemented an electronic record system for North Somerset CAMHS and undertaken a process of data validation. Now this process has been completed, the provider has developed a performance dashboard which will be shared with commissioners later this month.

C) If, for example, you are unable to meet a measure, eg waiting list for a CAHMS referral, what recourse is there?

The CCG has regular contract meetings with Sirona and AWP where performance issues and concerns are raised. Where there are significant concerns, the provider will identify mitigating actions that need to be put in place.

The CCG has a wider meeting with associate commissioners which now includes North Somerset Council and providers called 'Integrated Care Quality and Performance Meeting'. Any concerns that require escalation can be discussed at this meeting with partners to understand the problem in more detail and the plans to address.

Additionally, there are contract levers available to Commissioners called Contract Performance Notices. These can be used by Commissioners where performance continually drops below standards and this will trigger a joint meeting and action plan to be developed.

The CCG works closely with providers to develop actions to address issues which can negate the need to use CPNs and enables a more system approach to problems to take place.

Q I am going to go about this from a perspective more as a long term low level service user. When HOSP started building relationships with AWP about a year ago community services seemed to be a much lower level. A lot of people are very cautious about the digital approach, but as a service I found it really hard trying to access mental health resilience networks and seeing all these online materials available for other Local Authorities but not ourselves. I really Off The Record coming here particularly. They are very innovative and really good at improving reach. Just wanted to note how positive the direction of change seems to be.

Q We're talking about 'what you are doing to respond now' on websites I can see countless jobs hiring online, we've talked about things taking a year – if they're recruiting in April will these service providers not come quickly? The only other thing I was going to add is that I was a wellbeing chair of my university college when it had a suicide epidemic, we were able to transform things in York but a real learning point is that we need to be really careful about how we talk about youth suicides in public meetings in the future.

Off the Record has been commissioned to expand into North Somerset. The service has started to engage with local organisations and children and young people to help to tailor the offer to the North Somerset Population.

OTR have gone out to recruit with interviews now taking place with an expectation that individuals will start in post during May.

The next steps will be to meet with existing organisations such as CAMHS, YMCA, School Nurses, 65 High St to build up a network of services in the area in order to

understand the offer in North Somerset and how existing services can complement and flex with OTR. OTR will build on engagement with Children and Young people to begin talking about and promoting services.

Currently, the service is exploring how it will phase the roll out of the services and to look at what can be put in place to support with demand. It is expected that the phased implementation will start in June / July with some interventions beginning at this time. There is also a plan to deliver specific training to schools and other therapeutic groups during this time.

Q How is it possible for councillors to scrutinise the performance of Kooth, the online app for mental health.

I just wanted to know which partner organisation commissioned this and how is the service scrutinised? If there are audits could the CYPs Panel see these?

The CCG contract with Sirona to provide the Children's Community Health Partnership Contract which North Somerset services are now part of. As part of this contract, Sirona contract with AWP to provide CAMHS services and AWP hold a sub-contract with Kooth.

Kooth is an online mental wellbeing community with access being free, safe and anonymous support. Young people have the ability to chat with live counsellors as well as being able to access self-help information.

Kooth operates to a Quality Framework and shares detailed performance data on a quarterly basis. This includes a number of outcome measures and goals for children and young people that Kooth are then monitored against.