

## Education & Children's Services Scrutiny Sub-Committee

MINUTES of the OPEN section of the Education & Children's Services Scrutiny Sub-Committee held on Tuesday 4 October 2016 at 7.00 pm at Ground Floor Meeting Room G01B - 160 Tooley Street, London SE1 2QH

---

**PRESENT:** Councillor Jasmine Ali (Chair)  
Councillor James Okosun  
Councillor James Coldwell  
Councillor Lucas Green  
Councillor James Barber  
Councillor Jon Hartley  
Councillor Catherine Rose

### **OTHER MEMBERS PRESENT:**

**OFFICER  
SUPPORT:** Dr Kirsten Waters - Consultant in Public Health, Southwark Council  
Andrew Billington - Lead commissioner for Public Health commissioning Lambeth Council  
Aarti Gandesha , Manager , Healthwatch Southwark  
Alasdair Smith, Director , Children , Families and Adult Services  
Andrew Fowler, Head of Service, Children's and Adults' Services  
Jackie Cook, Head Of Social Work Improvement And Quality Assurance, Children's and Adults' Services  
Christine Liang, SGTO

### **1. APOLOGIES**

1.1 There were apologies for absence from Lynette O'Dwyer.

### **2. NOTIFICATION OF ANY ITEMS OF BUSINESS WHICH THE CHAIR DEEMS URGENT**

2.1 There were no urgent items of business.

### **3. DISCLOSURE OF INTERESTS AND DISPENSATIONS**

3.1 There were no disclosures of interests or dispensations.

### **4. MINUTES**

#### **RESOLVED:**

That the minutes of the meeting held on 6 July 2016 were agreed as a correct record.

### **5. SEXUAL HEALTH AND RELATIONSHIPS**

Dr Kirsten Waters, Consultant in Public Health, Southwark Council and Andrew Billington , Lead commissioner for Public Health commissioning, Lambeth Council presented the report on Sexual Health .

The following issues were raised in the discussion with the committee that followed:

- One of the aims is to improve access by young people.
- Commissioning will affect GPs, pharmacy and sexual health provision in school
- Commissioners work with Public Health to develop a quality framework, and looking at integrating with mental health, drug use, and also increasing for resilience in young people.
- A member spoke about a presentation from Rotherham Child Sexual Exploitation (CSE) abuse survivors which she had received. The young women had said that their sex education was about the mechanical aspects, such as fitting a condom, whereas their experience was much more about power relationships. She asked if these issues would be discussed in sex education. Kirsten spoke about CSE being located in Safeguarding. However the sexual educational programme does want to move more towards a relationship framework.
- Public Health officers were asked if there was reporting and training to work with perpetrators of harmful sexual behaviour. Officers responded that everyone will have safeguarding training, which is the core of the work. Referrals will go to MASH.
- Sexual Health in schools was asked about and the Sexual Health commissioner said that academies can opt out from teaching sexual education. He was asked why and responded that faith can be an issue. The consultant said, however , that relationships are good are with Southwark schools. Nina Dohel, Director of Education, also assured members that the council do have good relationships with our schools on this issue, including faith schools.

- There was a query on data and its interpretation: high attendance rates could be interpreted as a good thing or a poor thing. It is good to have accessible services, but also concern that this could be indicative of high infection rates. The consultant in public health said there are no particular numerical target, however young people are encouraged to test, and they would be worried if testing rates go down with infection rates rising rapidly. Positivity rates are higher in Brooke - which is good that we know we know Brooke are targeting the right cohort. The service also has high condom registrations, which is good.
- There was a concern about staffing figures at WUSH.

Aarti Gandesha, Manager, Healthwatch Southwark, presented the submission from Healthwatch. She said that this is a summary report produced, awaiting a fuller report in development. Sexual Health is a priority for Healthwatch. They engaged with 100 young people.

The concerns included:

- Boys accessing online pornography, which distorted relationship expectations.
- Young people recommended that sexual education be progressive - it should include the emotional elements from the beginning and first. This should include issues of morality and consent. Sexual education contained too much about biology. The young people wanted to learn more about healthy relationships, abuse, rape, homosexuality or asexuality. They wanted an expert - not a reluctant form tutor who is uncomfortable with the subject matter.
- Young people said that if parents are uncomfortable with sexual and relational matters then they would find it difficult to go to them.
- Brooke was good as not obvious that they were providing sexual health services.
- Confidentiality was a concern amongst young people
- The young people recommended outside experts. They also said that beliefs and culture were an issue and that either in the delivery of sexual education this needed to be left aside or integrated into the delivery.
- Sexual Health services needed to be non judgemental.

Healthwatch engaged with parents in July. Parents said that they wanted more awareness on sexual education and for the teaching to be both compulsory and be standardised. Parents said they needed help and recommended interactive sessions, rather than lessons.

A member asked about revenge porn and how this might be tackled. The Healthwatch manager said that young people did mention revenge porn, live streaming, snap chat. It is

a problem; and unsure how to tackle this. This also relates to mental health.

Healthwatch invited members to the launch event of the Sexual Health report in November.

Christine Liang, SGTO spoke about their initiative, Sex Positive, explaining that SGTO are developing work on this theme with a forum about 4 and 12 young people, mainly boys. This is partly about creating a forum for discussion, and possibly lobbying for improvements. Members welcomed this initiative and said that they would encourage their local TRAs to get involved.

## **6. REVIEW: LOCAL OFFER FOR CARE LEAVERS**

Alasdair Smith, Director , Children , Families and Adult Services; Andrew Fowler, Head of Service, Children's and Adults' Services and Jackie Cook, Head Of Social Work Improvement And Quality Assurance, Children's and Adults' Services presented.

A member asked about mental health. The Head of Social Work Improvement said there is a big need amongst Care Leavers, but often the counselling service is not meeting their needs because young people do not want to always talk to professionals , but often someone they have a relationship with. Loneliness is a big issue.

Officers were asked about reducing resources and rising need. The Director said providing services for Care Leavers is a statutory duty, but this is in the context of increasing duties and reducing funds. He added that poorly supported Care Leavers will cost us more. The service is attempting to use the resources more cleverly: providing a day for young people to attend the office and also being more flexible about seeing young people who turn up without an appointment.

A member raised services for unaccompanied asylum seekers and asked if they get a personal adviser. Officers said that presently they did, however the forthcoming Immigration Act may change this. There may be a funding cut off at 18 years old. A legal briefing on this issue is anticipated.

Officers handed round Speakerbox publications and the “11 Golden Rules for Professionals”, which were appreciate by the committee.

A member asked about participation in Speakerbox. There are some young people who want to come, others who prefer one to one discussions. It does take effort to get engagement. There is a wider engagement of about 140 young people who are engaged in some way.

Officers were asked about the volume of Care Leavers. Officers said that 80 and 90 young people graduated every year.

Officers were asked about outcomes and relationships. The earlier children entered care, generally the better outcome.

## **7. WORK PLAN**

This was noted.