



City of Westminster

Committee Agenda

Title: **Business and Children's Policy and Scrutiny Committee**

Meeting Date: **Wednesday 2nd February, 2022**

Time: **6.30 pm**

Venue: **Hybrid MS Teams and 18th Floor, Westminster City Hall, 64 Victoria Street, Westminster London SW1E 6QP**

Members:

Councillors:

Karen Scarborough
(Chairman)
Geoff Barraclough
Richard Elcho
Christabel Flight
Lindsey Hall
Aicha Less
Eoghain Murphy
Tim Roca
Mark Shearer

Elected Representatives
Ryan Nichol, Parent Governor

Co-opted Voting Representatives
Alix Ascough, CE Diocesan Rep
Marina Coleman, RC Diocesan Rep

Non-Voting Co-opted Representatives
Mark Hewitt, Headteacher, St John CE Primary School
Wasim Butt, Principal, Beachcroft AP Academy

Members of the public and press are welcome to attend the meeting and listen to the discussion of Part I of the Agenda.

[Link to live meeting](#)



This meeting will be livestreamed and recorded. To access the recording after the meeting, please revisit the link.



If you require any further information, please contact the Lead Scrutiny Advisor, Artemis Kassi.

E: akassi@westminster.gov.uk

Corporate Website: www.westminster.gov.uk

Note for Members: Members are reminded that Officer contacts are shown at the end of each report and Members are welcome to raise questions in advance of the meeting. With regard to item 2, guidance on declarations of interests is included in the Code of Governance; if Members and Officers have any particular questions, they should contact the Head of Governance and Councillor Liaison in advance of the meeting please.

AGENDA

PART 1 (IN PUBLIC)

1. MEMBERSHIP

To note any changes to the membership.

2. DECLARATIONS OF INTEREST

To receive declarations by Members and Officers of the existence and nature of any pecuniary interests or any other significant interest in matters on this agenda.

3. MINUTES

To approve the Minutes of the meeting held on Monday 29 November 2021.

(Pages 5 - 10)

4. CABINET MEMBER FOR BUSINESS, LICENSING AND PLANNING - PORTFOLIO UPDATE REPORT

To receive an update report from the Cabinet Member on current and forthcoming issues in this portfolio.

(Pages 11 - 16)

5. CABINET MEMBER FOR YOUNG PEOPLE AND LEARNING - PORTFOLIO UPDATE REPORT

To receive an update report from the Cabinet Member on current and forthcoming issues in this portfolio.

(Pages 17 - 24)

6. REPORTS OF ANY URGENT SAFEGUARDING ISSUES

To receive a verbal update of any urgent safeguarding issues (if any).

7. SCHOOL UNIFORM REPORT

To receive an update from the School Standards team on how it intends to work with Westminster schools to lower the cost of school uniform, as per the Education (Guidance about the Costs of School Uniforms) Act 2021.

(Pages 25 - 28)

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| <p>8. SCHOOL PERFORMANCE STRATEGY 2021</p> <p>To review the School Performance Strategy 2021.</p> | <p>(Pages 29 - 46)</p> |
| <p>9. MARBLE ARCH MOUND INTERNAL REVIEW UPDATE</p> <p>To receive an update from the Chief Executive on progress since the extraordinary meeting of the Committee on 27 October 2021 to scrutinise the Marble Arch Mound.</p> | |
| <p>10. DRAFT REPORT OF THE CHILDREN AND YOUNG PEOPLE'S MENTAL HEALTH TASK GROUP</p> <p>To consider the draft report and recommendations of the Children and Young People's Mental Health task group.</p> | <p>(Pages 47 - 96)</p> |
| <p>11. WORK PROGRAMME</p> <p>To consider the Committee's Work Programme for the remainder of the current municipal year.</p> | <p>(Pages 97 -106)</p> |
| <p>12. ANY OTHER BUSINESS</p> <p>To consider any other business which the Chair considers urgent.</p> | |

Stuart Love
Chief Executive
25 January 2021

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CITY OF WESTMINSTER

MINUTES

**Business and Children's
POLICY and SCRUTINY COMMITTEE
29 November 2021**

MINUTES OF PROCEEDINGS

Minutes of the meeting of the **Business and Children's Policy and Scrutiny Committee** held virtually on **29th November 2021** at **6.30pm**.

Hybrid meeting via Microsoft Teams and Rooms 18.01-03, 18th floor, 64 Victoria Street, London, SW1E 6QP.

Members Present: Councillors Karen Scarborough (Chairman), Pancho Lewis, Christabel Flight, Paul Dimoldenberg, Mark Shearer, Eoghain Murphy and Aicha Less

Co-Opted Members Present: Marina Coleman, Wasim Butt,

Also present: Councillor Timothy Barnes (Cabinet Member for Young People and Learning), Councillor Matthew Green (Cabinet Member for Business, Licensing and Planning), Sarah Newman (Executive Bi-Borough Director for Children's Services), Debbie Jackson (Executive Director of Growth, Planning and Housing), Gerald Almeroth (Executive Director of Finance and Resources) Raj Mistry (Executive Director of Environment and City Management, Ruchi Chakravarty (Head of Place Shaping) and Veronica Pinto (Place Shaping Lead), Artemis Kassi (Lead Scrutiny Advisor), and Lewis Aaltonen (Policy and Scrutiny Co-Ordinator).

1. MEMBERSHIP

- 1.1 Councillor Pancho Lewis and Councillor Paul Dimoldenberg.
- 1.2 Councillor Geoff Barraclough was unable to attend and sent apologies. Councillor Tim Rocca was unable to attend and sent apologies. Alix Ascough (Co-opted Representative) was unable to attend and sent apologies. Mark Hewitt (St James and St John CE Primary School) was unable to attend and sent apologies.

2. DECLARATIONS OF INTEREST

2.1 There were no declarations of interest.

3. MINUTES

3.1 The Committee approved the minutes from the previous meeting held on 27th October 2021.

3.2 There were no reports of any urgent safeguarding issues.

4. UPDATE FROM THE CABINET MEMBER FOR YOUNG PEOPLE AND LEARNING

4.1 The Committee received a written update from the Cabinet Member for Young People and Learning who responded to questions on the following topics:

- The closure of the Sir Simon Milton Westminster – UTC. Members queried how it had been able to reach its current status in just five years given the cost to develop the site. Members also sought clarification with regards to the Council's level of oversight and involvement. Members suggested the site be used as a 19+ trade skills educational establishment. The Committee queried if any lessons learned activities had been carried out to ensure the same mistakes were not made by future providers.
- Members sought an update on the Rainbow Family Centre and how the Council ensured that those children's educational needs were being prioritised. Members also queried the outcomes of the CAMHS work and timeline for completion.
- Members raised questions regarding Covid-19 and the Omicron variant, seeking answers on how the council would be ensuring that enough tests were available for children and staff for testing in schools. The Committee also queried the Council's position on wearing face masks in classrooms.
- Members asked about the Council's plans for the Holiday Activity and Food Fund (HAF) for 2022.
- The Committee queried the developments in tackling the Primary school capacity issues.
- The Committee sought clarification on the SEND provision for children with Autism and whether it included both secondary and primary education.
- The Committee also sought the Cabinet Members' thoughts on allowing young people to develop their own submissions rather than responding to a consultation exercise.

5. UPDATE FROM THE CABINET MEMBER FOR BUSINESS, LICENSING AND PLANNING

5.1 The Committee received a written update from the Cabinet Member for Business, Licensing and Planning who responded to questions on the following topics:

- The Committee sought an update from the Cabinet Member on Business Rates and the recovery of the West End, including any stats for Oxford Street footfall.
- Members sought an update on the Holocaust Memorial and the decision from the courts. Members also raised concerns regarding the Gambling Licence policy with respect of the Hippodrome and whether it would set a precedent.
- Members discussed Open Spaces, Greener Places, and queried if Barkour Park in the Paddington Rec was a dog park. Members also welcomed the new funding for the Adventure Playground in St John's Wood. Members queried whether the funding for Lisson Green Estate included a provision for lighting.
- Members discussed Westminster Wheels, welcoming its achievement and suggested that the remit be expanded to teach young people how to drive to further employment opportunities. Members also suggested a similar scheme for Technology, tech equipment and electrical goods.
- Members raised a query regarding Place Shaping, specifically the vision for the flyover on Edgware Road.

6. OXFORD STREET DISTRICT PROGRAMME REPORT

6.1 The Committee received a written report and presentation on the Council's progress regarding the temporary Oxford Street public realm works. The report provided an update on the review of the OSD programme to date and the proposed way forward for projects. Discussions on the report and questions from Members included:

- The Committee queried the finances and costs that had been spent on the Oxford Street District programme to date, including how much of the £150 million earmarked for the programme had been spent.
- Members welcomed the Soho Photography Quarter, however, queried why it was over budget. Members also sought clarification on how much of the programme was under the Council's control and what proportion was controlled by the private sector. Members were also keen to understand how these relationships worked and the balance between the partnerships.
- Members sought confirmation of the programme's ability to deliver the planned projects. Members also sought clarification on whether the Marble Arch area of Oxford Street would become part of the wider programme.

- Members queried employment stats across the programme. Members also suggested crèche facilities for certain demographics, to improve employment and retention rates.
- Members queried how the recommendations that were made at the previous meeting would be incorporated into the programme going forward. Members also queried the Council's plans and steps for filling empty shops.
- Members praised the work on Bond Street and suggested a 'hop on and off' electrical bus for the Oxford Steet District.
- Members discussed congestion charge proposals for Sunday shopping and lobbying the Mayor to amend hours. Members discussed the project management leadership skills for delivering a successful programme.
- Members sought clarification with regards to the Piazzas and whether they were included in the Oxford Street District Programme.
- Members queried how adequate public convenience facilities would feature in the plans for the Oxford Street District Programme.
- Members recommended that the programme should recognise that being upfront and communicating challenges was vital for engagement with all stakeholders.

6.2 ACTIONS

The Committee requested:

- The recommendations that were made at the previous meeting regarding the Marble Arch Mound would be incorporated in the programme going forward.
- Review public conveniences or sign posting exercise.

7. CYPMH SCRUTINY TASK GROUP

7.1 The Committee received an interim report and recommendations on improving the emotional well-being and mental health of children and young people in Westminster. The Chairman introduced the report and the task group members. Councillors Tim Roca, Aicha Less and Christabel Flight provided comments. The Cabinet Member for Children and Young People, and Sarah Newman, commented on the report. Discussions on the report and questions from Members included:

- Members queried moving away from the words "mental health" as they felt it could be stigmatising. Members also felt that CAMHS could also benefit from a name change.
- Members discussed the link between children's mental health and being outdoors, physical activities and play.
- Members discussed the 'Shout 45258' mobile phone apps from the Royal Foundation. The App is 24/7 and allows young people to access and SMS messages to support their mental health needs.
- Members thanked Artemis Kassi and the Task Group members for their hard work.

7.2 ACTIONS

- The Committee requested that a communications plan be produced to ensure the work, messages and recommendations of the Task Group were effectively communicated.

8. COMMITTEE WORK PROGRAMME

- 8.1 The Committee discussed its work programme for the remainder of the municipal year. It was agreed that the main agenda item for the next Policy and Scrutiny meeting on the 2nd February 2022 would be the final report for the Children and Young People Mental Health in Westminster Task Group report.
- 8.2 The Committee agreed that the other substantive items would be the school performance strategy and school uniform costs.

9. TERMINATION OF MEETING

- 9.1 The meeting ended at 9.24pm.

CHAIRMAN _____

DATE _____

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City of Westminster

Business and Children's Policy Scrutiny Committee

Date: Wednesday 2 February 2022

Portfolio: Business, Licensing and Planning

The Report Of: Councillor Matthew Green, Cabinet Member for Business, Licensing and Planning

Report Author and Contact Details: Patrick Ryan, Portfolio Advisor
pryan@westminster.gov.uk

1. Thriving Economy

West End Recovery- West End Pop-up Project

- 1.1 Our Pop-up & Activations programme has delivered 16 activations in the West End using creative installations, displaying local creative talent, working with brands and showcasing innovative start-ups to provide immediate support for high streets. This includes the activation of 7 units in Piccadilly with creative and cultural pop-ups. Our flagship pop-up concept store, the Regent Street Edit, showcased seven ethical and sustainable emerging fashion and wellness brands until 24 December. The business support team is now working with some of the occupiers on possible scale-up opportunities into long-term units in the West End.

The Collect at 500 Oxford Street launched on 26 November. The highly curated space showcases the work of artist Carson Parkin and a mix of ten independent brands and designers, showcasing their work which centres on themes that are on top of the retail agenda. The current NNDR Localism relief scheme to pop-up ventures has been extended until the 31st of March 2022 in view of property owners continued willingness to engage in the programme and provide a rent-free period. We are working with Groundwork and the Crown Estate to activate several empty units on South Molton Street, introducing The Good Store (a large department store with a focus on sustainability and lifestyle). Groundwork will be working with the Westminster Employment Service to support residents into employment opportunities in Groundwork's core retail team and in-store.

West End Recovery - Westminster Investment Service

- 1.2 The Westminster Investment Service continues to attract and welcome new businesses into the city and supports established businesses to grow. Since launching in July 2021, the Investment Service has received 17 enquiries from businesses seeking space (with more than 165,000 sq ft being sought) and is providing support to these companies seeking to invest. Proposals are in development for a new Investment Portal to launch in 2022 that will better profile Westminster's strengths and support the attraction of new employers. The Westminster Investment Service has also been involved with developing the West End Futures programme. The programme is a partnership initiative to assist the recovery of the West-End after the pandemic, and to ensure its continued success.

West End Recovery- Westminster Reveals

- 1.3 The inaugural Inside Out festival, a key highlight of the Westminster Reveals campaign, concluded in November. It included a series of light installations on the streets of the West End, including a projection onto Marble Arch. It also featured collaborations with over 30 partners

with a range of content that attracted thousands of people into Westminster throughout the Summer and the Autumn months. Plans are underway to build on the success of the campaign.

West End Recovery- Future Occupiers

- 1.4 West End Future Occupiers is a partnership programme seeking to attract and support international brands to invest in the West End. It is being delivered by London and Partners and supported by the council, New West End Company and Heart of London Business Alliance and property owners. In December 2021, the programme had 71 Active Projects and made 30 direct introductions between potential future occupiers and property owners.

West End Recovery – Marble Arch Mound

- 1.5 The Marble Arch Mound temporary attraction closed on 9 January 2022, with over 250,000 people having visited the Mound. This has supported recovery in this part of London. The process of removing the structure has commenced and requires a considered approach to dismantling. It is anticipated this will take around 4 months to fully complete.

West End Recovery – Oxford Street District

- 1.6 The Oxford Street District (OSD) programme underwent a review between August and December 2021 to establish a way forward for projects by measuring them against key tests. This will develop a more defined approach for delivering projects, including robust governance. More details can be found on the council [website](#).

There are several current project activities:

- Temporary interventions along Oxford Street were introduced in early 2021. These include footway widening, bespoke modular seating, planting and playful gobo lighting projections. The interventions allow people to rest along the high street and increased circulation space.
- The new Soho Photography Quarter is under construction with completion planned by the end of April 2022. The scheme will deliver a more accessible and pedestrian-friendly space.
- The Council is working in partnership with The Portman Estate and the Baker Street Quarter Partnership on engaging with stakeholders on proposals to improve Manchester Square in Marylebone. Proposals for the Manchester Square area will create a new co-funded culture-focused public space, improve pedestrian safety and introduce a dedicated eastbound cycle lane on the northern side of the square. The proposals received Cabinet Member approval in December 2021 to progress to construction.

West End Recovery – Westminster Markets

- 1.7 There are now five markets that have wi-fi installed. Digital Training has commenced which focuses on delivering additional business and digital skills. Westminster is raising the visibility of its markets through a variety of pop-up events, and the Council is planning future night markets. Future events will look to encourage new start-up businesses, young traders under 30 and green initiatives. In December, Christmas Markets took place across Westminster along with ceremonies for the switching on of Christmas lights. Rupert Street Market is open following a period of no traders for two years during the pandemic. The Markets team is continuing to improve sustainability across market sites. Caulibox (the reusable lunch box scheme which reduces single use plastic) has been expanded to include Strutton Ground Market and the Council have implemented a waste management strategy on Church Street.

At Tachbrook Market, Westminster Wheels has partnered with the Dr Bike Service and have a joint stall every Saturday. This allows residents to book in a bike service via Westminster Wheels and receive a free check from Dr Bike. On 31 January, the Markets Development team will host a Night Market at Newport Place in Chinatown. There will be capacity for 10 – 14 stalls predominantly filled by local businesses. The event will be broadcast in China and the UK as part of London's Chinese New Year celebrations.

Covid-19 grant programmes

- 1.8 An omicron ratepayer scheme was announced over the Christmas break and will open in January 2022. The scheme will focus on supporting those most impacted by the variant in the hospitality and leisure sectors. The Council has applied the new levels of Expanded Retail relief for the 2021/22 financial year to all those eligible. We have made 492 Discretionary Grant Fund (DGF) awards of £10,000 from our allocation of £4.92m for the first round of discretionary grants from Central Government. Through the second round of the additional restrictions grant (ARG) funding, we have approved and made 949 grant awards to businesses and supported 10 Business Improvement Districts with their quarter one 2021/22 operating costs. The Council secured a further £9.1m in additional funding after spending the original allocation by the end of July 2021 deadline. There is £5,295,529.22 of the additional funding remaining, which must be spent by 31 March 2022. We have designed programmes to spend these funds.

Business support proposals for ARG

- 1.9 The Council is investing:
- £500k of the ARG allocation to support 1,000 small businesses to deliver a Green Business Audit in line with guidance from Chartered Institution of Building Services Engineers and the Carbon Trust.
 - £700k of the ARG allocation to the delivery of large-scale Cleaner & Greener Recovery Programmes of support for Westminster businesses.
 - £1m of the ARG allocation to essential capacity building to develop the necessary infrastructure to help address the hospitality recruitment crisis.
 - To deliver start-up to scale-up courses to help start-ups with high growth potential harness the resilience required to survive and adapt their business to thrive.
 - To support small businesses through the extension of our Pop-ups & Activations Programme.

2. Training and Employment

Westminster Wheels

- 2.1 In the past year, Westminster Wheels has trained and employed over 25 residents as bike mechanics. The project is recruiting for our sixth cohort of trainees that will start their City and Guilds Bike Mechanic training in late January. Through our partnership with Veolia and the Met Police, our team has diverted over 8 tonnes of old or disused bikes from the waste stream. The project also donates bikes to community organisations and charities. As part of our Christmas campaign, Westminster Wheels donated 12 adult and 12 kids bikes to a Westminster charity. To date, the project has donated over 70 bikes to the community. The service is exploring the opportunity to be part of the Pop-Up at South Molton Street. Given the location and wider concept, this would involve Wheels having a franchise offer at the Pop-Up, showcasing the quality, higher cost reused bikes for sale. A decision will be made on this in January.

Westminster Adult Education Service (WAES)

- 2.2 The Service has recently completed the annual Self-Assessment Report (SAR) for the 2020-21 academic year. WAES has self-assessed overall as 'Good' with some 'Outstanding' aspects. The SAR will be uploaded to the Ofsted portal at the end of this month and will form part of the initial desktop review by Ofsted prior to any inspection.

WAES have produced their [final Impact Report](#) for the 2020/21 academic year. The report provides a solid foundation for WAES to continue their work with learners and partners in the coming academic year.

WAES submitted a bid for a Digital Hub in September 2021 and has been notified that the bid is being recommended for approval to grant stage. This will be a public document. The Digital Hub will accelerate the work started in supporting residents to gain skills in digital careers through programmes like the Amazon Web Services course. WAES has established a programme of education and training support for Afghan evacuees that will continue from

January 2022 until the end of the academic year. Over 100 Afghans have participated and benefited from the WAES programmes to date.

Westminster Employment Service

- 2.3** The Council has created over 100 new job opportunities for unemployed 16–24-year-olds with local employers through the Kickstart scheme. Since the first cohort of internal Kickstarters commenced their placements with the council in June 2021, 25 Westminster residents have joined the Council’s workforce via Kickstart. Westminster residents account for all new joiners to the Westminster’s workforce via Kickstart. In addition, 96% of young people joining the Council via Kickstart identify as BAME, 12% have declared a disability, 12% are young mothers and 12% are care leavers. 11 have progressed from their Kickstart roles into roles with the Council and 1 with a Council supplier. Westminster Employment Service will continue to support those that joined the Council and do not find a job immediately after their employment ends for a period of up to 12 months.

3. Place Shaping

Strand Aldwych

- 3.1** Highway, footway and junction works are continuing. All construction is due to be completed by December 2022. Work continues to budget with total scheme spend to the end of period 9 on the Aldwych 2-way and Strand Meanwhile elements of the scheme at £11.271million. The service is developing the Management Model and an integrated partner approach is expected to be in place on completion of the works in December 2022.

Harrow Road

- 3.2** Following the completion of the Harrow Road Place Plan in August 2021, we are progressing the design and planning at Harrow Road and Westbourne Green as well as the Maida Hill Market. The Place Shaping team secured £900,000 towards the delivery of Harrow Road Place Plan from the Greater London Authority’s Good Growth Fund (GGF) in 2020. This funding is matched by the Council to provide a construction budget of £1.8m. £100,000 of revenue funding has been secured from the ‘New Homes Bonus’ to contribute towards associated uplifts in management/maintenance costs. £150,000 towards ‘Harrow Road Open Space’ has been secured from a funding partner to contribute towards delivery of this aspect of the project.

Soho

- 3.3** Our Vision for Soho aims to develop a positive vision statement, set of objectives, and projects that will address current and emerging pressures facing Soho. The Vision for Soho will sit alongside the Soho Neighbourhood Plan to provide a comprehensive plan for Soho’s future. £1.8 million has been ringfenced to support the delivery of Vision for Soho projects over the course of 2022/23. A legal situation has arisen which may impact the programme timeline.

Covent Garden

- 3.4** Officers have been working with resident groups and landowners in the Covent Garden area to set out a framework and design guidance for permanent public realm interventions around Covent Garden, Catherine Street area, St Martin’s Lane and Long Acre. The team has engaged with landowners and amenity societies in the area in developing the framework. The document is in its final stages of review across various stakeholder groups and will be published shortly.

4. Vibrant Communities

Gambling Licensing Policy

- 4.1** To meet the statutory requirement under the Gambling Act 2005, the Council was required to review, adopt and formally publish its policy before 30 January 2022. To undertake detailed consultation on the proposed new Gambling Policy, the current policy has been readopted to take effect from 31 January 2022. The Council undertook public consultation on the proposed new Gambling Policy between September and December 2021 and received 22 responses. The

responses are being considered and engagement with the respondents continues. The new Gambling Policy will be put forward to Full Council for adoption in the first quarter of 2022 with a view to implementing the new Policy in April.

Environmental Supplementary Planning Document (ESPD)

- 4.2 The ESPD is on track for adoption in early February 2022. The service is finalising the document to take into account views expressed in the consultation and the new guidance published by the GLA. They are also ensuring the ESPD aligns with Council strategies and documents. The final Environment SPD will be accompanied by a statement explaining how the comments received during the consultation were considered in the final drafting of the document. We will also be developing a series of how-to guides to make it easier for citizens to retrofit listed residential buildings. We will also be developing a series of how-to guides to make it easier for citizens to retrofit listed residential buildings.

4.3 Planning

The application determination performance of the Town Planning Service continues to exceed the level required of the Department for Levelling Up and Communities.

Percentage of major planning applications determined within 13 weeks:

- Target: 70%
- Result: **86% - Exceeding Target**

Percentage of non-major planning applications determined within 8 weeks:

- Target: 73%
- Result: **77% - Exceeding target**

Holocaust Memorial – Victoria Tower Gardens

- 4.4 A claim was made to challenge this planning permission. On 28 October 2021, the High Court granted permission to pursue the claim. The case will now proceed to a substantive hearing scheduled for two days on 22 and 23 February 2022.

5. Cabinet Member Key Decisions

Since the last Business and Children's Policy and Scrutiny Committee, I have formally approved the following key decisions:

- Article 4 Adoption (CAZ)
- Local Development Scheme
- Queen's Park Neighbourhood Plan
- Manchester Square Public Realm Scheme
- Heart of London Business Alliance Occupier Business Improvement District Business Plan 2022 – 2027
- Film classification
- Revocation of supplementary planning documents and guidance

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City of Westminster

Business and Children's Policy and Scrutiny Committee

Date: 2nd February 2022

Report of: Councillor Timothy Barnes

Portfolio: Cabinet Member for Young People and Learning

Report Author: Patrick Ryan, Portfolio Advisor

Contact Details: pryan@westminster.gov.uk

1. Child and Adolescent Mental Health

The Westminster Child and Adolescent Mental Health Service (CAMHS), which is commissioned by Health partners and delivered by Central and North West London NHS Foundation Trust (CNWL), offers assessment, diagnosis, treatment and support for young people who are experiencing problems with their emotions, behaviour or mental health. The service are now reporting an increase in the demand and the complexity of presentations and needs as a result of the pandemic. This increased complexity requires additional clinical capacity and therefore places strains across the local mental health system in Westminster.

To address this, the CAMHS team have recruited agency staff to provide additional sessions and have introduced weekend clinics. In addition, the Clinical Commissioning Group (CCG) and CNWL have commissioned Healios to provide assessments for neurodevelopmental disorders, and anticipate that they will begin to take cases from February.

The Council continues to support a robust range of local early intervention emotional wellbeing and mental health services to strengthen the whole school and community-based offer. These largely provide support below that of the Specialist CAMHS threshold and deliver services in places where children and young people are comfortable accessing support. Local services include NHS England funded Mental Health Support Teams in 43 schools providing one-to-one therapeutic support; psychoeducation groups for pupils, and various sessions for parents; online counselling and information service for children and young people aged 11-25; and a Youth Mental Health Worker service embedded in our five Westminster Youth Hubs. We have continued to train and upskill our partnership workforce so that they are better able and more confident in supporting local children and young people and we have continued to communicate and promote our local offer to young people.

2. Employability, mental health and emotional wellbeing support for 16-25-year-olds

To support employability for young people in the borough, the council are launching an exciting new integrated Mental Health and Wellbeing and Employment offer for 16-25 year olds. The Bridging the Gap (BTG) pilot will run for two years and will be centred at a Young Adults' Hub. This holistic wraparound support, co-located and easily accessible in the same place, will be key to helping young people to enter employment and make a successful transition to adulthood. The service will be launched in a graduated approach, starting in February 2022, and will be fully launched by 1st May 2022.

We have now formally secured internal and external partner commitment to resourcing the hub, offering employment coaching, housing support, sexual health and substance misuse services, and clinical therapeutic input. A suitable site has been identified and we are undertaking viability checks with Corporate Property.

3. Holiday Activity and Food (HAF) programme

This year, as part of the Department of Education's Holiday Activities and Food Fund we have supported over 2,500 disadvantaged children and young people to access additional enriching activities and healthy meals over the holidays. These activities have been delivered by over 30 local providers and partner organisations to provide a hugely varied and creative offer, including indoor and outdoor sport and recreation, nature and conservation, arts and culture. Targeted programmes for children with special needs and disabilities had good take-up.

The feedback we have received has been overwhelmingly positive. Parents have reported that the provision over the last eighteen months has changed the lives of their children, boosted their confidence and improved their social skills, emotional intelligence, fitness and well-being. Likewise, the overwhelming response from young people was that they had fun.

Funding of £730,000 has now been confirmed for the Holiday Activity and Food Fund for 2022. The Council will continue to work with partners to arrange and deliver a variety of enriching activities for those children most in need.

4. School attendance and Elective Home Education (EHE)

School attendance is currently above the national average. For the second half of the Autumn term, overall attendance in Westminster Secondary schools was 89.7% which is 1.6% above the national average of 88.1%, and Primary school attendance was 92.0% which is 0.6% above national average of 91.4%.

Since the start of the pandemic, the number of families registered as Home Educating has increased substantially, from 111 families in 2019, to 165 families in 2020 and a further increase to 176 families in 2021. There are a variety of reasons for the increased number of families choosing to educate their children at home; including hesitancy in returning to school due to clinical vulnerability of the child or family members; fear of contracting the virus; and families having adapted well to the experience of home education during the school closures, and preferring this to mainstream schooling.

We have a robust Elective Home Education (EHE) policy and practice to ensure that all children within the borough are in a safe and suitable learning environment, whether they are in a school or another setting. Within 8-12 weeks of a registration of Home Educating, our elective home assessors visit the home for an initial assessment to ensure that we are satisfied that the child is in receipt of a suitable education and is in a safe environment. Any resulting action around non-compliance with our Home Education standards (as outlined in our EHE Policy), is also actioned within this timeframe.

5. New 0-5 Integrated Health Visiting and Early Years Service

Children's Services has worked closely with practitioners and residents to develop a graduated offer to support early years, enabling investment in communities and families with the highest level of needs. A new integrated Health Visiting and Early Help service, based on shared management and co-location, is due to launch in April 2022. This team will jointly deliver the 0-5 Healthy Child Programme as well as providing whole-family targeted support. The service seeks to strengthen our offer to those the most in need, improve school readiness and identify needs sooner.

The new delivery model will deliver efficiencies of over £2 million over 5 years, equating to an average saving of £410,000 per year.

6. Primary School Capacity and the proposed amalgamation of Westminster Cathedral and St Vincent de Paul Roman Catholic Primary Schools

Following an informal consultation stage led by both governing bodies, the council has now issued a statutory notice proposing to amalgamate two schools in South Westminster (Westminster Cathedral and St Vincent de Paul RC Primaries). If implemented, this amalgamation will remove 30 school places per year. All stakeholders have the opportunity to make representations throughout a four-week consultation period from the 6th January to 3rd February 2022.

Based on the October 2021 school census, the current surplus of primary school places across Westminster stands at 22%. The latest school rolls are shown at the end of the report.

7. Update on the closure of Sir Simon Milton Westminster University Technical College (UTC) and the future of the site

Due to continued low pupil numbers, the Department for Education (DfE) has taken the decision to close the UTC in August 2022, following the outcome of a listening period which ran from 15th September to 15th October 2021. This provided an opportunity for students, parents, staff and stakeholders to give their views, which were fully considered before a final decision was taken. Our priority now is to continue to support Year 11 and Year 13 students in planning the next stage of their education once they complete their studies at the UTC this summer.

The DfE has confirmed that the UTC building and facilities will remain in educational use. After an in-depth analysis and risk assessment by the Department of Education, Ada, the National College for Digital Skills, will move into the site. Ada will be a fantastic addition to the learning options for young people in Westminster and will build on many of the aspirations for the UTC, including the focus on skills and engineering-thinking, as well as making great use of the excellent physical infrastructure that was invested in. We are confident that this college will benefit many young people in Westminster for years to come.

8. COVID-19 Management in Schools

In light of the new Omicron variant, there has been a significant rise in positive cases across both Primary and Secondary schools, with positive cases peaking in the weeks before the winter holiday (week commencing 13th December, there were 95 cases among pupils and staff across 24 settings in Westminster). Upon return for the spring term, we have seen a decrease in cases compared to the end of last year with 61 cases among staff and pupils across 15 settings in the week commencing 3rd January 2022.

The Government has introduced new guidance for secondary schools for the Spring Term. As of 4th January 2022 it is recommended that secondary school pupils wear face coverings in classrooms. Tests, personal protective equipment (PPE) and funding to support school staff will be provided as before. The Council will continue to work closely with schools to monitor cases on a weekly basis and support them with required adjustments. Outbreak management plans remain in place and schools are receiving bespoke advice in line with their unique circumstances. Schools are maintaining risk assessments and contingency arrangements are in place for remote and online learning if required.

9. The 12-15 Vaccination Programme in Schools

The vaccination programme hosted by schools (including independent schools) is now continuing into the Spring Term to deliver second doses as well as maintaining the offer to children where this was not taken up in the Autumn Term. To date, all schools, both state and independent have been visited by the Immunisation team. There was an extended offer for children to access the vaccine at various vaccination centres over the school holiday period. Health colleagues are offering schools an additional visit, between January – March 2022. There is a continued focus on the 12+ Clinically Extremely Vulnerable cohort (such as children in special schools).

10. Continued Support to Afghan Children and Families

We continue to provide a high level of support to the 356 Afghan children and their 157 respective families who are currently being supported in the Bridging Hotel in Westminster. The majority of under-fives have had a full health assessment and all children of school age are being seen by school nurses for assessment. All school aged children have been enrolled in school, and schools are reporting very good attendance in the main. Schools are meeting regularly with the Head of Service and the Multi Agency Safeguarding Hub (MASH) to discuss emerging needs and support. We continue to provide a range of extra- curricular enrichment activities, including English for Speakers of Other Languages (ESOL) and family-based activities.

There has been a well-coordinated, multi-disciplinary response to supporting the Afghan Evacuees and there are effective measures in place to ensure safeguarding concerns are being addressed in a timely manner. All families have been assessed by our Early Help partners, any safeguarding concerns have been addressed through the regular referral channels, including referrals to Early Help, Family Lives, assessment team, CAMHS), Short Breaks (for children and families with disabilities) and Adult Services.

11. Cabinet Member Key Decisions

Since the last Business and Children's Policy and Scrutiny Committee, I have formally approved the following key decisions:

- Pre-Birth to 5 Pathway;
- Special Educational Needs and Disabilities Passenger Transport (Taxis), Travel Care Services Framework for Vulnerable Children, Young People and Adults; and
- Outcome of the informal consultation on a proposal to amalgamate Westminster Cathedral and St Vincent De Paul Roman Catholic Primary Schools and a recommendation to the Council to publish a statutory notice about the proposal.

12. Appendices

Appendix One: School Rolls Autumn Term Census 2021

Appendix One

School Rolls - Autumn Term Census 2021

School Name	Phase	Published admission number	Autumn 2021 roll	Number of spare places	% Space capacity
Barrow Hill Junior School	Primary	240	230	10.0	4.2%
Edward Wilson Primary School	Primary	392	304	88.0	22.4%
Essendine Primary School	Primary	420	335	85.0	20.2%
George Eliot Primary School	Primary	420	233	187.0	44.5%
Hallfield Primary School	Primary	420	343	77.0	18.3%
Robinsfield Infant School	Primary	180	150	30.0	16.7%
Queen's Park Primary School	Primary	294	285	9.0	3.1%
All Souls CofE Primary School	Primary	210	183	27.0	12.9%
Burdett-Coutts and Townshend Foundation CofE Primary School	Primary	234	122	112.0	47.9%
Hampden Gurney CofE Primary School	Primary	210	197	13.0	6.2%
Our Lady of Dolours Catholic Primary	Primary	315	150	165.0	52.4%
St Augustines Federated Schools: CofE Primary School	Primary	210	198	12.0	5.7%
St Barnabas' CofE Primary School	Primary	161	115	46.0	28.6%
St Clement Danes CofE Primary School	Primary	210	200	10.0	4.8%
St Edward's Catholic Primary School	Primary	330	220	110.0	33.3%
St Gabriel's CofE Primary School	Primary	210	174	36.0	17.1%
St George's Hanover Square CofE Primary School	Primary	210	99	111.0	52.9%
St John's Church of England Primary School	Primary	164	135	29.0	17.7%
St James & St John Church of England Primary School	Primary	175	175	0.0	0.0%
St Joseph's RC Primary School	Primary	294	239	55.0	18.7%
St Luke's CofE Primary School	Primary	210	167	43.0	20.5%
St Mary Magdalene CofE Primary School	Primary	210	148	62.0	29.5%
St Mary's Bryanston Square CofE School	Primary	210	152	58.0	27.6%
St. Mary of the Angels Catholic Primary School	Primary	294	201	93.0	31.6%
St Matthew's School, Westminster	Primary	210	156	54.0	25.7%
St Peter's CofE School	Primary	210	198	12.0	5.7%
St Peter's Eaton Square CofE Primary School	Primary	340	285	55.0	16.2%
St Saviour's CofE Primary School	Primary	210	181	29.0	13.8%
St Stephen's CofE Primary School	Primary	210	103	107.0	51.0%
St Vincent's Catholic Primary School	Primary	210	202	8.0	3.8%
St Vincent De Paul Catholic Primary School	Primary	210	139	71.0	33.8%
Westminster Cathedral RC Primary School	Primary	210	144	66.0	31.4%
Christ Church Bentinck CofE Primary School	Primary	390	200	190.0	48.7%
Ark Atwood Primary Academy	Primary	420	403	17.0	4.0%
Wilberforce Primary	Primary	210	102	108.0	51.4%
Pimlico Primary	Primary	390	357	33.0	8.5%
Churchill Gardens Primary Academy	Primary	210	179	31.0	14.8%
Gateway Academy	Primary	630	561	69.0	11.0%
Millbank Academy	Primary	420	231	189.0	45.0%
St Augustine's Federated Schools: CE High School	Secondary	840	906	0.0	0.0%
Marylebone Boys' School	Secondary	630	608	22.0	3.5%
Sir Simon Milton Westminster University Technical College	Secondary	200	27	173.0	86.5%
Harris Academy St John's Wood	Secondary	1050	1035	15.0	1.4%

The Grey Coat Hospital	Secondary	755	829	0.0	0.0%
The St Marylebone CofE School	Secondary	822	839	0.0	0.0%
Westminster City School	Secondary	740	583	157.0	21.2%
St George's Catholic School	Secondary	870	868	2.0	0.2%
Paddington Academy	Secondary	900	910	0.0	0.0%
Westminster Academy	Secondary	900	997	0.0	0.0%
Pimlico Academy	Secondary	1050	1013	37.0	3.5%
Ark King Solomon Academy (Primary Rec to Y6)	All-through	630	617	13.0	2.1%
Ark King Solomon Academy (Secondary Y7 to Y11)	All-through	360	443	0.0	0.0%
Ark King Solomon Academy (All-through Rec to Y11)	All-through	990	1060	0.0	0.0%
Total		20450	17871	2579.0	12.6%
Primary (Rec to Y6)		11333	8813	2520	22.2%
Secondary (Y7 to Y11)		9117	9058	59.0	0.6%

* Primary spare capacity is 22.2%

** Secondary spare capacity is 0.6%

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Business and Children Policy and Scrutiny Committee

Date:	2 nd February 2022
Classification:	General Release
Title:	School uniform costs in state schools and support available for families
Report of:	Ian Heggs
Cabinet Member Portfolio	Councillor Tim Barnes
Report Author and Contact Details:	Katie Hodges katie.hodges@rbkc.gov.uk

1. Executive Summary

The purpose of this paper is to inform Scrutiny Committee members of recently introduced statutory guidance on the cost of school uniform, the average cost of school uniform in Westminster and the advice the council offers to schools and parents.

2. Government guidance on the cost of school uniforms

There continues to be local and national interest in the cost of school uniforms and the impact such costs have on economically disadvantaged families in England. The School Uniform Bill, which makes guidance on school uniforms legally binding for schools' governing bodies, passed on 29th April 2021. The subsequent new guidance on the cost considerations of school uniform was published on 19th November 2021. The guidance requires all schools to review their current uniform policy, and to make any necessary changes by September 2022. This guidance should be read in line with the government's existing non-statutory guidance on school uniform policies, which states that

“No school uniform should be so expensive as to leave pupils or their families feeling unable to apply to, or attend, a school of their choice, due to the cost of the uniform. School governing bodies should therefore give high priority to cost considerations”

The new statutory guidance outlines the cost considerations which schools must take into account when developing and implementing their uniform policies and managing their uniform supplier arrangements. It also provides guidance on the provision of second-hand uniform (which under the new guidance must be available), and other support with the cost of uniform for disadvantaged families. Schools are also advised to keep branded uniform items to a minimum and encouraged to allow more high-street options.

3. Local Picture

School uniform policies are developed and updated by their governing bodies.

Where families are experiencing financial challenges in terms of meeting the cost of school uniform, a child will never be turned away from school. All efforts will be made by the school to support the family and to ensure that the child has school uniform, including linking with any other partners, such as John Lyons Charity and the Portal Trust. Most schools have donation schemes and second-hand schemes available, where uniform is provided for free or at a low cost to families in need. Some schools hold funding in reserve to assist families in financial difficulties to purchase uniform. The Pupil Premium can also be considered for use to support with uniform provision. Our Early Help service advises and signposts families on how they can access support with the costs of school uniforms.

In Westminster, the majority of secondary schools are either academies or free schools and often have resources which may be drawn upon in order to support school uniform costs when necessary.

In Ormiston Beachcroft Alternative Provision Academy, all students are issued with appropriate uniform free of charge.

4. Council Response

Upon guidance being issued on 19th November 2021, the council contacted all schools immediately to ensure awareness of the new guidance and provide a summary of the key points of the guidance. This is in addition to schools receiving notification of the new guidance by the Department for Education.

High-level desk-based research has been undertaken to benchmark the average cost of school uniforms in Westminster in comparison to average costs across the country.

Based on a sample of 8 schools in the borough with published uniform costs, the average cost of a complete set of primary school uniform, including PE kit and summer/ winter variations is between £230 - £290. The cost of a complete set of uniform, including summer and winter variations and PE kit for our secondary schools ranges from around £240 to £380 depending on the school. These costs compare to the national average school uniform of £315 per year for each primary school child and £337 per year for each secondary school child, as established in a survey of 1,000 parents conducted by the Children's Society in March 2020.

Local authorities and academy trusts in England are not required to provide support to parents in meeting the costs of school uniforms as they are in the devolved administrations. They can choose whether to provide school clothing grants or to help with the cost of school clothing in cases of financial hardship. In Westminster, advice and support is provided for vulnerable families by the Early Help team and many schools run their own schemes to provide assistance with the costs of or the provision of school uniform.

If you have any queries about this Report or wish to inspect any of the Background Papers, please contact Katie Hodges

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City of Westminster

Annual School Performance Report 2021

1. Executive Summary

- 1.1 The purpose of the report is to provide members of the Committee with an opportunity to examine the overall Westminster school performance in 2021 and to review the Local Authority service priorities that have been identified for supporting school performance.

2. Key Matters for the Committee's Consideration

- 2.1 Due to the suspension of assessments in primary schools over the last two years, due to the Pandemic, the early years, Key Stage 1, and Key Stage 2 performance data is the last data available to us in 2019. The Committee are therefore particularly requested to note and comment on the most up to date data on:

- The performance of the Westminster maintained and academy secondary schools in the 2021 GCSE and A level national assessments.
- Attendance across Primary and Secondary Schools.
- NEETs and Post 16 progression rates.
- Ofsted School Inspection outcomes

The Committee are also requested to comment on

- The latest local Authority priorities and key actions for schools.

3. Summary

- 3.1 Following the Covid-19 lockdown, schools this year have focused on their education recovery plans. This has included using the additional government catch up funding to support the pupils who have fallen behind in their learning and giving particular attention to ensuring all pupils are making the required progress in the core subject areas, writing, reading and mathematics. It has also meant an increased emphasis on supporting the pupils' well-being and mental health. What we do know is that the return to school has had a positive impact on the health of the whole school community.
- 3.2 In the continuing challenging context that we face, the children and young people in Westminster schools benefited from the quality of school leadership and the support that was provided to schools in Children's Services. Contingency plans are in place where pupils and staff need to be sent home if Covid positive. This includes provision for remote and online working. The importance of good attendance is also being given a high profile in the school community and individual family support to improve attendance is provided by Westminster's Early Help Service.
- 3.3 National Primary assessments did not take place again this year but are due to resume in 2022. GCSE and A level results this year were again different from previous years and, based on teacher assessed grades rather than public examinations. The results in Westminster were excellent and we should congratulate the achievements of our young people and wish them all the very best in the next stage of their learning and career.
- 3.4 Based on previous assessments before the lock-down, the outcomes for disadvantaged children and young people have in Westminster been

relatively high compared to other local authorities and achievement gaps are smaller. It is recognised that the lockdown has disproportionately affected the learning and progress of the most vulnerable, and in the school recovery period there has been a need to ensure that additional support is in place for these young people.

- 3.5 Considering the context of the pandemic, numbers of young people post 16 not in education or employment (NEET) remain low in Westminster and the numbers of those participating in post 16 education and training remain high.
- 3.6 Full Ofsted school inspections started again this autumn term. The proportion of schools in Westminster judged by Ofsted to be good or outstanding in their last inspection is currently 91%, above the national average of 86%.
- 3.7 Surplus Primary school capacity remains a significant issue in Westminster. Spare capacity now stands at 22%, and this is having an impact on school budgets and the resources that some schools have available to them. Following an external review by the ISOS partnership on behalf of the Local Authority in 2020 officers have been working with schools to look at strategies for increasing numbers and where needed reduce current school published admissions numbers.

4. Priorities and Key Actions

- 4.1 The overarching aim for the Local Authority is to ensure that all children and young people access the highest quality education provision and achieve the best outcomes. The current key priorities and actions in the current context are:
 - Supporting schools and headteachers with the recovery following the lockdown; this includes advice in managing the controls around Covid-19, promoting school attendance, and guidance on remote learning where children or teachers are required to work from home, along with advice on the recovery curriculum and addressing gaps in learning particularly for the most vulnerable children and young people.
 - Addressing the surplus primary school places in the borough, working with school governors and leaders, and the respective Dioceses to bring about the changes in school provision that are needed
 - Improving the percentage of all children who will be assessed at a good level of development in early years, through targeted support and training with early years settings.
 - Continuing to work to bring down levels of fixed term exclusion rates in secondary schools through support and training including the inclusion pilot
 - Continuing to support successful post 16 progression through the Westminster economy and education teams working with schools and employers, to ensure that all young people have access to a range of opportunities, including work-based training and apprenticeship programmes.

- Working with schools to maintain the good/outstanding Ofsted judgement through advice, support and training and targeted work with those schools needing additional support and challenge.

5. Early Years and Primary School outcomes

Early Years Profile

5.1 There was no Early Years Foundation Stage assessment in 2021. As an early years' measure, the percentage of children in the reception cohort entering school in Westminster with a 'good level of development' was 71% in 2019; this is just below the national average of 72%. Improving the outcomes here is a priority for the Childcare and Early Years' service. All maintained nursery schools, primary schools with a nursery and independent early years providers (PVI's) are offered advice and support by the LA and have access a local programme of training and advice on the early years' curriculum. Alongside this, there has been a focus on the early identification of learning needs in settings, and effective action to address these.

Primary Statutory Assessments

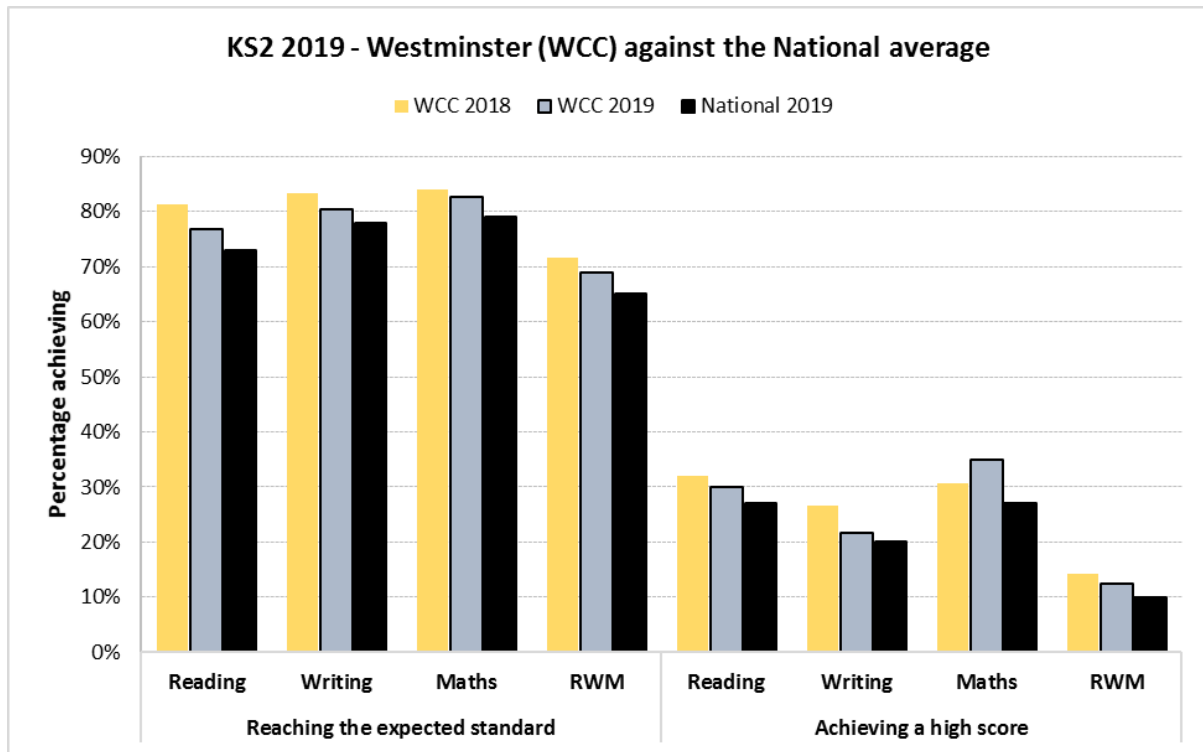
5.3 There were no Key Stage 1 or 2 assessments in 2021. The current plans are for the statutory assessments to take place in 2022, and schools are preparing their children for them. Teachers have continued to undertake teacher assessments and have used these to identify learning needs and assess pupil progress. Moderation activities across schools support the quality of these assessments.

5.4 In 2019 in Westminster primary schools, the percentage of pupils working at expected in reading, writing and mathematics overall at both key stages was above national averages. At Key Stage 2, at the end of their primary schooling, 70% achieved the expected levels in reading and writing. This was above the national average of 65%. Westminster primary schools have also performed above national averages on their Key Stage 2 progress scores. Their performance in reading and mathematics has been stronger than writing when compared to other local authorities.

Key Stage 2 Tests (reading and mathematics) and teacher assessments (writing)

	Westminster				National			
	Reading	Writing	Maths	RWM	Reading	Writing	Maths	RWM
Reaching the expected standard 2019	78%	82%	84%	70%	73%	78%	79%	65%
Working at expected 2018	81%	83%	84%	72%	75%	78%	76%	64%
Achieving a high score 2019	31%	22%	35%	13%	27%	20%	27%	11%

Working at greater depth 2018	32%	27%	31%	14%	28%	20%	24%	10%
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6. Secondary Schools – GCSE and A Level

GCSE

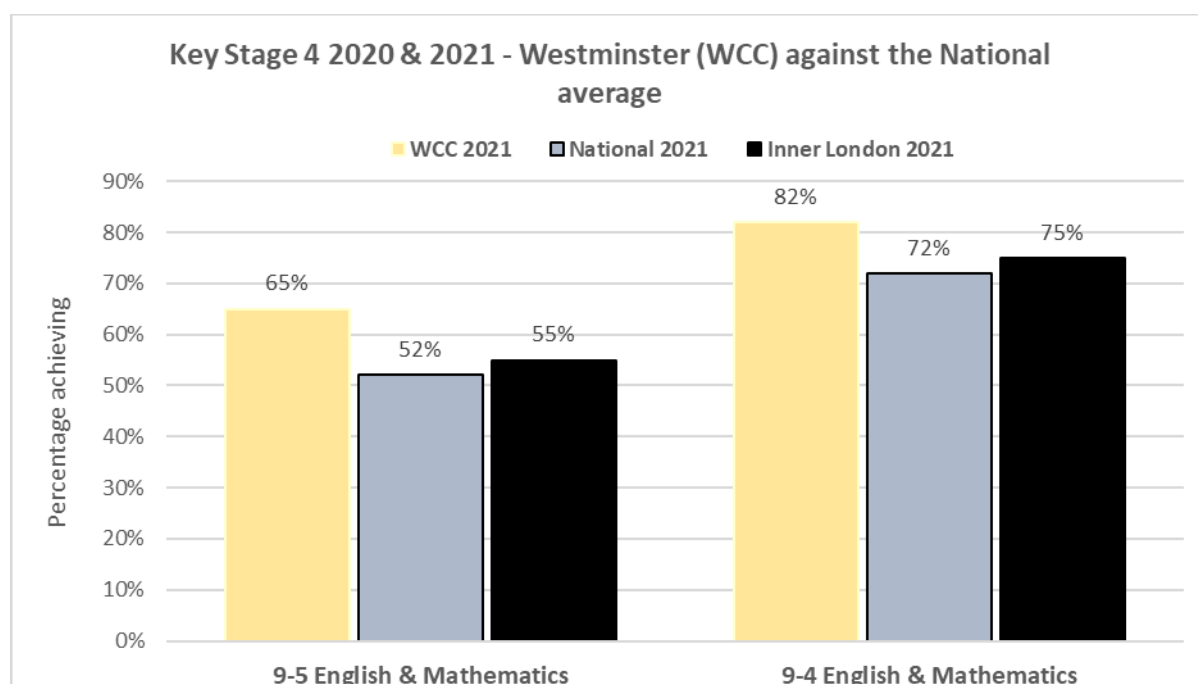
6.2 The GCSE performance data headlines for 2021 as set out below are for the percentage achieving a strong pass (5-9) or a standard pass (4-9) in English and mathematics, and Attainment 8 scores. The Attainment 8 score is an assessment of the students' performance across a range of GCSE subjects.

6.3 In 2021, there were no public examinations and results were based on the schools' teacher assessed grades, making it difficult to directly compare with previous years and produce previous progress scores (Progress 8).

6.4 Overall performance in Westminster at GCSE, in 2021 and in previous years has been well above national and inner London averages.

	Westminster			NATIONAL			Inner London		
	2019	2020	2021	2019	2020	2021	2019	2020	2021
5-9 English & Mathematics	54%	63%	65%	43%	50%	52%	46%	53%	55%
4-9 English & Mathematics	75%	82%	82%	65%	71%	72%	67%	74%	75%
Attainment 8	53.4	57.1	57.6	46.8	50.2	50.9	48.4	52.3	53.4

6.5 Due to teacher assessment in place of public examinations at GCSE, no progress 8 scores were calculated by the DfE for the Year 11 cohort last year.



A Level

6.6 A Levels, as with GCSEs, were based this year on teacher assessed grades. Overall, students across Westminster schools performed very well across the grade boundaries. The percentage of papers awarded a Grade A*-B was 85% (77% nationally) and Grade A*-C was 95% (93% nationally) in 2021, and those achieving the highest grades (Grade A*-A) was 63% (52% nationally).

A Levels

	Westminster	National
	2021	2021
A*	33%	24%
A*-A	63%	52%
A*-B	85%	77%
A*-C	95%	93%
A*-D	98%	98%
A*-E	100%	100%

7. Outcomes for Groups

7.1 At Key Stage 2, there is no comparative data this year for the performance of groups in our schools (Pupil Premium/Free School Meals, SEN children

with an Education and Health Care Plan, SEN Support children and those Children with English as an additional language).

7.2. Overall, in previous years, the outcomes of the different pupil cohort groups across Westminster primary and secondary schools compared well with national averages, and the differences (gaps) between these cohort groups of pupils and their peers were smaller than national figures. This is shown in the comparative outcome data for each group in the table below.

KS2 - % reaching the expected standard or above in reading, writing and maths (RWM)		Pupil Premium	Non Pupil Premium	Premium gap	EHCP	SEN Support	Not SEN	SEN gap	EAL	Not EAL	EAL gap
Westminster LA	2017	60%	78%	-18%	37%	32%	76%	-43%	69%	65%	4%
	2018	65%	78%	-13%	17%	39%	82%	-48%	72%	72%	0%
	2019	66%	72%	-6%	16%	37%	78%	-47%	68%	70%	-2%
National	2017	48%	68%	-20%	8%	21%	71%	-52%	61%	62%	-1%
	2018	51%	71%	-20%	9%	24%	74%	-53%	65%	65%	0%
	2019	51%	71%	-19%	9%	25%	74%	-52%	64%	65%	-1%

KS4

KS4 - % 5-9 English & Maths		Pupil Premium	Non Pupil Premium	Pupil Premium	EHCP	SEN Support	Not SEN	SEN gap	EAL	Not EAL	EAL gap
Westminster LA	2018	44%	62%	-18%	11%	22%	62%	-43%	53%	52%	1%
	2019	46%	60%	-14%	17%	26%	60%	-36%	55%	51%	4%
	2020	55%	70%	-15%	9%	32%	70%	-44%	64%	62%	2%
	2021	56%	73%	-17%	21%	36%	71%	-38%	65%	65%	0%
National	2018	25%	50%	-25%	5%	17%	49%	-35%	44%	43%	1%
	2019	24%	49%	-25%	6%	16%	48%	-34%	44%	43%	1%
	2020	30%	57%	-27%	7%	21%	56%	-39%	70%	72%	-2%
	2021	32%	59%	-27%	8%	22%	58%	-40%	72%	73%	-1%
KS4 - % 4-9 English & Maths		Pupil Premium	Non Pupil Premium	Pupil Premium	EHCP	SEN Support	Not SEN	SEN gap	EAL	Not EAL	EAL gap
Westminster LA	2018	69%	79%	-10%	23%	44%	83%	-44%	76%	69%	7%
	2019	69%	80%	-11%	22%	49%	83%	-40%	77%	73%	4%
	2020	75%	87%	-12%	30%	55%	88%	-39%	83%	81%	2%
	2021	75%	88%	-13%	32%	60%	87%	-34%	83%	82%	1%
National	2018	25%	50%	-25%	5%	17%	49%	-35%	44%	43%	1%
	2019	24%	49%	-25%	6%	16%	48%	-34%	44%	43%	1%
	2020	53%	78%	-25%	14%	40%	78%	-45%	50%	50%	0%
	2021	53%	79%	-26%	16%	42%	79%	-44%	53%	52%	1%

7.3 The outcomes for disadvantaged children and young people in Westminster secondary schools have been relatively high compared to other local authorities. The Education Policy Institute this year published a report comparing how far behind children who are persistently disadvantaged (on free school meals for 80% or more of their school life) have fallen in their learning at the end of their secondary schooling compared to non-disadvantaged children up to 2019. Nationally, they found that the average period of time by which persistently disadvantaged children have fallen behind is 22 months. In looking at what the picture was in different local authorities, in Westminster, with a relatively high proportion of persistently disadvantaged children (25%), the period of time the young people fell

behind in their learning was 0.5 months (2 weeks). This constitutes the smallest gap in the country.

- 7.4 Complementing this performance data, a report has been produced on the work that is taking place in Westminster to ensure that the gaps in the outcomes of disadvantaged children and young people are addressed. See report '*Narrowing the Gap in Westminster*'.
- 7.5 In March 2020, Ofsted inspected Westminster's provision for Special Educational Needs. The positive progress and outcomes of SEN children and young people, both with Education and Health Care Plans and who were identified for SEN support, were acknowledged by the inspectors in their findings. Only 9 areas for development were identified by inspectors, which is a very low number compared to other local areas and a significant number of strengths were highlighted in the Ofsted report.
- 7.6 It has been locally and nationally recognised that the lockdown during the summer of 2020 has had an impact on the progress of our most vulnerable groups despite the efforts of all schools to ensure that all young people were accessing the provision available on school site or remotely. A key focus for schools since September has been on helping young people in this group catch up on their learning. Schools have been identifying where children have fallen behind in areas of their learning and have been prioritising the use of their additional catch-up funding to target this support for children most in need. In helping schools, headteachers have access to core support and advice from the School Standards and SEN services. This has included sessions for SEN coordinators and school leaders on managing learning during the lockdown and recovery periods.

8. Support for Schools

- 8.1 In supporting headteachers and governing bodies in Westminster, the Education Service has continued to provide schools with access to core lead adviser and additional bought-back service level agreement support from the School Standards team.
- 8.2 During the lockdown and school recovery period, the Early Years and Childcare, School Standards, SEN, and Early Help services have been supporting education providers. This has included advice on risk assessment management, remote learning and the recovery curriculum, and support with school attendance. Training sessions on managing the recovery curriculum and remote learning have been made available to all schools.
- 8.3 The School Standards service also leads the Best Practice Careers Network for the designated Career Leaders in schools. This has continued to meet during lockdown and support schools in their statutory duty to deliver high quality careers information and guidance (the Gatsby Benchmarks) and successful transition to post-16 education, training, or employment. This has focused on establishing effective links between schools and local FE Colleges and the promotion of virtual open events and course guidance.

9. Participation in Education, Training and Employment Post 16

9.1 Over the last 3 years participation rates for 16- and 17-year-olds have continued to increase nationally and across London, with more young people continuing to participate in education or training after completing statutory education at the end of Year 11. In 2020/21 the participation rate in Westminster remained unchanged (at 96%). This is consistent with the London rate.

	WCC			London			National		
	2020/21	2019/20	2018/19	2020/21	2019/20	2018/19	2020/21	2019/20	2018/19
NEET or not known	3.4%	3.0%	2.0%	3.6%	4.00%	4.5%	5.1%	5.8%	5.6%
	Mar-21	Mar-20	Mar-19	Mar-21	Mar-20	Mar-19	Mar-21	Mar-20	Mar-19
Participation	96.4%	96.7%	97.3%	96.0%	95.5%	94.9%	93.2%	92.6%	92.5%

9.2 The level of participation is reflected in the proportion of Westminster residents aged 16- or 17-years who were either NEET (Not in Education or Employment) or where their destination was not known (NK)¹. While this percentage remains below both the national and London averages this has now increased for the third year running (to 3.4%). The service responsible for destination tracking has been able to identify destinations for most students and the proportion of NK is low (<1%). Most of the increase is among young people who are NEET. In August 2021 there were 65 NEET young people aged 16- or 17-years, increasing from 57 in August 2020, and double the 32 recorded in August 2019.

9.3 Covid may have increased NEET in three ways. Young people who were in employment, or on an apprenticeship, were vulnerable to redundancy as lockdown impacted negatively on the London economy (although this risk has now reduced). The transfer to online learning limited the availability of intensive face-to-face careers guidance to support progression. Less well-informed decisions may have resulted in more students becoming 'early leavers'. Finally, grade inflation associated with the use of Centre and Teacher Assessed Grades (CAG and TAG), may have resulted in some students being accepted onto courses that exceeded their ability level, also resulting in them becoming an 'early leaver'. Much of the increase in NEET, however, appears to predate the Covid pandemic.

9.4 High levels of participation in education and training have insulated the majority of 16- and 17-year-olds from the economic impacts of Covid. The impact remains starkest among 18-24-year-olds. The number claiming Universal Credit (used as a proxy for NEET among 18-24) increased dramatically from March 2020 (415) to March 2021 (1,575). While there is now evidence of a sustained decline in the claimant count, these levels are currently more than double the period immediately before Covid (1,015, October 2021). It is a positive indication that the number of apprenticeship

¹ Source: 3-month average for May, June, July 2020 corresponding to the end of the academic year taken from DfE Monthly LA Tables. These figures are more current than the DfE NEET and not known Scorecard which reports the 3-month average for December 2019, January 2020, and February 2020. The difference between the reported figures and the DfE Scorecard reflects the positive outcome of ongoing tracking activity.

vacancies available within 10 miles of Victoria station (2,144) has recovered to pre-Covid levels (November 2021).

9.5 The Council tracks the destinations of 16- and 17-year-olds (in addition to 18-year-olds previously known to be NEET) and young people with SEND up to 25 years¹. A number of council initiatives support young people who are identified as NEET to re-engage with education or training, and young people 'at risk' of NEET to progress positively:

- When young people are initially identified as NEET, they receive signposting information, including contact details for local colleges and support services, before being referred to:
- Westminster Early Help for an initial assessment (within 5 days) before being allocated to a lead professional (within 10 days). This may be Early Help, Westminster Employment Service (WES), SEND Team or Virtual School/Leaving Care Team, with possible input from
- the Bi-Borough NEET Panel. The Panel has allowed practitioners working with NEET young people to consult with other professionals to identify next steps/progression opportunities. The structure of this work will adapt to recognise the wider council response in this area
- The EET (Employment, Education and Training) Opportunity Task Group has been established to work with local colleges and voluntary sector organisations to promote referrals and develop their offer to local young people who are NEET
- Cases of Year 11 students identified 'at risk' of NEET by the Vulnerable Children's Collaborative and/or the 'light touch' RONI may be fast-tracked for early discussion with the statutory school they attend and/or Early Help

9.6 The delivery of support to young people was affected during the Covid lockdown periods. Services switched to a virtual delivery model with individual and group support delivered online or over the phone. The delivery of support has now returned to face-to-face delivery.

9.7 The council delivers a number of key activities designed to enhance the careers guidance available in local schools and colleges, to support young people to make informed decisions about their future and progression options and reduce the risk of their becoming NEET:

- The Education-Business Youth Engagement Programme (managed through Growth, Planning and Housing) delivers an annual calendar of curated activities aligned to established national (and international) thematic weeks including - Enterprise (Global Entrepreneurship, November) National Apprenticeships Week (February), STEAM Week (British Science Week, March), National Careers Week (March), Discover Creative Careers Week (November)
- City Lions offers a more targeted and bespoke approach to meet needs identified by schools and uses the creative sector to respond. Through participation in workshops, mentoring programmes and work experience opportunities, the programme is supporting young people – particularly

¹ The Council commissions Prospects Services Ltd to track destinations of young people and reduce the proportion where destination is 'not known'.

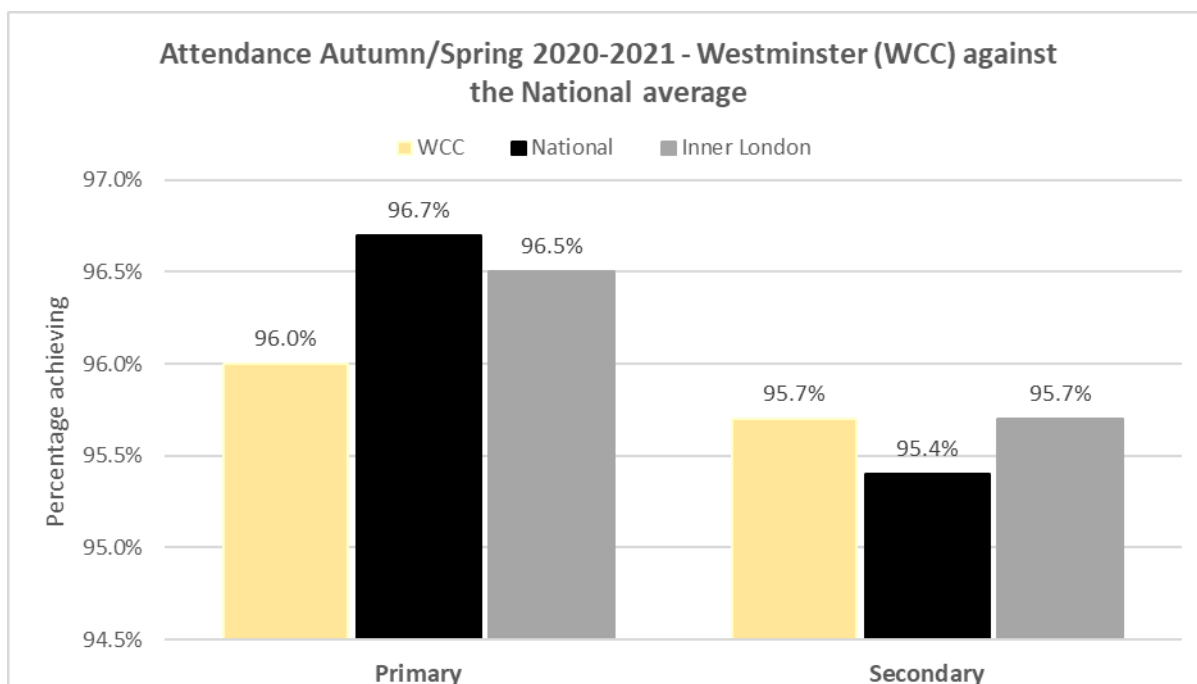
disadvantaged young people – to broaden their career aspirations and develop the essential skills they require for a successful future

- In September 2021, the Council welcomed the third cohort onto the Supported Internship Programme delivered by City of Westminster College and Westminster Employment Service. The programme supports young people with Special Educational Needs and Disabilities to develop their skills within a workplace environment
- The council works with local colleges to increase referrals to their reengagement programmes: “Freshstart” (City Westminster College), “Exploring Careers” (Westminster Kingsway College), “Restart” (Morley College) “Step Up” (West London College) and the Mayor’s European Social Fund Youth Programmes (Capital Cities College Group Bounceback)
- Two new programmes will broaden the offer for young people with SEND, providing an alternative to mainstream FE and internships: i) ‘Project Choice’ 2-year supported internship delivered in partnership with College Park and CLCH NHS Trust which will provide an additional work experience year; and part-time ‘Workstart’ programme (partnership with Orchard Hill College) for those over 19 with SEN support needs (with or without an EHCP)
- The creation of a new post of Employment Advisor (funded through WES with SEND-school focus) will coordinate and build capacity for collaboration between SEN schools and employers, including creating meaningful encounters with employers and the workplace

10. School Attendance and Exclusions

School Attendance

- 10.1 The latest attendance is Autumn/Spring 2020/21, attendance in primary schools (based on this most recent national comparative figures) was slightly below the national average (96.0% in Autumn/Spring 2020/21 compared with the national average of 96.7%). In secondary schools, attendance levels have risen to above national averages over the last three years. For the Autumn/Spring 2020/21, attendance rates were 95.7% compared with the latest national average of 95.4%.



10.2 The attendance for SEN pupils with EHC Plans for the Autumn/Spring 2019/20 in primary schools was 91.1%, which was above the national average (89.1%); for pupils with SEN Support, attendance was 94.8%, which was just below the national average (95.2%). The attendance for pupils with EHC Plans (2020/21, Autumn/Spring) in secondary schools was 91.7%, which was above the national average (85.1%); for pupils with SEN Support, attendance was 93.7%, which was also above national data (92.9%).

10.3 During the first lockdown (January-March 2020), schools remained open for vulnerable and children of key workers. The vulnerable children cohort included those who received social care support and children with special needs who had an EHC Plan. During the lockdown period, the percentage attendance in this group increased.

10.4 In the autumn term 2021, attendance has been positive in primary and secondary schools. Reported figures on the Government's Portal recently show primary attendance at 93% (in line with comparative national of 92%). Secondary attendance recently is at 91%, higher than national at 87%. Since the start of the Autumn term Westminster secondary attendance has been above national.

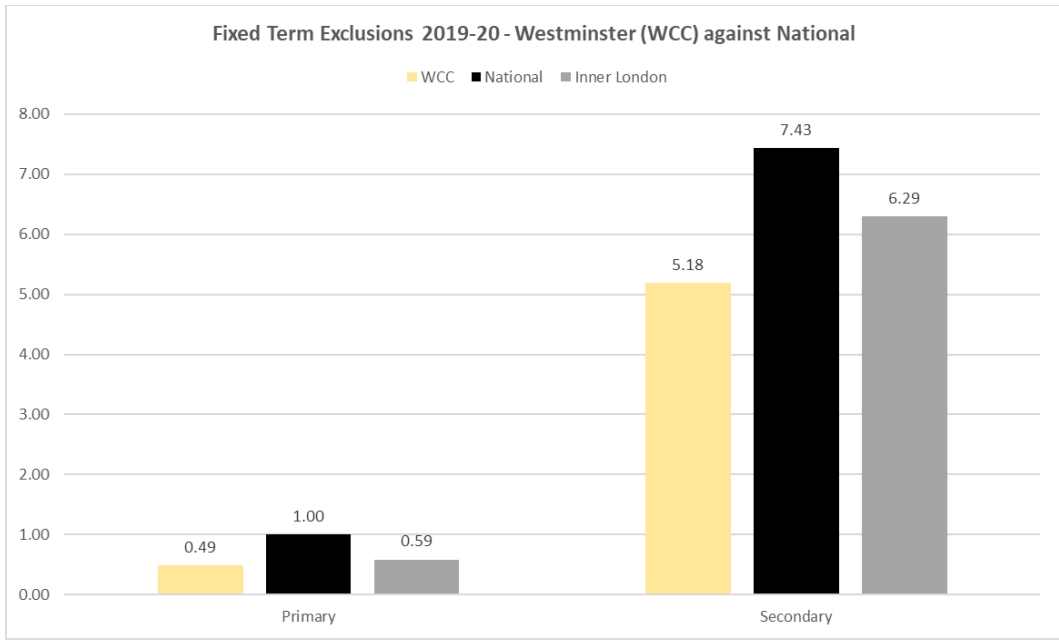
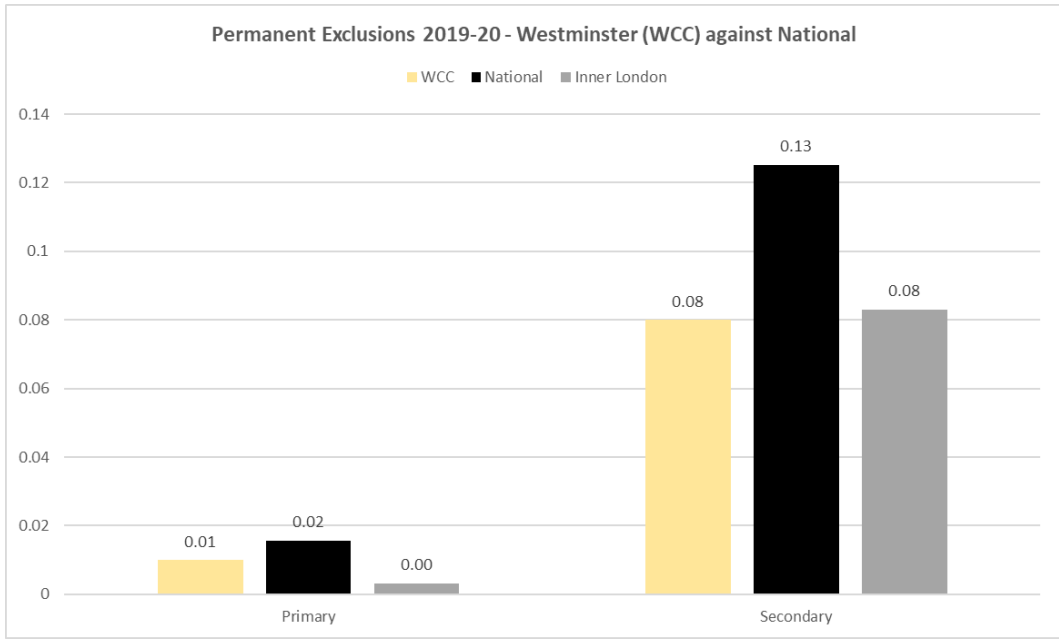
10.5 During the lockdown and into the school recovery period, the Early Help service has been providing schools with targeted support for families. At a whole school level, attendance figures have been monitored on a weekly basis through the lock-down and post lock down period. Where there are concerns raised by the school about a child being persistently absent, targeted service support is provided to ensure their safety and welfare.

10.6 Where attendance cases require escalation, the Vulnerable Children's Collaborative group (with officers from across SEN, Early Help and Social

Care) can initiate additional support for vulnerable young people with attendance concerns.

Exclusions

- 10.7 In 2019/20 in Westminster, there were 12 school permanent exclusions down from 30 in 2018/19. Of the 12 exclusions, 11 were non residents, and 11 of the 12 exclusions were from secondary schools.
- 10.8 The number of fixed term exclusions in primary schools has remained the same in the last two years. Measured as a percentage of the school roll, the number of incidents shows Westminster primary school fixed term exclusion rate to be below the national average: 0.5% compared with the national figure for primary schools of 1.0% and the Inner London figure of 0.6%.
- 10.9 The number of fixed term exclusions in secondary schools has decreased in from last year. The fixed term exclusion rate based on the number of incidents as a percentage of the school roll has decreased from 11.3% in 2018/19, 5.2% in 2019/20. The national lockdown did impact the 2019/20 figures as only vulnerable pupils and children of key workers were attending school between March 2020 and July 2020. The latest figures are below the national average (7.4%) and the Inner London (6.3%) average.
- 10.10 Of the 692 fixed term exclusions across Westminster schools in 19/20, 46 related to pupils with an EHC Plan, which represented 8% and was below national (15%). 218 fixed term exclusions related to pupils with SEN Support (8%, which was below the national figure of 11%).
- 10.11 In providing additional support to reduce exclusions through the inclusion pilot the Early Help service is continuing to work with secondary schools to develop effective early intervention behaviour strategies and to provide access for school staff to training on trauma informed approaches to behaviour management. As a result of this training schools have accredited for the quality of their work in this area. Ormiston Beachcroft Alternative Provision Academy is additionally able to support pupils at risk of exclusion, and schools have access to a managed intervention programme that provides temporary placement for pupils.
- 10.12 A key local development in addressing the issue of exclusions has been the establishment of a local Inclusion Strategy. This sets out our local commitments to supporting inclusive practice and outline the key areas for actions in promoting inclusion and reducing incidences of exclusion. A focus of the Inclusion Strategy's work will be to highlight examples of the good inclusive practice across our schools.
- 10.13 Alongside the Inclusion Strategy, an Equality and Diversity working group of officers from the Education service and school leaders continues to provide a lead on promoting effective leadership and practice across schools in equality and diversity across the curriculum. This has included workshop sessions for senior leaders and the commissioning of Diverse leadership training.



Elective Home Education

10.14 The number of families registered for home elected education in Westminster is currently 176 and has increased since the Covid 19 lockdown. The Education Service has a robust Elective Home Education (EHE) policy and procedures are in place to ensure that all children within the borough are in a safe and suitable learning environment and are being provided with a satisfactory education. There is a clear timeline for taking action where there are concerns.

11 Ofsted Inspection Outcomes

11.1 Currently, 91% of schools in Westminster are currently rated as good or outstanding by Ofsted, which is well above the most recent national average of 86%. The table below shows the current picture.

2021 OFSTED Outcomes	National	Westminster December 21
Outstanding/Good	86%	91 % (51/56 schools)
Outstanding	21%	33% (19)
Good	65%	58% (32)
Requiring Improvement	10%	9% (5)
Inadequate	4%	0%

11.2 Translated into numbers of pupils in the Borough, 96% (20,414 out of a cohort of 21,361) of children and young people in Westminster now attend a good or outstanding school. This compares with the national figure of 85% of children and young people attending good or outstanding schools.

11.3 In helping to maintain the high percentage of good and outstanding settings, School Standards officers work in partnership with school leaders and governors to ensure that they have access to professional advice and training needed in preparing for inspection both through the core offer and an additional bought-back traded school improvement service. The well-established framework for school improvement also enables the Local Authority to provide further support at the earliest possible stage where there are concerns about an inspection outcome, and to target additional support for schools judged by Ofsted to be requiring improvement. This offer is open to all maintained state schools. Free schools and academies are also advised of the support that is available.

11.4 Since the return of school following the lock-down, Ofsted inspections have re-commenced and there have been alterations to the Framework and evaluation criteria. The significant change has been the resumption of regular inspections of schools graded as outstanding, and the toughening of the standards needed to maintain or achieve an outstanding grade. All schools that were graded as outstanding before 2015 will be due a full section 5 inspection. Schools inspected at good or outstanding after 2015 will continue to have a section 8 inspection that tests whether the school have maintained this quality of provision. School judged to be requiring improvement receive Ofsted monitoring visits and a full re-inspection after 2 years.

11.5 In the autumn term 21-22 there were 5 school inspections in Westminster. The School Standards team have been providing schools with professional development on the new framework and helping with sharing the learning from the inspections we have had across Westminster and Kensington and Chelsea.

11.6 The current Ofsted inspection outcomes for individual schools are set out in the Appendix.

12 Surplus Capacity in Primary Schools

12.1 Surplus Primary school place remains a significant issue in Westminster, as it does across London. Spare capacity in Westminster primary schools continued to rise in 2021 and now stands at 22%, well over the Department of Education's recommendation of surplus places being in the range of 5-10%. This is having an impact on the funding that is coming through to support the budgets of some schools in the borough.

12.2 Following an external review by the Isos Partnership on behalf of the Local Authority, officers have been working with schools, headteacher, governors and representatives from both the Church of England and Catholic Diocese in taking forward the three recommendations of the ISOS review:

- Reducing the number of forms of entry by 4 or 5 classes across the schools that have been identified as having the highest reduction in their pupil numbers.
- Maximising pupil numbers through more the more targeted promotion and marketing of our schools.
- Tightening financial planning and working with schools to help with the strategic planning of their budgets over the next five years.

A further meeting of the Isos working group, chaired by a local headteacher, took place on 27 January to review progress against the recommendations and consider what further action might need to be taken. The group's recommendations will be reported back to Schools Forum.

12.3 In helping schools address their strategic planning, a focus has been placed by officers on the promotion of school partnerships, particularly with small 1 form entry primary schools, as a means of realising some economies of scale and as a way of addressing the issue of surplus places. In recent years there has as a result been an increase in Executive Headteacher appointments, where an experienced headteacher is leading more than one school. There has also been an increase in federations, where schools have come together to establish a joint governing board as well as a proposed amalgamation of two schools which is currently being consulted on.

12.4 Six primary schools in Westminster with spare places have taken 162 Afghan evacuee children on roll, along with one secondary school. They have provided the education support needed for the period the families are in their local bridging hotels prior to re-housing.

APPENDIX

Current Ofsted Inspection outcomes by school (Primary, Secondary and Special schools)

Nursery Schools	Overall Judgement
Dorothy Gardner Nursery School	Requires improvement

Mary Paterson Nursery School	Outstanding
Portman Early Childhood Centre	Outstanding
Tachbrook Nursery School	Good

Current Ofsted Inspection outcomes by school (Primary, Secondary and Special schools) December 2021

Primary Schools	Overall Judgement
All Souls' CE Primary School	Good
ARK Atwood Academy	Outstanding
Barrow Hill Junior School	Good
Burdett Coutts CE Primary School	Good
Christ Church Bentinck CE Primary School	Outstanding
Churchill Gardens Primary Academy	Good
Edward Wilson Primary School	Good
Essendine Primary School	Good
Gateway Academy	Outstanding
George Eliot Junior School	Requires improvement
Hallfield Primary School	Good
Hampden Gurney CE Primary School	Outstanding
Millbank Academy	Outstanding
Our Lady of Dolours RC Primary School	Good
Pimlico Primary Free School	Outstanding
Queen's Park Primary School	Good
Robinsfield Infant School	Good
St Augustine's CE Primary School	Requires improvement
St Barnabas CE Primary School	Good
St Clement Danes CE Primary School	Outstanding
St Edward's RC Primary School	Requires improvement
St Gabriel's CE Primary School	Good
St George's Hanover Square CE School	Requires Improvement
St James and St John CE School	Good
St Joseph's RC Primary School	Good
St Luke's CE Primary School	Good
St Mary's Bryanston Square CE School	Good
St Mary Magdalene's CE Primary School	Good
St Mary of The Angels RC School	Good
St Matthew's CE Primary School	Good
St Peter's CE Primary School	Good
St Peter's Eaton Square CE School	Outstanding
St Saviour's CE Primary School	Outstanding
St Stephen's CE Primary School	Good
St Vincent De Paul RC School	Good

St Vincent's RC Primary School	Outstanding
Soho Parish CE Primary School	Good
Westminster Cathedral RC School	Good
Wilberforce Primary School	Good

Secondary Schools	Overall Judgement
Grey Coat Hospital	Outstanding
King Solomon Academy (All through school)	Outstanding
Paddington Academy	Outstanding
Pimlico Academy	Good
Harris Academy St John's Wood	Good
St Augustine's CE High School	Outstanding
St George's Catholic School	Outstanding
Marylebone Boys' School	Good
St Marylebone CE School	Outstanding
Westminster Academy	Outstanding
Westminster City School	Good

Special Schools	Overall Judgement
College Park	Good
Queen Elizabeth II Jubilee	Good
St Marylebone CE Bridge School	Good

Alternative Provision	Overall Judgement
Ormiston Beachcroft AP Academy	Good



Business and Children Policy and Scrutiny Committee

Date:	2 February 2022
Classification:	General Release
Title:	Draft Report: CYPMH task group
Report of:	Head of GCL
Cabinet Member Portfolios	Young People and Learning ASC/Public Health
Wards Involved:	All
Policy Context:	City for All
Report Author and Contact Details:	Artemis Kassi akassi@westminster.gov.uk

1. Executive Summary

This is a preliminary draft of the Children and Young People's Mental Health task group report.

2. Key Matters for the Committee's Consideration

Committee members are asked to provide initial comments on this preliminary draft of the task group's report. Members are further requested to:

- consider the preliminary draft;
- provide steer on the report; and
- consider the recommendations.

3. Background

Mental health and emotional well-being are in the spotlight in the media and public discourse. The problems are not new and for various reasons are emerging as amongst the most critical concerns of public health today. Psychological problems amongst children, adolescents and young adults can be wide-ranging and may include attention deficit hyperactivity disorder (ADHD), disruptive conduct, anxiety, eating and mood disorders and other mental illnesses.

The Children and Young People's Mental Health task group was established in March 2021, with the added dimension to its work focusing on the emotional and mental well-being of Westminster's young residents: on 23 March 2020, the UK went into lockdown as a measure to control and protect against the Covid-19 virus. For children and young people, this resulted in remote learning and reduced socialisation, with immediate and likely long-term impacts on their mental health and emotional well-being. The shift to remote learning also necessitated increased reliance on technology.

The CYPMH task group members investigated:

- what the Council was already doing through, for example, Children's Services;
- what safeguards were already in place;
- what the experiences of young people in Westminster are/might be;
- what parents/schools/institutions in Westminster may already be doing; and
- what the main obstacles to good mental health and emotional well-being are.

The task group found from evidence collected throughout the pandemic that, whilst children and young people generally coped well during the first wave of the pandemic, some children and young people had experienced greater negative impacts on their mental health and wellbeing. This group of those who were particularly adversely affected included: children and young people who are disadvantaged economically; those who had pre-existing mental health needs prior to the pandemic; those who have special educational needs and disabilities (SEND); and autistic young people. With the pandemic ongoing at the time of this Task Group report, various in-person services and opportunities for socialising and learning were still unavailable for many children and young people in Westminster, or had become more difficult to access.

This preliminary draft has been produced with a view to finalising the report imminently. Given the proximity of local elections, the aim is to accomplish this finalisation by early March. The Committee members, including those who have served on the task group along with colleagues from the Adults and Public Health Policy and Scrutiny Committee, are aware of Children's Mental Health Week (7 – 13 February).

Once finalised, the ambition for this piece of work is to assist in shaping policy concerning the emotional well-being and mental health of children and young people in the coming years.

If you have any queries about this Report or wish to inspect any of the Background Papers, please contact Artemis Kassi

akassi@westminster.gov.uk

APPENDIX:

Preliminary Draft CYPMH Task Group Report

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**Improving the emotional wellbeing and mental health of children
and young people in Westminster**

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Table of Contents:

Chair’s Foreword.....	1
Executive Summary.....	3
Introduction	4
Wellbeing and mental health in Westminster	5
What do we mean by wellbeing and mental health?	5
Wellbeing and mental health in Westminster and nationally	6
Wellbeing	7
Mental health provision.....	8
Underlying factors affecting wellbeing and mental health	9
Wellbeing	9
Body image and social media.....	11
Diet, nutrition, body weight, and relationships with mental health	12
Physical health and mental health.....	13
Poverty	15
Employment and opportunities	17
Parental mental ill health.....	17
Children in care and care leavers.....	19
The impact of trauma and adverse childhood experiences (ACEs)	20
Autistic children and young people	22
Service Provision in Westminster	24
Community services.....	24
Schools	25
Mental Health Support Teams	26
Whole-School Approach to improving mental health	27
NHS Services	29
GPs	29
Child and Adolescent Mental Health Services (CAMHS).....	31
The co-ordination and promotion of local mental health services	33
Co-ordination between services	33
Awareness of mental health services	34
Breaking the cycle of stigma	35
Reaching all our communities.....	35
Funding and sustainability of services	36
Prioritising early intervention and prevention	37

Whole-Community and Whole-Council approaches	39
Whole-Community Approach	39
Whole-Council Approach	40
Conclusion.....	41

Chair's Foreword

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Executive Summary

[To be produced once content is finalised]

Introduction

The COVID-19 pandemic has had enormous impacts on the lives and opportunities of children and young people across the world.

In the UK, the disease itself has not, on the whole, clinically impacted or killed many children and young people in the way it has older or disabled people. However, social distancing measures and lockdowns, implemented to ensure that the NHS could cope whilst the country learned more about how to manage COVID-19, have meant that in-person opportunities for normal socialisation, interaction and for development and learning, have been unavailable or seriously limited. In many cases, unexpected loss of loved ones to the disease will also have caused distress to children and young people, many of whom will have experienced their first bereavement, or multiple bereavements, during this time. The impacts of the pandemic on the mental health and wellbeing of a generation of young people are the subject of much discussion, and it is important we understand the scale and what can be done to mitigate this impact.

Evidence collected throughout the pandemic suggests that, whilst children and young people generally coped well during the first wave of the pandemic, some children and young people have experienced greater negative impacts on their mental health and wellbeing. This group includes: children and young people who are disadvantaged economically; those who had pre-existing mental health needs prior to the pandemic; those who have special educational needs and disabilities (SEND); and autistic young people. With the pandemic ongoing at the time of this Task Group report, various in-person services and opportunities for socialising and learning are still unavailable to many children and young people in Westminster, or have become more difficult to access.

The Business and Children's Policy and Scrutiny Committee and the Adults and Public Health Policy and Scrutiny Committee committed to investigating children and young people's emotional wellbeing and mental health needs within Westminster, and established a Task Group in March 2021.

The Task Group is made up of six core members:

- Councillor Karen Scarborough (Chairman)
- Councillor Nafsika Butler-Thalassis
- Councillor Christabel Flight
- Councillor Angela Harvey
- Councillor Aicha Less
- Councillor Tim Roca

The Task Group set out to answer the following question: *Can the Council do more to improve the mental health and wellbeing of children and young people in Westminster?*

Answering this question required determining the level of mental health need within Westminster amongst children and young people. Once this had been estimated, the Task Group explored whether Westminster had the appropriate level of provision to match this need, examining both quantity and quality of services.

The inquiry focused on the mental health and wellbeing needs of children and young people aged up to 25 years old. The Task Group heard evidence from a variety of sources, including some of Westminster's young people, Council services, education settings, community organisations, and local NHS children's and adolescent mental health services (CAMHS).

The Council is a partner within Westminster's local mental health ecosystem, which is largely led by NHS services. This report contains information and observations about systems supporting the mental health of children and young people in the City, as well as practical recommendations for the Council on service improvements, programme development, and monitoring and evaluation.

This report focuses on five key themes:

- 1) Underlying factors for low wellbeing and mental ill health
- 2) Service provision in Westminster
- 3) The co-ordination and promotion of services
- 4) Early intervention and prevention
- 5) Whole-Council and whole-community approaches

Although the inquiry gathered evidence from a wide array of witnesses and sources, this report itself cannot capture a complete picture of mental health needs and available support services across Westminster. The Task Group recognises that there are many service providers for children and young people, and many Council initiatives that it was not possible to note in this report, and would like to thank everyone involved in supporting children, young people, and their families in Westminster.

Wellbeing and mental health in Westminster

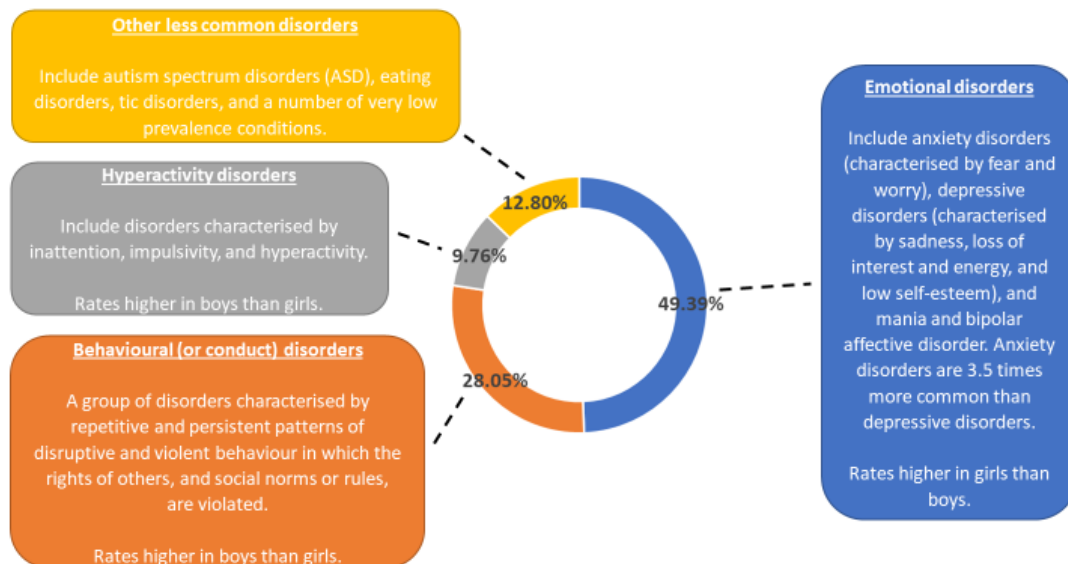
What do we mean by wellbeing and mental health?

“Mental health is everything” – Young person, Westminster City Youth Council

Mental health conditions are diagnosable disorders which affect a person's thinking, feeling, behaviour, and/or mood. These conditions can have wide-ranging impacts on individuals' lives, often resulting in difficulties with relationships, education, work, and other social problems.

Mental health conditions can be grouped into four main types for children and young people. Their prevalence varies by sex, with an average figure across all children and young people (CYP) in Figure 1 below:

Figure 1.



Although the onset of most mental disorders usually occurs during the first three decades of life, studies have shown that treatment is often not initiated until several years later. There is increasing evidence that intervention during the early stages of disorder may help reduce severity and/or persistence of the initial or primary disorder, and may prevent development of secondary disorders.

Throughout the evidence sessions, service providers in Westminster and other witnesses to this Task Group emphasised the importance of early intervention and support for children and young people displaying signs of low wellbeing and mental ill health. This issue is explored in greater detail later in the report.

Wellbeing and mental health in Westminster and nationally

According to the Office of National Statistics (ONS) population data, there are up to 50,701 children aged 0-17 years old and up to 30,488 young people aged 18-25 years old living in Westminster. NHS estimates indicate that up to one in six (16.7%) school-aged children have a mental health issue, whilst for young people and young adults aged 17-22 years old, this increases to one in five (20%). In Westminster, these proportions equate to approximately 5,750 children and young people aged 5-16 years old, and 3,675 young people aged 17-22 years old with mental health issues. These numbers are substantial, and likely to increase in line with projected wider trends.

Wellbeing

The Children's Society's Good Childhood Report 2021 estimated that 306,000 children aged 10–15 years old in the UK are unhappy with their lives, and that around a quarter of a million children did not cope well with changes during the pandemic. One of its key findings was that young people are particularly unhappy about school, with many under pressure to adhere to very high standards. The proportion of children unhappy with school has risen from 1/11 a decade ago to 1/8 in 2021. Locally, the *Young Westminster Foundation*, whose 2021 report "*Our City, Our Future*" found that 79% of young people they surveyed identified school and exams as their main worry.

Low subjective wellbeing and mental ill health are related but not synonymous issues, and measured lower life satisfaction in early adolescence can act as a warning sign for the development of certain mental health issues. Although the Council and local partners routinely collect information about children and young people who access mental health services, a more systematic approach to understanding children's lives and their wellbeing prior to the point of accessing services may prove beneficial. Ensuring a better understanding of low wellbeing amongst young residents in Westminster could allow steps to be taken at individual, community, and borough-wide levels to improve wellbeing and prevent the onset of mental health conditions in children and young people.

Being able to measure children's subjective wellbeing could give the Council and key local partners a wealth of data on how children feel about their lives, which could act as an evidence base for future planning. It would enable agencies to more strategically develop or commission services, to more accurately measure the impact of policies and programmes, and to better comprehend the local drivers of children's wellbeing and onset mental health needs.

Case Study: #BeeWell

BeeWell is an innovative wellbeing measurement and improvement framework being used by secondary schools in Greater Manchester. The project asks pupils about aspects of their lives that influence their wellbeing.

Schools routinely use academic data to assess the progress of their pupils, make decisions about their priorities for action and evaluate the success of their efforts. Measuring wellbeing serves a similar purpose, being used intelligently to improve young people's experiences and outcomes. The programme is now in its second phase and set to run till May 2024.

In Westminster, the Health Education Partnership¹⁰ is commissioned to deliver the Healthy Schools London (and Healthy Early Years) programme. These are evidence-based public health initiatives for emotional and physical health and wellbeing. Schools work to achieve Healthy Schools London award status by way of a rating system incorporating a variety of areas, including:

- Physical activity (including travel to and from school, as well as activity in school)
- Healthy eating (including school food and drink policies)
- Drug, alcohol, and tobacco education
- Emotional wellbeing and mental health

as well as statutory requirements including anti-bullying and behaviour policies, safeguarding, and sex and relationship education. <https://www.london.gov.uk/what-we-do/health/healthy-schools-london/awards/get-award/get-award>

The Healthy Schools London framework has different levels of award (Bronze, Silver, Gold) and, at the higher levels, schools can develop outcome-based action plans for health, based on needs analysis identification of priority areas for the school. Here, schools collect baseline data, which includes measures of wellbeing and life satisfaction. At the time of writing, 53 Westminster schools were registered with Healthy Schools London, with 35 Westminster schools to date having achieved Gold and Silver awards: these schools are therefore already collecting information about students' wellbeing and life satisfaction. The Council should, in tandem with key local partners and legal advisors, explore whether this data can be used and evaluated (in compliance with data regulations) to better understand the wellbeing of children across the City, and inform future service development and delivery.

Recommendation: *The Council should continue to support evidence-based programmes that monitor and evaluate children's health and wellbeing, such as the Healthy Early Years and Healthy Schools Programme, and explore if data sharing can be facilitated to better inform future spend on services.*

Mental health provision

There is growing recognition that youth mental health is an area of healthcare with a chasm between need and provision. In May 2021, the Government announced a £17m allocation for improvements in mental health and wellbeing support in schools and colleges. However, the *Centre for Mental Health* has calculated that as many as 1.5m more children and young people in the UK may need mental health support as a result of the pandemic's impacts on their lives; and analysis of national NHS data carried out by *The Royal College of Psychiatrists* showed that in Q2 2021, referrals for children and young people's mental health services had increased by 134% from the same period last year, with an 80% increase in the number of children needing mental health emergency crisis care. A broader package of funding may therefore be required to address the mental impacts of the pandemic.

Similar findings were echoed by witnesses to the Task Group who stated that the pandemic has both increased the prevalence of poor mental health and hindered access to support. For example, Westminster's public health team estimated that a further 2,657 Westminster children would develop post-traumatic stress disorder (PTSD) and 9,252 will develop depression over the duration of the pandemic. If just 35% of these children consequently access health service support, this will lead to an

increased demand of 916 patients with PTSD and 3,189 with depression on Westminster's mental health services. The Council and NHS are therefore preparing to address a sustained increase in local demand for mental health support in coming years.

Young Healthwatch Westminster also reported that 88% of children and young people said that the pandemic has had an impact on their mental health. Young people told the Task Group that their friends' mental health issues had worsened during the pandemic, and that their usual social support networks were often harder to rely on virtually. For some, this means they developed new online support networks; for others, it means they have become more socially isolated.

The Task Group heard evidence from both the local Children and Adolescents Mental Health Services (CAMHS) and school Mental Health Support Teams (MHSTs) that, as well as increased levels of need, the complexity of presentations had also increased. The increased complexity requires additional clinical capacity, which places more strain on Westminster's mental health support sector and other services.

The *NHS Long Term Plan* set a national target for 2020/2 for the number of children and young people with a diagnosable mental health condition that should receive support, but this target is 35% of the total number that are estimated to need it. Locally, that currently translates to a target of more than 900 children and young people accessing support through NHS funded mental health support services (including CAMHS and the Mental Health Support Teams (MHST)) in the Central London CCG area. Whilst this target is currently being met, a substantial waiting list is maintained. Further, the Council estimates that 85% of young adults (18-25 years old) with a diagnosable mental health condition are not accessing support locally.

During the course of the Task Group's inquiry, it became clear that there is a need to raise awareness of existing service provision for those struggling with mental health issues, and that collaborative work should take place to address underlying causes of low wellbeing and mental health issues in children, with the aim of preventing development of diagnosable conditions.

Underlying factors affecting wellbeing and mental health

This section explores factors underlying low wellbeing and poor mental health in young people, and considers which groups are more at risk of developing mental health issues. Whilst some groups are at very high risk and therefore already known to the Council, there may be a higher number of vulnerable children currently not known to services and thus presently unsupported. The Task Group acknowledges the challenges to identifying and successfully engaging with these children and young people.

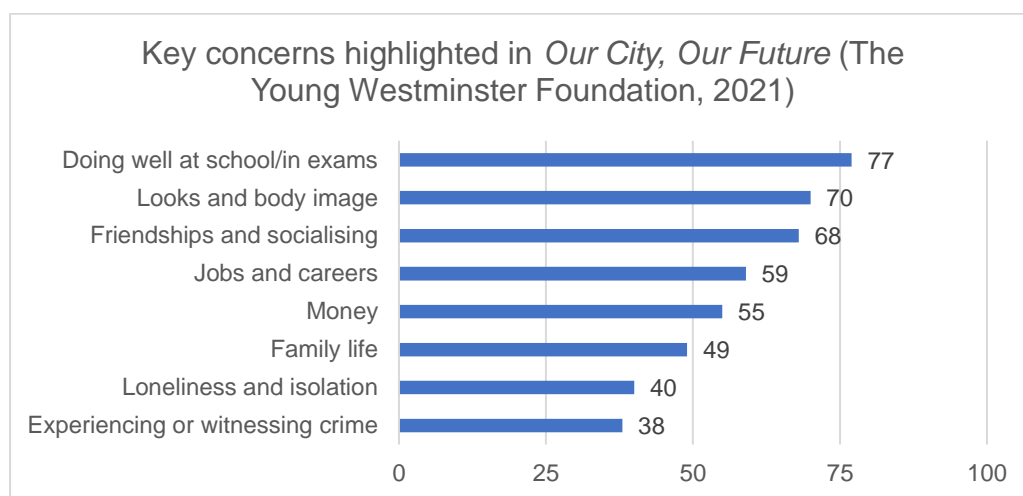
Wellbeing

Children should be able to enjoy good childhoods, which can provide the foundations for becoming healthy adults. Children and young people's own sense of their wellbeing and the quality of their lives is important. It can reveal broader difficulties in their lives

and can, over the longer term, be an indication of mental health problems. Understanding and addressing low wellbeing in children is therefore key to any strategy that has early intervention and prevention at its core.

Most children report happiness and satisfaction with their lives. *The Good Childhood Report 2021* found that young people reported that they were on average most happy with their home, their family, and their health. Locally, the Young Westminster Foundation's, "*Our City, Our Future*" report surveyed a representative sample of young people in Westminster about their lives, including areas of concern and sources of unhappiness. Figure 2 illustrates some of the key areas of concern identified in this report.

Figure 2.



The Good Childhood Report also explored children's subjective wellbeing in early adolescence, and links with subsequent negative mental health outcomes in older adolescence. It found that young people with lower life satisfaction at age 14 were significantly more likely to have negative mental health outcomes at age 17. This group were more likely to say they had self-harmed in the previous year, or even attempted suicide. Low life satisfaction in early adolescence could therefore be a warning sign for the development of adverse mental health outcomes.

The Department for Education's State of the Nation Report found that some groups of children and young people are more likely to have lower wellbeing than others. This research indicates that children with special educational needs and/or a disability, children and young people with disadvantaged family backgrounds, and some children from Black, Asian and Minority Ethnic backgrounds reported (or were reported by their parents as) being more anxious than children and young people who did not share these characteristics.

Wellbeing is a broad and largely subjective category, but within this category some key issues are recognised as having major impacts on mental and emotional wellbeing in children and young people.

Body image and social media

Social media plays an important role in many adolescent mental health issues, particularly depression and disordered eating behaviours related to body image. This is a problem for children and young people in Westminster, evidenced in the *Our City, Our Future* report, in which 7 out of 10 of those surveyed chose looks and body image as one of their main concerns.

Research evidence shows that, for girls, repeated exposure to images of oneself and others' bodies is linked to low self-esteem and idealisation of thinness (a risk factor for eating-disordered behaviours). Use of highly-visual social media platforms (HVSMS) – such as Instagram, Snapchat, and TikTok, which present feeds of images and video – appear to have a greater adverse psychological impact than the use of Facebook or other platforms that intersperse text updates with images and video. This is especially the case for adolescent girls experiencing repeated exposures to images of idealised (including digitally edited) female bodies.

Although the use of social media is known to have a particular impact on the mental health and self-image of adolescent girls, an emerging theme in research regarding the relationship between social media use and adolescent mental health is that of the impact on boys' body image. In contrast with the impact on girls – which tends to manifest as a desire for thinness, potentially resulting in anorexic or other eating-disordered behaviours – the effect of social media on adolescent males' body image appears to result in a focus on building muscle and cutting body fat, including through unhealthy methods such as binge-eating and use of anabolic steroids.

In the absence of a co-ordinated national effort to ensure children and adolescents are educated about (and supported to implement) healthy social media consumption strategies, Westminster's health services, schools/colleges, and Westminster City Council may wish to explore the feasibility of developing best-practice guidance for social media use, to be rolled out locally. This could take the form of multiple strands: some directly aimed at the end user (the child/adolescent), for example through their school or even local public campaigns such as bus-stop advertising; some aimed at parents who can influence or oversee their child's mobile device usage.

Although social media platforms have become a key part of our social worlds, and can improve some people's feelings of connectedness, the evidence is incontrovertible – including from social media companies' own research – that they have the ability to do considerable harm to children's mental health. Whilst it would be undesirable for the public sector to actively attempt to limit children's use of social media, it is clearly equally if not more undesirable to leave its harms to children unaddressed. Educating children and young people about avoiding potential harms, whilst promoting examples of healthier consumption patterns, could be a happy medium, and local policymakers may have an appetite for a well thought through education campaign. Westminster City Council has excellent links with local health and education services, and would be well-placed to lead such an education programme locally.

Diet, nutrition, body weight, and relationships with mental health

There are mechanistic relationships between physical health and mental health. It is beyond the scope of this report to explore these in detail, but brief summaries follow.

The links between dietary habits, nutrition, and mental health have been the subject of much research in recent decades. Good-quality review evidence confirms that poor dietary habits are associated with the exacerbation of low mood and depression symptoms; and although there are plausible mechanistic explanations for this relationship, involving micronutrients as cofactors in the production and function of neurotransmitters, the broader picture is that eating a balanced diet containing a variety of micronutrients is associated with reduced incidence of mental health conditions, even when confounding factors are taken into account.

In addition to general diet, there are strong links between obesity and clinical mental health conditions, including depression. Previous academic and policy attempts at calculating economic costs of obesity have not fully taken into account the impact of obesity-related mental health issues, as the extent of the links between the two has only relatively recently become apparent. In children, this link is apparent in girls more than boys, and this may be partly due to different societal pressures on appearance for males and females, as well as hormonal fluctuations during puberty and beyond for girls. We must note that, although depression and obesity share causative biological pathways, particularly those related to inflammation, the relationships between obesity and poor mental health are not solely biological. Social stigma and bullying related to obesity are also associated with depression and psychological distress in people who are obese, including children and adolescents.

However, obesity is a complex issue. Although historically often viewed as the result of an individual's choices about food and physical activity, over the last two decades obesity has become much better understood as a result of the many-layered interplay between the impact of genetics, environments (including family environments, as well as physical environments such as schools and neighbourhoods), and choices shaped by available opportunities and habits.

In a recent report, Westminster's Public Health team has identified childhood obesity as a priority for future work, building on work done to date. The Public Health report explains some of the actions taken to date to help address drivers of obesity locally, including provision of opportunities for physical activity (discussed in more detail below).

The report also notes the links between adult and child obesity, and the role of family environments in childhood obesity. Poverty is a strong driver of poor diet and nutrition, regardless of ethnic backgrounds and cultural factors, which also play key roles in under- and over-nutrition. However, it is important, given the increased prevalence of childhood obesity in families from some ethnic backgrounds compared to others, to develop a good understanding of different cultural attitudes to feeding children, and to take these into account. Some cultures value what in practice is overfeeding children, especially boys, and factors such as this can act as barriers to

families' engagement with healthy lifestyle programmes which aim to change those practices. This leaves some children from minority backgrounds at significantly increased risk of obesity and its consequences: both physical health consequences and psychosocial health consequences, which include mental health issues related to stigma and/or bullying.

Care must therefore be taken by Council and commissioned services to ensure that targeted healthy lifestyle messaging aimed at these cohorts is developed sensitively in partnership with local families from a variety of backgrounds, and is delivered through appropriate methods to increase engagement across the board. We are more likely to achieve success if we listen to a wide range of voices and understand common issues.

Physical health and mental health

Physical health problems are associated with significantly increased risk of poor mental health. Around 30% of all people with a long-term physical health condition also have a mental health problem, most commonly depression or anxiety. Westminster's Sport, Leisure and Active Communities (SLAC) team provided evidence to the Task Group regarding links between wellbeing and physical health and to examine the affordability and accessibility of Westminster's amenities and facilities for physical activity.

SLAC staff informed the inquiry that the service looks for opportunities to embed opportunities for sports and physical activities in open spaces and across the borough as well as in the leisure centres for which the Council is responsible. The team supports Westminster communities at all levels, from schools to groups for older residents, across a range of abilities and disabilities, to become and remain as active as possible through a mixture of universal and targeted provision.

Case Study: The Neighbourhood Sports Club (NCS)

The NCS programme provides free accessible sports and physical activity opportunities to Westminster residents and young people, from age eight years and over. The programme offers inclusive activities for residents who are physically disabled, learning disabled, and who have mental health conditions, as well as those who do not live with disabilities. This offer is provided as part of a minimum of 130 hours of multi-sport activity, managed by Everyone Active via the leisure contract's community objective outcomes.

Everyone Active work with local community providers to deliver activities as part of the NCS programme and, prior to the Covid-19 pandemic, the programme engaged an average of 360 young people per month. Although the earlier phases of the pandemic forced a halt to many activities, a gradual return began from 29 March 2021. As of August 2021, the NCS programme was able to offer 84.9 hours monthly, and engaging on average 240 young people per month. As providers continue to return to normal levels of activity, these figures are expected to increase.

Innovative programmes like the NCS can be seen as one tool in a wider local toolkit of initiatives aimed at preventative mental health support. Their target audiences are residents in more deprived wards, who generally have higher levels of mental health needs.

During gathering of evidence, the Task Group found that there is a perception amongst some young people that gym facilities (both those operated by the Council partnership with Everyone Active, and private gyms run by other companies) were expensive and therefore not accessible. The Council has a number of free outdoor gym facilities which are well used by local residents (including in Paddington Recreation Ground and at Westbourne Green). However, these are not considered particularly attractive options for young people in the winter. Young people felt that there was a disparity between free, non-competitive summer and winter activities.

Evidence presented to this Task Group showed significant discounts available through the *ActiveWestminster* Card, with a £15 maximum monthly fee for Council run gym facilities for 11-18 year olds who live in Westminster (extended to 11-24 for disabled residents). It appeared that young people were not aware of these reduced rates, and may benefit from more promotion of the *ActiveWestminster* card across the Council. Although this is in part the responsibility of this service, which promotes the card via its social media channels, outreach, and occasionally has a section in the MyWestminster newsletter, other teams across the Council which regularly interact with young residents, parents, and students could do more ensure their audiences are also aware of this excellent Council initiative.

Recommendation: *The Council should take an holistic approach to improve its communication and awareness of the ActiveWestminster Card amongst children, young people, and parents.*

Witnesses informed the Task Group that the SLAC service has positive partnership working underway with Children's Services and the a long-standing relationship with the Youth Offending Team, with sports and other activities used to help divert young people from criminal activity, there would be benefits to ensuring the Sport, Leisure and Active Communities was further integrated into a WCC whole-systems approach to protecting and improving mental wellbeing. Such benefits could include more opportunities for cross-referral, more consistent messaging to service users, greater collaboration and opportunities for sourcing external funding, improvements to impact measurement across the Council, and better alignment of programmes (e.g. Change 4 Life) run across departments.

Poverty

Poverty impacts a child's whole life, affecting education, housing and social environment and in turn impacting health outcomes, including their mental health.

The *Royal College of Paediatrics and Child Health* have consistently found that the gap is widening between the health of children from wealthy backgrounds and those from disadvantaged backgrounds. NHS prevalence data shows that children and young people living in a household which is struggling financially are twice as likely to have a mental health disorder as their peers.

In January 2021, Westminster had 6,862 children eligible for free school meals attending Council-maintained schools in the borough. Westminster has a 29% child poverty rate, which is in line with national child poverty statistics. This figure is comparably better than some other London boroughs, but the Office for National Statistics considers Westminster one of the most deprived boroughs in the country due to its number of deprived Lower-layer Super Output Areas (LSOAs). https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/835115/loD2019_Statistical_Release.pdf.

Local authorities have limited resources at their disposal to directly address child poverty, with many of the levers held by central Government. Amongst numerous other initiatives aimed at supporting our residents on low incomes, Westminster City Council provides or signposts to quality benefits advice and support, through a range of services and agencies; assists residents to upskill and find work through the Westminster Employment Service and programmes such as Supported Internships; maintains its parks and open spaces so they are available for all to use regardless of income; and offers subsidised membership to its leisure centres for families on low incomes and in receipt of certain benefits. Although affordable housing in the borough remains a hot-topic issue, with the length of waiting lists for social housing measurable in decades, the Council has in recent years partnered with housing associations to deliver other affordable housing options in Westminster, and is also doing all it can to construct new homes for rent.

One poverty reduction initiative aimed specifically at protecting children from problems caused by growing up in low-income households centres upon the concept of "poverty-proofing" the school day, originally piloted in the North-East of England. Some policies and practices in schools have the inadvertent effect of highlighting children who cannot afford to participate in activities or purchase required equipment for lessons, and this can result in bullying and stigmatisation from peers. Schools can take steps to identify such practices and alter them, and can also identify families in need of signposting to additional support.

Case Study: Poverty Proofing Audit

Poverty Proofing the School Day is a project developed by Children North East. The project provides a toolkit to assist schools in exploring the most effective way to spend pupil premium allocation, to reduce stigma and remove barriers to learning.

Poverty Proofing the School Day consists of an audit for each individual school, questioning pupils, staff, parents and governors. For example, an audit might find that the financial pressure points for families is the price of school uniform, school trips, transport and non-uniform days. An audit of a different school might find that children are given detentions if they do not bring ingredients from home for food technology lessons, even if the reason is they cannot afford to.

The result of the audits is an action plan tailored to each individual school to address any policies or practices that stigmatise poverty directly or indirectly, and to help ensure educators are aware of the wider support available to families in need.

During the Covid-19 pandemic, Westminster City Council worked with local organisations across the public sector, private sector, and charity sector to deliver aid to residents, including considerable amounts of food aid and support. Additionally, during the summer of 2021, the Council funded 33 providers to support 1,675 disadvantaged children to encourage them to eat more healthily and be more active. This effort could be expanded by working with schools to assess the cost of the school day and working with families to identify financial pressures they face meeting those costs.

The Food Foundation's "*Children's Future Food Enquiry*", gathering evidence on the impacts of food poverty across the country including in London, resulted in the 2019 publication of the Children's Right2Food charter, the Westminster launch of which was supported by Nadhim Zahawi MP as the then Parliamentary Under-Secretary of State for Children and Families. With food poverty a huge factor in educational under-attainment for many children from low-income families, it is important to understand the scale of this issue locally and take concrete steps to ensure no Westminster child is hungry in school. The new and strengthened partnerships Westminster City Council has built locally since the pandemic could provide a foundation for Westminster to become a "Right To Food" borough, building on Sustain's work with cities elsewhere in the UK. At the time of writing, the Mayor of London had not responded to calls to declare London to be a Right To Food city, and Westminster could therefore lead the way in London by developing and implementing its own Right To Food strategy.

Recommendation: *The Council should share the 'Poverty Proofing the School Day' audit with schools across the borough for them to use. The Council should declare Westminster a Right To Food borough, leading the way in London in committing to address local food poverty.*

Employment and opportunities

Young people aged 16-25 who are not in employment, education or training (NEET) have a high prevalence of mental health conditions: 24%, almost one in every four of this group. NEET status is strongly linked to mental health conditions and behavioural issues (including substance misuse), with related adverse mental health outcomes especially common amongst young NEET women.

Ingrained disparities of opportunity are prevalent within Westminster's young population, and have been exacerbated by the pandemic. This is reflected in the growing number of NEET young people across the Borough. Council data shows an upward trend in NEET which started before the first lockdown (in March 2020); the average monthly NEET figure increased from 28 in 2018/19 to 49 in 2019/20, and continued to increase to 62 in 2020/21. Figures from Q2 2021 show that Westminster's wards with higher levels of deprivation, Church Street, Churchill, Harrow Road, Queens Park, and Westbourne, had the highest rates of youth unemployment in the borough.

Westminster has many available pathways and support available for 16–25 year olds who are NEET or struggling in employment or education, particularly through the Economy team's Business Unit which co-ordinates a wide variety of employment and entrepreneurship opportunities for Westminster's young people. Whilst there are already existing information-sharing protocols between colleges and sixth forms and the Council when students drop out of courses, it may prove helpful to target holistic efforts aimed at identifying and supporting students at risk of dropping out of their courses, and addressing any underlying reasons where possible through packages of appropriate support.

Recommendation: *The Council should offer all NEET 16–25 year olds resident in Westminster holistic mentoring and/or coaching, to improve their ability to make the most of opportunities for employment or education.*

Parental mental ill health

More than 2.9 million children and young people in the UK have a parent with mental illness. This equates to approximately 6 pupils in every classroom.

Whilst research shows that the mental health of children is closely related to the mental health of their parents, through both genetic and environmental mechanisms, there is no national policy, practice guidelines or funding frameworks in place for families where parents have mental health conditions. Parental mental illness can negatively impact all aspects of a child's development, with children in these families having a 70% chance of developing a preventable mental health issue during their lives, and 40% requiring treatment before the age of 20 .

Many of the children and young people from these families therefore fall between service boundaries, only receiving support when they develop mental health conditions themselves. Adult mental health services do not address the support needs

of children in a parent's care; and child and adolescent mental health services (CAMHS) are only available when children start to develop mental health problems. This is often once problems are deeply entrenched, whereas earlier and more holistic intervention may have prevented the need arising.

Unfortunately, it appears that the COVID-19 pandemic has increased the prevalence of children of parents with mental illnesses, and the number of young carers in general. Despite this increased challenge, early intervention and preventative approaches can mitigate the immediate problems facing children of parents with mental illnesses and reduce their risk of developing future mental health conditions. One such approach is demonstrated by the charity *Our Time*, which hosts 'KidsTime Workshops' for families where a parent has a mental illness. These workshops are non-treatment sessions, offering a protected space, where young people can express themselves, have fun, build confidence and resilience, and learn about mental health. Parents can share their experiences and discuss their role as parents, rather than patients, in an informal and intimate space.

In November 2020, *Our Time* established a partnership with Westminster City Council Early Help service to develop two KidsTime Workshops linked to the North and South Family Hubs. The following case study highlights the difference this is making for children and families in Westminster.

Case Study: KidsTime Workshops Westminster

"One of our families joined us during lockdown. Mum was hesitant about coming, as she didn't know what to expect and it was via Zoom. However, she came along and was able to engage in the session with her children. The family have not spoken about mental illness within their family, but have witnessed a relative becoming very unwell, and Mum didn't know what to say to the children. The workshops have given Mum some tools to be able to have conversations with her children and to know it's ok to talk about mental health and mental illnesses. Mum is working on acknowledging the difficult feelings that the children have and trying to give them opportunities to express themselves.

KidsTime has helped the children to find language for their feelings and to learn about mental illness in a fun way that doesn't focus on their situation, but on mental illness as a whole, and that it's nothing to be ashamed about. KidsTime had their first face-to-face session and, afterwards, Mum said that it was really good to be able to speak to people who understand. In the session, the parents supported each other and gave advice from their own experiences."

Recommendation: *The Council should continue to deliver workshops for families where a parent has a mental illness, and roll these out further across the City.*

In 2018, a Westminster City Council Scrutiny Task and Finish Report evaluated Health and Wellbeing Centres across the capital. The in-depth report identified the Church Street area as having great potential to benefit from a “one-door” model for a Health and Wellbeing Centre, and recommended its commissioning as part of the planned regeneration of the Church Street area. This report explored issues around the provision of child and adolescent health services, and emphasised the importance of early intervention to address mental health issues in young people, noting that this could be improved by integrating adolescent health into Westminster’s health and wellbeing centres.

This Task Group recommends that the Health and Wellbeing Centre proposed for Church Street should be an intergenerational wellbeing hub providing holistic healthcare to both adults and children, with the aim of improving the physical and psychological wellbeing of the whole community through provision of a range of co-ordinated services.

Recommendation: *The regeneration of the Church Street area should include an intergenerational health and wellbeing centre in line with the recommendations of the 2018 report.*

Children in care and care leavers

At the time of writing, Westminster had 219 looked-after children (LAC) and 320 care leavers. LAC and care leavers were particularly impacted by the pandemic, because they were cut off from many of their usual sources of support, such as schools, children’s centres, health visitors, social workers, and visits from extended family or friends.

Young people entering the local authority care system have, by the point of entry, experienced difficulties in life over and above those experienced by most of their peers. Most will have suffered abuse or neglect; or experienced bereavement, disability, or serious illness of one or both parents. Many are from disadvantaged backgrounds. Perhaps unsurprisingly, the mental health of looked-after children is significantly poorer than that of their peers, with almost half of children and young people in care meeting diagnostic criteria for a psychiatric disorder.

Westminster City Council’s Children’s Services has been rated outstanding, with an inspection noting that the service was particularly good as regards multi-agency working. Co-ordination between health, education and social services at a local level is essential to provide effective support for LAC with mental health challenges. Westminster has a dedicated Child and Adolescent Mental Health Service (CAMHS) practitioner supporting social workers and carers working with children in care. A pilot expansion of their Looked After Children CAMHS Team is in progress, so that it can support care leavers as well as LAC. Funding for this pilot will support the service to work with the growing population of care leavers in Westminster. This approach was praised by Members of the Task Group for recognising the complex needs of LAC and care leavers.

Unaccompanied and separated young people as well as children in asylum-seeking families face particular challenges when in the UK. Westminster, like other local authorities, is in the process of assisting hundreds of Afghan refugee families, many of whom are likely to have significant mental health needs due to trauma and seeking safe refuge. There is a need to review the mental health and wellbeing offer for this cohort of children and young people, to ensure they are adequately supported as they integrate into life in the UK.

After the Grenfell tragedy, the NHS Grenfell Trauma Service was set up in response to the huge and unprecedented need for the children and young people of the local community. The Task Group recommends that Central Northwest London (CNWL) explores development of a similar service for children and young people arriving from Afghanistan and other countries seeking asylum. Such a service should establish links with healthcare services elsewhere in the country, as many refugee families may ultimately settle in other parts of the UK, and will require continuity of care to support relocation.

Case Study: NHS Grenfell Trauma Service

The Grenfell CAMHS service was set up in the wake of the Grenfell tragedy, and has worked with over 200 young people. A broad range of services are available in the community for young people, from listening and counselling services to leisure activities and art and drama therapy, which allow young people outlets, opportunities to express their feelings, or act as distractions from distress.

The impact of trauma and adverse childhood experiences (ACEs)

Adverse childhood experiences (ACEs) and childhood trauma are well-recognised as being associated with increased risk for poor mental health outcomes throughout the life course, including in childhood and adolescence. Although these impacts can generally be seen in children in care or those in families with a social worker, the majority of children experiencing ACEs may never be seen by social services.

There is well-documented increased risk of mental health issues conferred by multiple ACEs. This does not, however, mean poor mental health is inevitable for every individual who has experienced ACEs. Much of the difference in outcomes – why some people experience longer-term mental health issues after ACEs – depends on the nature of the ACEs experienced, and the support available to the child during the time and as he or she grows older.

A 2018 report from the Commons Select Committee for Science and Technology heard there is some disagreement regarding the value of methodologies which conflate multiple ACEs when analysing the impact of these experiences on individuals (since ACEs vary in nature and impact). https://publications.parliament.uk/pa/cm201719/cmselect/cmsctech/506/50605.htm#_idTextAnchor005

More recent good-quality research evidence indicates that ACEs specifically related to general household dysfunction or bereavement are likely to be less important in the development of key childhood and adolescent mental health issues (particularly those resulting in internalised harm) than ACEs that are related to household abuse, violence, and victimisation. Therefore, it may be wise to target work towards preventing the ‘most’ harmful ACEs – for example, through robust resourcing for prevention of domestic violence (which usually takes the form of male violence against women and girls, although male children are frequently also victims) and psychological abuse. Efforts targeted at improving harmful household environments and developing parents’ capabilities to nurture families may have significant impact on mental health outcomes over the longer term.

Particularly in the post-pandemic context, it will be crucial to ensure adequate support for struggling parents, who often have inadequate social support because of poverty – for example, being unable to afford childcare, which increases the likelihood of being overwhelmed by the continual burden of caring for pre-school-aged children alone. These issues compound pre-existing dysfunction in households with children. The COVID-19 pandemic has unfortunately meant that many struggling families have been unable to access the right support for them. Recent well-publicised child abuse cases from elsewhere in the UK have highlighted the fact that many seriously dysfunctional households have been left unsupported or uninvestigated where relevant, as a result of constraints imposed because of the pandemic.

Westminster’s Children’s Services team was able to maintain a good level of outreach and access to children’s centres for families in need throughout much of the locked-down periods, over and above much of the rest of the country. However, it is recognised that many of Westminster’s struggling families will not be known to Children’s Services, nor will some families self-refer even though they may benefit from support. This may be because of a general sense of mistrust and suspicion (even though it is not deserved) of social services generally amongst the general public in the UK, which was reflected in much of the public reaction to those recent high-profile serious child abuse cases. Children’s Services is investigating options to further increase support for and engagement with struggling parents in the borough. One recommendation may be to develop a new communications campaign aimed at educating in-need Westminster families about the types of support our Children’s Services teams and related commissioned services are able to offer (with success stories as examples), with the aim of reducing mistrust.

In light of the above-noted research findings in the area of adverse childhood experiences, it may also be useful for the local CAMHS to collect and analyse data on ACEs by type in patients who access the service. Such analysis could usefully inform future NHS and Council spending on prevention efforts, facilitating better future projection of service development needs by improving our understanding of different types of ACEs as drivers of need for mental health support services locally in children and young people.

Autistic children and young people

One issue that emerged throughout the evidence sessions for this inquiry was that the pandemic has been particularly hard on autistic children and young people.

Whilst autism is not a mental health problem itself, people on the autistic spectrum are more likely to experience mental health problems than the general population. Depression and suicidal ideation – resulting in proportionately high rates of suicide amongst autistic adults – is particularly common amongst autistic people, with the National Autistic Society noting in its guide for parents and carers of autistic children that “*social isolation and loneliness are the most common reasons for suicidal thoughts*”. The difficulty experienced by autistic children and young people when communicating with and attempting to understand their peers puts them at particular risk for social isolation and loneliness, when compared to non-autistic children and young people.

Autistic children and young people have been found to be at increased risk of harm online as well as in physical social settings, compared to their non-autistic peers, as they “tend to be overly trusting”; and online grooming and sexual exploitation is emerging as a growing area of concern regarding autistic children. Adolescents who are autistic (and those with other disabilities) also report greater feelings of distress than their non-disabled peers after experiencing online bullying and victimisation.

It is important to understand these issues in the context of the pandemic, which caused children and young people to socialise more online than before. Autistic children and young people may have experienced more harm online during the pandemic as a result of bullying and victimisation, so it may be wise for Children’s Services, local NHS services, and other partners to attempt to assess this. Better understanding and analysis of the issue could be used to mitigate residual harms which may be costly in the longer term, in terms of both social impact on the individual, and increased financial costs to schools and wider services as a result of increased mental health conditions (such as depression) in this complex and vulnerable population.

It was observed by many witnesses and members of the Task Group that not only had diagnosis times for autism lengthened during the pandemic, but the support available to this group had reduced considerably. In some areas, this reduced support was directly attributable to increased waiting times for diagnosis: without the correct diagnosis, autistic children and young people will not have appropriate provision in school or college to help them succeed. In other areas, such as activity groups outside of school or college, where autistic children can learn skills or to socialise with their peers (including sports teams or other groups formed around specific interests), reduced support was for a variety of reasons. Activity groups experienced extended periods of time where they were unable to meet at all due to national rules. Even in the absence of those rules, because autistic people tend to be very sensitive to physical sensation, some of the most basic protection measures against disease transmission such as mask wearing are all but impossible for this section of the population.

A generation of children has missed many of their opportunities for socialisation. We must acknowledge that those missed opportunities may have had a greater impact on autistic children compared to non-autistic children, because of their greater pre-existing need for learning how to socialise. It must also be noted that, especially for autistic children with high care needs, pandemic-related changes in routine and the reduced contact with family, carers, and educators is likely to have had particular adverse impact. This, however, will be difficult to measure, and care must be taken to plan services and programmes around the knowledge that there will be wide gaps in the data available to us about this particularly disadvantaged cohort. We must also recognise that there has also been considerable impact on the families of these children, who may have experienced particular hardship during the pandemic as a result of additional or altered caring responsibilities. Further, the strong hereditary patterns in autism mean it is likely that some of these children's family members may also be autistic (although not necessarily diagnosed) and require support themselves.

Post-diagnostic support for our autistic children and young people, and their families, remains fragmented and difficult to access due to lack of resource. The resulting problems are compounded by a widespread dearth of understanding in our communities about the autistic spectrum, which means that autistic children and young people remain at increased risk of being socially isolated, bullied, and otherwise coming to harm. Improved understanding and acceptance of autism in Westminster will improve quality of life and lead to more chance of equality of opportunity for autistic residents.

CAMHS informed the Task Group that, as of September 2021, autism diagnosis times for children were averaging 12 months locally. (Adults thought to be on the autism spectrum are seen by a separate diagnostic service, with different waiting times.) Full autism assessments are highly specialised, requiring multi-disciplinary teams, and were logistically challenging to organise throughout the pandemic. Witnesses advised that long waiting lists were a growing cause for concern across London.

The Task Group were pleased to be informed that additional investment was being used to recruit more clinical staff and test a new method of assessing young people. Additionally, clinicians aimed to implement a 'one-stop shop' model, in use elsewhere in the NHS for other issues, so the assessment can be carried out in one day to try and shorten autism diagnosis waiting times. Both of these initiatives were welcomed by the Task Group, but there was strength of feeling that local partners must also set urgent targets to ensure reduction in autism diagnosis waiting times.

Recommendation: *CCG targets for bringing down autism diagnosis waiting times should complement the Council's new SEND strategy, and improving access to post-diagnosis support should be a priority for local services. We must also increase knowledge and acceptance in our communities and schools about the autistic spectrum, and the resulting differences in communication and understanding.*

Service Provision in Westminster

Local authorities play a vital role in helping children to have mentally healthy childhoods. During the pandemic, Westminster City Council adapted its core local support offer to reach a wider group of young people. For example, fully funded training was delivered to a wide range of public sector and community/voluntary sector partners, upskilling staff to support young people experiencing challenges around mental health and suicide. A total of 316 community-based staff are now qualified Youth Mental Health First Aiders.

The commissioning landscape of mental health and wellbeing services for young people is complex, with provision a mix of statutory and non-statutory children's services, CCG-commissioned services, local authority commissioned services, voluntary sector services, and services provided by faith and community groups. Mental health support is also provided through schools.

Westminster has a rich array of services available to children and young people in the borough that promote good wellbeing and support those with mental health needs. These services tend to cluster around three main points of access for children to get support - schools, NHS services, and in the community. This chapter explores the availability of emotional wellbeing and mental health services, as well as their funding, accessibility, and co-ordination.

Community services

Westminster has an array of community services available to support young people's wellbeing. These services are not commissioned with the sole aim of supporting children and family's wellbeing or mental health, but as part of the early intervention offer. Local services for young people include five Youth Hubs and the 100+ youth organisations who form the membership of the Young Westminster Foundation. These Youth Hubs are:

- Amberley Youth Project (Future Men)
- Avenues Youth Project
- Churchill Gardens Youth Club (Future Men)
- Fourth Feathers Youth & Community Centre
- St Andrew's Club

These youth clubs were very highly regarded by the young people from whom the Task Group heard evidence. These witnesses told Members that the clubs should to be protected at all costs, and access widened so that more of Westminster's young people can benefit from them. Some youth clubs across Westminster also offer support through outreach work. This is particularly important for young people who may not feel able to come to the youth clubs. Detached youth work involves making contact with young people in their own territory and exploring their needs, building relationships with them and providing support. This work tends to operate across designated areas, specifically targeting "hot spots" for disruptive youth activity as

identified by partner organisations including the Council, local businesses and the police.

The young witnesses to the inquiry explained that, in their experience, clubs which advertise fun activities (e.g. a sport or creative class) are the best way to introduce conversations about mental health, rather than advertising an activity explicitly about mental health. The Council recognises that provision of 'low-level' mental health support through these youth hubs may reach a greater number of young people, and are currently piloting a Youth Mental Health Worker working across all five of Westminster's youth hub, who can provide additional support to an estimated 200 young people a year (aged 11-19 years old). The Task Group welcomed this initiative.

Westminster also operates 3 family hubs across the borough: Bessborough Family Hub, the Portman Centre, and Queen's Park children's centre. Family hubs bring together services including health visiting, CAMHS, maternity and early years support, police, schools and local voluntary service providers such as youth clubs and youth providers. The Family Hub approach is underpinned by Westminster's Early Help strategy. The service believes that Early Help is all about identifying needs within families early and providing co-ordinated support before problems become even more complex. This strategy helps families provide healthy childhoods for their children, supporting their wellbeing and reducing the risk of mental health issues.

Members considered that services were sometimes targeted at treating or supporting specific issues, and not the child or family themselves. For example, a Member of the Task Group gave an example of a family receiving domestic abuse support from one service, benefit advice from another, and mental health support from another, meaning they had to repeat their story to support services several times.

A child-centred support model such as the Family Hub therefore reduces the burden on families of having to repeatedly provide the same information (some of which may be traumatising, such as in cases of domestic abuse) to multiple services. The Family Hub approach practised across Westminster is a system where a family is supported by one professional who can make referrals directly to specialist support where required. This is known as the one worker, one plan model. The Task Group welcomed this approach.

Recommendation: *The Council should continue to roll out the one plan, one worker model approach for supporting children and families through family hubs such as the Portman Centre.*

Schools

As noted, the Government has committed additional funding to children's mental health services. Alongside action to improve access to specialist and crisis services for children and young people, there has been a growing focus on mental health promotion, prevention of poor mental health, and early intervention, particularly in schools.

Headteachers who provided evidence to this inquiry spoke about the challenges of supporting both their pupils and their staff during the pandemic. They reflected that teaching staff had become more open with one another about their own wellbeing and mental health, and that this open dialogue in turn helped children to talk more about their own feelings. However, they also stated that parents had developed sometimes unrealistic expectations that schools can diagnose and treat or “fix” mental health issues quickly. The below sections explore two ways in which schools are trying to support the mental health of their students.

Mental Health Support Teams

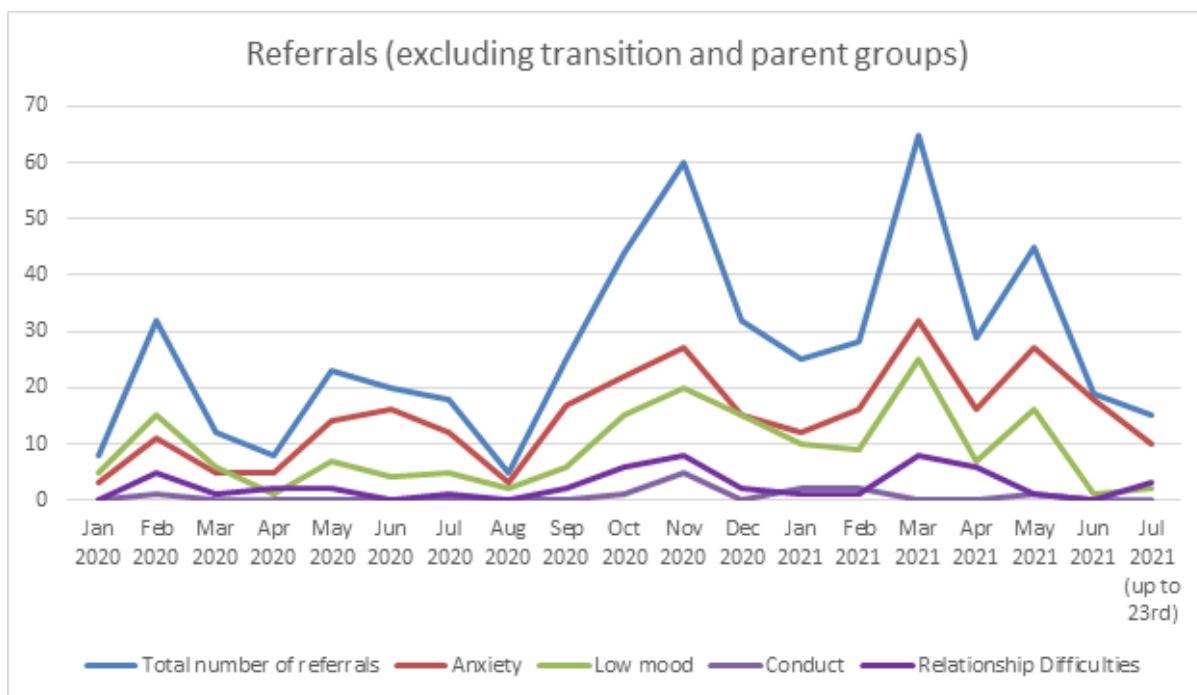
Schools and colleges are crucial to help identify mental health needs of children and young people at an early stage, with workers who can refer young people to specialist support and work jointly with other services. *The Transforming Children and Young People’s Mental Health Provision green paper* set out the government’s proposed action plan, funding MHSTs in schools and assigning senior mental health leads.

MHSTs have three core functions, whilst having sufficient flexibility to tailor delivery models and interventions to local needs, and dovetail with existing provision. These core functions are:

- 1) Delivering evidence-based interventions to children and young people with mild to moderate (Tier 1 and Tier 2) mental health issues
- 2) Supporting the senior mental health lead in each education setting to introduce or develop their whole-school or -college approach to mental health and wellbeing
- 3) Giving timely advice to education staff and liaising with external specialist services, to help children and young people get the right support and complete their education

Westminster has school based MHSTs working in 43 schools and colleges across the borough. Figure 3, below, shows the quantity and reasons for referrals into the service during 2020/21.

Figure 3.



This figure demonstrates that the number of referrals decreased during lockdowns and summer holidays when schools were empty, and peaked with some weeks' lag after restrictions were eased and after pupils returned from summer holidays.

The local MHST service provider, MIND, informed the Task Group that there was a gap between their early intervention support offer and CAMHS services: many cases were above the MHST threshold, but did not meet the CAMHS threshold. MIND also informed the Task Group of increased risk and complexity of presentations amongst young people seeking support through MHSTs, including young people with eating disorders, self-harming, and experiencing suicidal ideation. Early evaluations of MHSTs across the country indicate these issues are common and not localised to Westminster.

Whole-School Approach to improving mental health

Members of the Task Group raised concerns that some schools' behaviour policies are not wellbeing- or trauma-informed. Westminster City Council recognises the negative impact exclusions can have on a young person's mental health. Published research shows that many vulnerable children and young people are at high risk of being disciplined or removed from mainstream education because of their behaviour. Although it is important to protect the learning environment for all children, and behaviour policies are therefore essential, it is increasingly understood that exclusions often have an immediate and longer-term negative impact on a child or young person's wellbeing and future opportunities.

Recommendation: *The Council should encourage all schools across the City to have trauma-informed discipline and attendance policies.*

The Bi-Borough Inclusion Strategy commits to reduce the number of children and young people being removed from mainstream education as a result of their

behaviour. Westminster's School Inclusion pilot shows how the Council supports schools to work with their challenging and vulnerable students.

Case Study: The School Inclusion Pilot

The programme targets children at risk of exclusion in years 4 to 7 as they transition from primary to secondary school, plus a small cohort of children re-integrating back into mainstream secondary school following off-site placement in alternative provision. At the time of writing, all 63 children with whom the pilot team worked have remained in school without any permanent exclusions.

Although Westminster's Early Help team-led inclusion programme is well-regarded, they currently only have the capacity to support 2.8% of students who receive at least one fixed-term exclusion each year. This strategy on its own is therefore unlikely to have a marked impact on exclusion rates.

The pilot does, however, encourage schools to adopt a trauma-informed approach when developing and implementing policies and practices. This encourages schools to proactively consider the reasons why children might be behaving badly, and to attempt to address the underlying causes of the behaviour, rather than reactively disciplining children. For example, St Augustine's CE High School, since being involved with the pilot, has developed new trauma-informed attendance and behaviour policies.

A Government-commissioned review found that school leadership was a major driver of school exclusions. Differing leadership approaches lead to significant variation in the culture and standards between schools: something that would result in a child being excluded from one school may not be seen as grounds for exclusion in another. The Council should support all schools across the Borough to develop trauma-informed policies and take whole-school approaches to improving wellbeing and mental health. Such support could take the form of the Council leading on development of a toolkit for local schools to create new trauma-informed policies.

A whole-school approach would likely contribute to improved mental health of all children and young people within the setting, not just those with identified mental health problems. This approach is comprised of eight key principles (Figure 4), with strong and knowledgeable leadership at the heart of the approach. The approach is graduated, from universal and light-touch strategies through to more targeted and specialist forms of support for children in most need.

Figure 4.



Whilst the Council only manages 13 community schools, it can encourage and share best practice amongst all schools across the borough. Councils have a clear role in providing strategic oversight to support schools, as well as using their expertise to facilitate conversations locally and bring school nurses, educational psychologists, and other relevant professionals together to work to clear objectives.

Recommendation: *The Council should encourage all schools to adopt the Whole-School Approach to improving wellbeing and mental health, and ensure their work is trauma-informed to get the best from children in need of support.*

NHS Services

Westminster’s local NHS services provide a range of support to children and young people in need of mental health support. These services range from primary care provided by GP surgeries, secondary and tertiary care, and highly-specialist crisis support and inpatient services.

GPs

General Practitioners (GPs) are a frontline service for young people struggling with mental ill health. They can play a crucial role in providing advice to young people, and in making referrals to specialist support which can be life-changing. However, evidence suggests that young people’s experiences of accessing support through their GP is variable across Westminster.

NHS primary care services have been under strain nationally as a result of the Covid-19 pandemic, and this picture is reflected in Westminster, with evidence that demand continues to increase. Local primary care services carried out over 50% of appointments face-to-face: at the time of writing, Westminster was the only area in CNWL to achieve this target in primary care.

Whilst a lot of low-level mental health needs can be managed in primary care, this is dependent on the skills and confidence of their GP. A recent research report by *Young Minds* examined young people's experiences of receiving mental health support through their GPs. The report found that 55% of 16-25 year olds surveyed had visited their GP about a mental health concern, but that 67% of those surveyed would prefer to be able to access support for their mental health without going to see their GP. This was echoed in Healthwatch's evidence to the Task Group. Young people in Westminster told Healthwatch that they would not wish to approach their GP for support; there appeared to be little awareness that this route can be a gateway to more specialist and appropriate mental health support.

Case Study: HealthSpot

Healthspot is an in-house GP surgery for young people aged 11-19, living in Tower Hamlets run by the youth service Spotlight. The service is available every Tuesday, between 4-8pm. Young people will be able to have a 15-30 minute consultation with a GP, over the phone or via video, about their health needs. A youth worker will be available to attend the meeting with the young person if they wish.

Using the Association for Young People's Health GP Toolkit, Primary Care Networks in Westminster should consider adopting the following principles:

- Accessible and flexible appointments, including allowing young people to have face-to-face or virtual appointments depending on what best meets their needs
- Listening to young people and giving them time to become comfortable, including offering longer appointments if necessary
- Piloting community GP sessions, where GPs have slots to hold consultations in Westminster's youth centres and family hubs
- Involving young people in patient participation groups
- Appointing a 'champion' in the practice for young people's health

Adopting these principles should make the experience of seeing your GP more inclusive and thereby encourage more young people to seek support.

Recommendation: *The Council should work with Primary Care Networks across Westminster to pilot youth-friendly GP sessions*

From young people that have visited their GP for support in Westminster, they fed back to Healthwatch that the information they were given on mental health support felt outdated. Some GPs may have limited knowledge of what services are available to young people across the Borough, and efforts to extend social prescribing for children and young people may in part improve this.

What is social prescribing?

Social prescribing is a process by which NHS services link patients with non-medical forms of support within the community. This process may involve a healthcare professional (HCP) referring a patient to link worker who in turn develops a non-clinical

plan for the patient, connecting the patient with community organisations to improve mental wellbeing and other areas of people’s lives. Alternatively, it may simply involve the HCP providing information about community groups and recommending the patient engage with them. Activities can include arts and music, volunteering, gardening, or sports and exercise, for example.

The principles of social prescribing are:



NO TWO SOCIAL PRESCRIPTIONS ARE THE SAME. THEY MEET DIFFERENT NEEDS FOR DIFFERENT PEOPLE.



CENTERED AROUND “WHAT MATTERS TO THE PATIENT”.



PATIENTS AND SOCIAL PRESCRIBER’S SPEND QUALITY TIME TOGETHER EXPLORING SOLUTION.

Whilst social prescribing is now common practice amongst GPs for adult patients, it is less so for young patients. Since April 2020, GPs across the borough have been a part of Westminster Social Prescribers programme, managed by One Westminster. This embeds seven social prescribers in GP surgeries across Westminster, to support adult residents to improve their health and wellbeing. Both GPs and their young patients could benefit if Westminster’s social prescribing programme was rolled out to children and young people across the borough as part of our broader approach to supporting mental health needs in our community.

Recommendation: Westminster’s Social Prescribing Programme should be broadened to include children and young people.

Child and Adolescent Mental Health Services (CAMHS)

Child and Adolescent Mental Health Services (CAMHS) teams normally comprise multi-disciplinary staffing including psychiatrists, psychologists, psychotherapists, family therapists, nurses, and social workers.

Westminster’s 2021 CAMHS activity generally tracked above 2020 levels, averaging a 12% increase on the previous year up to mid-August. Whilst this began to level off instead of continuing to rise, it confirmed increased levels of need amongst young residents with serious mental health problems. Clinicians also raised concerns to the Task Group about the rising number of young people presenting with complex needs, especially the increased number of children and young people presenting with eating disorders.

The Task Group heard from many young witnesses that their perception of CAMHS was often negative, citing the long waiting times and the fear of being labelled or judged for their mental health issues. However, speaking with young people that have used the service, their perceptions quickly changed. They felt supported and listened to by the clinicians. The Task Group welcomed this, and acknowledged the commitment shown by the clinicians throughout the pandemic in supporting vulnerable children. The inquiry found that the perception of CAMHS amongst parents and teachers was also fairly negative. Headteachers raised with the Task Group their frustrations that if a child and/or parent misses a CAMHS assessment or first appointments, they are discharged. However, given the lengths of waiting lists and levels of demand, CAMHS has to ensure appointments are opened where possible for those able to attend. Some flexibility is needed when dealing with vulnerable children and young people, but the service may benefit from further emphasising why these rules exist and how important it is that appointments are adhered to.

Current NHS projections indicate that around a third of children and young people with a diagnosable mental health condition will receive NHS care or treatment in 2020/21. However, with an anticipated rise in true prevalence of mental illness, there would need to be substantial new investment over the next ten years just to maintain this 1/3 figure beyond 2021. Westminster CAMHS has received funding to increase its clinical capacity so that the service will be able to see 35% of the local children and young people who have mental health problems meeting threshold for referral. For Westminster CAMHS this means an increase from 1,050 children accessing services in 2020/21 to 1,363 in 2021/22. However, given the scale of the mental health crisis amongst children and young people, which existed prior to the pandemic and has been exacerbated by its impacts, the Task Group questioned whether this funding was enough.

The NHS has recently concluded consultation on new waiting time standards for mental health services. For children, young people and their families/carers presenting to CAMHS, proposals are that they are assessed within 4 weeks from a referral being made. The current target is set at 12 weeks, and the Task Group was informed that Westminster CAMHS consistently meets this target, with an average waiting time of 7-9 weeks. The Task Group was also informed that the waiting times for mental health support in schools from MHSTs is much lower, between 1-2 weeks, and these combined would help CAMHS meet this new target of 4 weeks. Whilst it is positive that MHSTs are providing mental health support to children and young people, they are not able to provide crisis interventions, nor are they equipped to support those with complex mental health difficulties.

CAMHS waiting times have been repeatedly raised by witnesses to the Task Group as a serious case for concern; therefore, these new targets are welcome. However, with the increased demand on these services as children and young people recover from the pandemic, it will be important to ensure that these new targets can be met with good-quality services.

Recommendation: *The Central North-West London NHS Trust should allocate a greater proportion of its budget to children and adolescent's mental health services. This recommendation should not come at the cost of dis-investing in frontline NHS services elsewhere. If this cannot be achieved, the Task Group would support its partners in asking central Government for further funding for CAMHS services.*

In addition to the above recommendation, Members of the Task Group should convene a roundtable involving all local partners and providers of mental health and wellbeing services across Westminster. The purpose of this roundtable should be to determine, discuss, and assess gaps in services and jointly estimate how more young people can be supported before they reach NHS crisis care.

Westminster CAMHS also informed the Task Group that CNWL were in the process of developing a new 16-25 Young Adults Service, to better bridge the gap between CAMHS and adult mental health services. It will provide support to young adults transitioning from CAMHS to Adult Mental Health Services, extend support to 25 years of age for LAC and those in the justice system, and improve the wellbeing and recovery of young adults on waiting lists and those in post-treatment. This bridged support will be vital in ensuring young people can reach the support they need in early adulthood, and its development was warmly welcomed by the Task Group.

The co-ordination and promotion of local mental health services

This section moves beyond types of service provision, to discuss the environment and conditions needed for a local mental health system to function optimally.

Co-ordination between services

Not all services in Westminster that support our community's wellbeing are commissioned through the local authority or the NHS. There are many community and voluntary groups improving wellbeing and mental health, which may not be known to the Council. For example, many young people across Westminster turn to mentors for support, as well as culture- and faith-based organisations. Co-ordination between public sector services and these groups could help ensure all children and young people across the borough are aware of the support available to them.

Westminster has some excellent examples of strategic multi-agency working, with the Council's Early Help Boards an example of this. These Boards are central to the Council's new framework for Early Help, the framework being based on networked collaboration, seeking to reduce duplication and maximising the use of all partner resources across local areas. The boards consist of senior representatives from local partners, statutory, private, and voluntary sector. The Task Group were told by the Bi-Borough Directorate for Children's Services that the benefits of this partnership working were sustained throughout the pandemic.

These multi-agency approaches should be continued and expanded to include relationships with all local organisations it is possible to reach, so that local

practitioners become more aware of available services across the borough and their referral pathways. *Our Time*, commissioned to provide workshops to families affected by parental mental illness in Westminster, informed the Task Group that all of their referrals so far had been from Children's Services. They were open to widening their referral agencies to include adult services, schools, and other voluntary groups, so that more young people and families could benefit from accessing their services. Increasing the awareness of and engagement with available services, and their referral pathways, amongst service users and practitioners alike could be vital in ensuring children and young people get the help they need.

Awareness of mental health services

The inquiry found that awareness of available mental health services was varied amongst young people across Westminster. Young people said that some schools hold occasional assemblies about mental health and where to obtain support. They recommended to the Task Group that information should be regularly distributed during form time to young people.

The Council are already working hard to promote these services amongst children and young people. To boost awareness, they have piloted the use of a QR code keyring that directs viewers to a page with details of mental health support. However, some young people informed the Task Group that they would not use a keyring as it would be a visible symbol of mental health issues, which may be unhelpful in environments where mental health problems are stigmatised. The young people suggested a mobile phone app would be better, as well as physical advertising in schools, parks, leisure centres, and youth clubs. Posters with the QR code have also been distributed to schools and community providers in Westminster. These steps are welcome, and details of mental health support services should be provided through other communication channels in order to reach a greater amount of young people.

Recommendation: *The Council should create and implement a multi-agency communications campaign for existing mental health and wellbeing services across the Borough. This will include promoting services available in schools, statutory and non-statutory services as well as community and faith-based support.*

The *Young Westminster Foundation* and *Young K&C* operate a services and support directory called *OurCity*. This website hosts activities, programmes, and support for under 25's in Westminster or Kensington and Chelsea. Across the Boroughs, 61 programmes and support providers are listed under health and wellbeing, and 22 under mental health. This initiative is very welcome, and the Council should explore how they can help promote the *OurCity* Directory more widely and if this can be linked to the Council's own mental health and wellbeing offer.

Recommendation: *The Council should work with local partners to improve awareness of the OurCity Directory.*

Whilst the pandemic put significant additional pressure on Westminster's mental health support services, it also compelled services to adapt their service model, offering virtual support throughout the pandemic.

Young people informed the Task Group that they searched online for mental health support through sites such as *The Mix* and *YoungMinds*, or social media, as well as asking peers or trusted adults for advice. A research project by *Place2Be* (prior to the pandemic) found that children and young people wanted a combination of face-to-face and digital support. Westminster City Council jointly commissions *Kooth* online counselling and information service for local children and young people aged 11-25 years old to provide free and confidential online information and support. This option is welcomed by the Task Group.

Breaking the cycle of stigma

Young people in Westminster report considerable stigma around mental health conditions. For example, *Young Healthwatch* informed the Task Group that young people were reluctant to seek help through their GP due to fear of being stigmatised or "labelled", or potentially being bullied by peers. Similar fears were raised with seeking help through CAMHS. To enable young people to seek appropriate support at the right time, we must continue to support efforts to destigmatise mental health conditions and drive anti-bullying initiatives generally.

Young people told Westminster *Young Healthwatch* that youth clubs and community centres that offer sports sessions or creative activities would be the best way to introduce conversations about mental health in a safe environment, rather than advertising an activity explicitly about mental health. The *Young Westminster Foundation* found that young people often felt 'very supported' by their youth clubs throughout the pandemic, compared with other sources of support. These groups could provide useful outlets for children and young people, as well as appropriate non-school environments to normalise conversations about difficult topics, supported by adults with some training in safeguarding.

Reaching all our communities

Westminster's health inequalities are well documented and are the subject of ongoing Council efforts to reduce local gaps in health outcomes. The Task Group heard that the Council's Public Health team are prioritising a joined-up professional approach to addressing health inequalities across the Westminster community. There are many underlying factors involved in health disparities, including differences in culture and ethnic backgrounds, the effects of which can be seen in differing outcomes. Young witnesses told the Task Group that cultural attitudes to mental health can also sometimes prevent them and their parents from seeking help. A local population with major differences in cultures has a range of implications for mental health practice locally, including around the ways that people view health and illness, to their resulting health behaviours, externalising loci of control, treatment-seeking patterns, and the nature of the therapeutic relationship. These differences must be considered when designing, developing, and delivering services for Westminster's young people and

their families. There are some voluntary groups in London whose work takes into account these differences in approach, including Autism Voice UK based across the river in Lambeth and Southwark.

Autism Voice UK has produced some high quality research on differing attitudes to autism in minority ethnic communities, including religious aspects, and recommends culturally sensitive education to address these attitudes and resulting behaviours. Westminster City Council and its local partners could take learning from this report or even commission Autism Voice UK to co-produce similar work specific to Westminster, with a focus on overcoming cultural stigma and improving understanding and acceptance in different communities – not just for autism, but for mental health conditions more widely.

Westminster City Council oversees a commissioned Community Champions programme. Community Champions are neighbourhood volunteers across the borough who run a variety of health and wellbeing campaigns, community days, and weekly activity groups that link residents to local services.

The Task Group proposes investigating expansion of this programme, or operating a similar model for a Mental Health Champions programme. Any such programme must be designed and delivered with safeguarding at its heart. Children and young people with mental health conditions are often particularly vulnerable, so any volunteer programme should take concrete steps to ensure solid safeguarding and monitoring procedures are implemented throughout, with clear and measurable outcomes, including wellbeing-related outcomes, specifically determined to allow assessment of the programme. For this reason, a pilot or feasibility study ought to be carefully developed, trialled, and iterated as necessary until we are confident in our model, before such a scheme is rolled out more widely. Safeguarding vulnerable children and young adults is something we refuse to get wrong.

Recommendation: Westminster should investigate feasibility of a community Mental Health Champion programme, similar to the existing Community Champion programme.

Funding and sustainability of services

Whilst funding continues to improve for emotional wellbeing and mental health, it still trails far behind what is needed to address the growing mental health crisis amongst children and young people. Much of the recent Government funding has focused on mental health support within education settings and the NHS, and additional funding provided to the youth sector has focused on improving infrastructure and provision. There has been little consideration from central Government of what communities and local Government can do to promote positive wellbeing, and as a result, there is little space in the system for community-based emotional health and wellbeing services.

The Task Group was pleased to learn that children and young people's emotional wellbeing and mental health is a priority for the Council, local health partners and wider local partners. As such, the offer of support available is made up of a mixture of

commissioned support (local authority and CCG) and directly delivered support (Local authority and partners). The CCG commissions the large majority (87%) of the £4.88m of local emotional wellbeing and mental health services (including the majority of local CAMHS services and the MHSTs in schools) with the Council commissioning the remaining 13% (£0.63m). However, this doesn't include the wider wellbeing services that have key contributory roles.

Both the Council and the Trust clearly have a strong partnership built on shared values and desired outcomes for Westminster residents. This is illustrated in the Joint CCG and Bi-Borough Children and Young People's Emotional Wellbeing and Mental Health Plan 2019-2020, where it's clear that both the CCG and local authority have improved their joint commissioning. The Task Group has learnt that integrated commissioning can sometimes unlock more resources that could benefit children and young people across Westminster. The Task Group recommends that the Council explores the benefits as well as challenges of integrated commissioning options with CNWL.

Community wellbeing and mental health services are crucial in preventing escalation to later mental ill health. The piloting of a youth mental worker across Westminster's youth hubs is a clear example of community-based early intervention work. However, services need the security of long-term funding for projects to allow them to build relationships in our Westminster community, not short-term funding with no guarantee of extension upon achieving set KPIs. One of the main concerns presented to this inquiry by witnesses was the sustainability of pilot services and the seemingly-bureaucratic requirements that accompany some funding streams. Running pilot projects enables local authorities to test innovative solutions to societal problems, but long-term funding must be guaranteed if the pilot is shown to have positive outcomes for its service users.

Recommendation: *The Council should make funding for children's services a key priority in its City for All Public Affairs Strategy.*

Westminster City Council, compared with other local authorities, funds a broad range of early intervention and targeted children's services, and if possible secures external funding sources to support these services due to budgetary constraints. Whilst further funding for children's services from central Government is still crucial, if this is not forthcoming, the Council should prepare to reappraise its budgets to prioritise essential services such as those supporting mental health in our community, including children's and youth services across the borough.

Prioritising early intervention and prevention

The growing local, regional and national concerns about young people's mental health and wellbeing has led to increasing emphasis being placed upon promotion of wellbeing, prevention of ill health, and early intervention. At Westminster City Council, early intervention is a strategic priority to improve the life chances of children and their families. Intervening early to prevent problems from developing brings several advantages, including intervening before patterns become ingrained and difficult to

reverse, reducing the burden on young people and their families, and reducing the costs associated with treating mental disorders.

Witnesses informed the Task Group that whilst CAMHS referrals in Westminster had increased during the pandemic, the increase was lower than that of neighbouring boroughs. Westminster has a strong early intervention offer, and it was therefore likely that children and young people were being supported before they met the criteria for CAMHS referral. The Task Group were proud that the Council were prioritising early intervention and had a seemingly effective service offer. If this lower increase in referrals can be shown to be directly attributable to the early intervention offer, our strategy should be shared with other local authorities as best practice; the Local Government Association (LGA) offers platforms for sharing knowledge such as this, and Children's Services may wish to produce a report to present to the LGA for wider dissemination of its success in this area.

Westminster City Council also has a strong Early Help offer, and has committed to transform our pre-birth to 5 years old offer (known as the early years stage), with an aim to improve integration between NHS maternity services and the Council's early years services. This will include looking at opportunities to strengthen the way the Healthy Child Programme is delivered, to ensure that children are supported throughout the crucial early years and to become school-ready. Targeted provision will also equip parents and professionals to focus on the importance of speech, language and communication to a child's development.

The Task Group welcomed the emphasis the Council places on supporting families who show signs of struggling in a child's early years. However, continued support relies not just on funding but on staffing for delivery, and it must be noted that key midwifery services (where early family problems can be identified) and health visiting services are struggling to meet demand, partly because of pressures that existed prior to the pandemic, and also because of pressures arising from the pandemic.

Past early years, Westminster's community-based emotional health and wellbeing services support children and young people when they have concerns about their thoughts, feelings or behaviours that are persisting. These services sit below the clinical threshold for CAMHS. Open-access drop-in hubs offer an effective way of delivering these services; these hubs are designed to provide additional capacity and are not designed to replace the vital support provided by statutory services. A recent study carried out found that clinical outcomes in the voluntary and community sector, such as these early support hubs, are comparable to those reported in school-based and statutory mental health services.

They are designed to offer easy-to-access, drop-in support on a self-referral basis for young people with emotional health and wellbeing needs up to age 25. This model is one that is recognised internationally with a network of these kind of services being established in Australia, Ireland, Israel and Denmark.

Case Study: Headspace, Australia

Headspace began in 2006 to address the mismatch between need and provision of mental health services among adolescents, and provides tailored, holistic mental health support to 12-25 year olds. It has since developed into a network of one-stop-shop centres across Australia. Headspace is accessed by over 100,000 young people each year and now operates in 131 communities.

In the Health and Wellbeing Centres Task and Finish Report , it was recommended that the Council should include an adolescent component to the Health and Wellbeing Centre (previously discussed) which is planned as part of the regeneration of the Church Street area. This could be offered as a drop-in model along the lines of the Headspace example. Since that report was published in 2018, the Council have agreed funding for an enhanced support service for young adults called 'Bridging the Gap'.

Case Study: Bridging the Gap

Bridging the Gap (BTG) is the planned 16-25 integrated wellbeing and employment hub in Westminster, funded through Westminster City Council's MyWestminster fund. BTG is initially a two-year pilot, including a range of our existing services supplemented by additional youth and mental health support. The service will offer a one-stop-shop for 16-25 year olds to access place-based holistic and flexible provision, led by VCS partners. The key services that will be offered to young people will be mental health services, employment, education and training, sexual health, substance misuse, and housing & benefits support.

This service typifies the forward-thinking and collaborative ethos of the Council and is warmly welcomed by all Members of the Task Group. If the service proves successful, the Council should not only provide it with long-term sustainable funding, but should expand the age range to include all adolescents in Westminster.

Whole-Community and Whole-Council approaches

Whole-Community Approach

Developing mentally healthy communities involves service providers and professionals to provide support where required, but can be driven by young people themselves, their friends, their families, and the wider community. Witnesses and young people told the Task Group that they relied heavily on their personal support networks throughout the pandemic. Local peer networks, that also need to be supported through a whole-community approach to improving mental health. This can be achieved, for example, by offering mental health first aider training to teenagers and young adults across the Borough, not just professionals.

Within the community, social determinants of mental health include the economic status of the community, levels of neighbourliness, degree of personal safety, levels of loneliness, the quality of housing and open spaces and personal relationships with families, friends and neighbours. Specific models such as neighbourhood committees,

peer leadership and Community Champions have the potential to be applied within a 'whole community' approach to improving mental health.

Case Study: The Wigan Deal

This deal is an informal agreement between Wigan Council and everyone who lives or works there to work together to create a better Borough. Over a period of six years, public services in Wigan have been through a major process of transformation, based on the idea of building a different relationship with local people known as The Wigan Deal. The transformation in Wigan has included four main components; asset-based working, permission to innovate, investing in communities and place-based working. For example, the Council commits to ensure easy, timely access to good quality GP services seven days a week and the community pledge to register with a GP and go for regular check-ups in order to take charge of their own health and wellbeing.

Whilst the Wigan Deal will be difficult for any local authority to replicate, an ambition that can be replicated is putting the resilience and wellbeing of the entire community front and centre.

Whole-Council Approach

From maintaining Council-owned parks and open spaces, to building affordable homes with more access to amenities, to supporting training and employment opportunities, many different teams and services within Westminster City Council make a positive impact on our residents' wellbeing, including that of our younger residents. Whilst the Council practices good multi-agency and bi-borough working in many respects, bringing our own different directorates together with the same overarching goal – to improve wellbeing and mental health of children and young people – would enable a more efficient and co-ordinated approach to mental health and wellbeing within the Council. The City for All strategic plan offers an opportunity for services to define and co-ordinate wellbeing-related objectives.

Recommendation: *Improving the wellbeing of all residents should become a strategic priority in the City For All plan, with baseline data collected to allow measurement of any changes.*

In addition to the Council activities and recommendations discussed throughout this report, use of the Mental Wellbeing Impact Assessment tool (MWIA) may be helpful for some Council projects specifically aiming to measure their impact on mental wellbeing. However, well-established tools such as Health Impact Assessments (HIAs) or Integrated Impact Assessments can be used to capture potential impacts on mental wellbeing in addition to wider health, environmental, and equality impacts, and these types of impact assessment may be more suitable for some Council workstreams than MWIAs. Conducting appropriate impact assessments on current and future Council projects, programmes, and policies would enable measurement of future successes achieved through a whole-Council approach to wellbeing and mental health in Westminster.

Recommendation: *The Council should develop high-quality guidance on when different types of impact assessments should be used, and this should be applied to policies, programmes, and projects.*

Conclusion

The COVID-19 pandemic shone a spotlight on existing health inequalities in Westminster and the rest of the UK, and the pandemic's impacts have accelerated rising levels of mental health issues amongst our residents, particularly our vulnerable and younger residents. However, it has also brought together local partners with a renewed sense of urgency and ambition to tackle this growing crisis. This shared determination came through strongly throughout the inquiry. The Task Group were pleased with the Council's programme of work with local partners to support children's and young people's mental health and wellbeing.

Westminster City Council's Early Help offer is considered exemplary. It provides an array of innovative targeted and universal support available to children and young people across the borough. Where there are any gaps in provision, the Council has made significant progress in addressing them, and are working to develop a truly comprehensive offer.

In common with every other local authority across the country, Westminster's early intervention services could be expanded if additional funding was made available. Costs rise each year, but funding does not rise in line with costs. Whilst the Council runs several services in tandem with local partners to boost the early intervention mental health offer in the borough, these are predominantly pilot or smaller-scale programmes. One concrete action Westminster City Council can take is lobbying central Government for greater funding allocations for children's and youth services, as well as appropriate funding for NHS mental health services. The potential savings for other services including education settings, NHS crisis care, and the criminal justice system, as well as improved outcomes for individual children, young people, and families, warrant more sensible strategies for investment.

Children's Services alone cannot shoulder the burden of the Council's approach to the rising levels of mental health needs in Westminster's youth. A whole-Council strategy is required to ensure resident wellbeing is as the heart of all Council policy.

Whilst the local authority has a central role to play in co-ordinating local partners, community services, schools and the NHS all play equal roles in supporting families to provide healthy and happy childhoods. The local NHS must prioritise reducing waiting times for CAMHS and autism services, and working with local partners to improve the community-based mental health offer for young people across Westminster.

Through improving the awareness of all services and their referral pathways, with targeted communications campaigns aimed at young people at risk of developing

mental health issues, we can make these services more accessible and less daunting to our children and young people.

The Task Group hopes that the recommendations put forward in this report will bring about a whole-community approach to improving mental health and wellbeing amongst the City's youngest residents.

Witnesses to the Task Group

The Task Group took written and verbal evidence from the following professionals and groups;

- Westminster Young Healthwatch
- The Young Westminster Foundation
- Westminster City Council's Public Health Team
- OurTime, Service Provider
- Westminster City Council's Sport, Leisure & Active Communities Service
- MIND, Mental Health Support Teams in Schools (MHSTs) Service Provider
- Westminster City Council's Children's Services Team
- Westminster Youth Council
- Principal, Beachcroft AP Academy
- Deputy Headteacher, Gateway Academy Primary School
- Westminster Children and Adolescent Mental Health Services (CAMHS)

Evidence has also been collected from internal and external research, evaluations of Council strategies and policies, and reviews of evidence provided to the Business and Children's Policy and Scrutiny Committee.

Members of the Task Group express their thanks and gratitude for the input received by all witnesses.

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Business and Children's Policy & Scrutiny Committee

Date:	2 February 2022
Classification:	General Release
Title:	2020/21 Work Programme
Report of:	Head of Governance and Councillor Liaison
Cabinet Member Portfolios:	Cabinet Member for Business, Licensing and Planning Cabinet Member for Young People and Learning
Wards Involved:	All
Policy Context:	All
Report Author and Contact Details:	Artemis Kassi akassi@westminster.gov.uk

1. Executive Summary

1. This report asks the committee members to consider items for the Committee's 2021/2022 work programme.

2. Meeting dates for the 2021/2022 year

- 2.1 The Committee is advised that the remaining scheduled meeting date for the 2021/2022 year is:
 - 31st March 2022

3. Suggested topics

- 3.1 The February meeting will cover a review of the School Performance Strategy and a report on School Uniform. The School Uniform report is for the Committee to receive an update from the School Standards team on how it intends to work with schools to lower the cost of school uniform, in accordance with the Education (Guidance about the Costs of School Uniforms) Act 2021.
- 3.2 Committee members are participating in a scrutiny task group investigating the mental health and emotional wellbeing of children and young people in

Westminster, led by Cllr Karen Scarborough (Chairman of the Business and Children's Policy and Scrutiny Committee). The work of this task group is close to being finished, with a view to finalising the report soon after Children's Mental Health Week (7-13 February). The Committee may already wish to consider and topics suitable for future task group work in the next municipal year.

- 3.3 The Committee is therefore asked to reflect on and discuss the suggested work programme for the remainder of the municipal year. Items suggested for inclusion in the March agenda are reports on the al-fresco dining scheme and the Westminster Investment Service. Items which the Committee may additionally wish to consider at its March meeting include papers on Affordable Housing (from a planning perspective – how to ensure the viability of a development whilst delivering on affordable housing unit targets) and the changes to the Gambling Policy.

If you have any queries about this report or wish to inspect any of the background papers, please contact Artemis Kassi

akassi@westminster.gov.uk

Appendix 1 – Work Programme
Appendix 2 – Terms of Reference

WORK PROGRAMME 2021 - 2022
Business and Children's (BC) Policy and Scrutiny Committee

ROUND ONE 26th April 2021		
Agenda Item	Reasons & objective for item	Represented by
Cabinet Member Q&A	To update the committee on key areas of work within its remit and the Cabinet Member's priorities	Cabinet Member for Young people and Learning, Cllr Tim Barnes
Cabinet Member Q&A	To update the committee on key areas of work within its remit and the Cabinet Member's priorities.	Cabinet Member for Business and Planning, Cllr Matthew Green
Local Safeguarding Children's Partnership Annual Report	To receive the Local Safeguarding Children's Partnership Annual Report for 2019-2020.	Angela Flahive, Head of Safeguarding Review and Quality Assurance

ROUND TWO 19th July 2021		
Agenda Item	Reasons & objective for item	Represented by
Cabinet Member Q&A	To update the committee on key areas of work within its remit and the Cabinet Member's priorities.	Cabinet Member for Young people and Learning, Cllr Tim Barnes
Cabinet Member Q&A	To update the committee on key areas of work within its remit and the Cabinet Member's priorities.	Cabinet Member for Business, Licensing and Planning, Matthew Green
Gambling Policy	To review the proposed revisions to the Councils Gambling Policy and to provide comment on the proposal of Local Area Profiles.	Raj Mistry, Executive Director of Environment and City Management Kerry Simpkin, Head of Licensing, Place and Investment Policy

ROUND THREE 7th October 2021		
Agenda Item	Reasons & objective for item	Represented by
Cabinet Member Q&A	To update the committee on key areas of work within its remit and the Cabinet Member's priorities	Cabinet Member for Young people and Learning, Cllr Tim Barnes
Cabinet Member Q&A	To update the committee on key areas of work within its remit and the Cabinet Member's priorities	Cabinet Member for Business, Licensing and Planning, Matthew Green
School Inclusion Pilot	To receive an update on the School Inclusion Pilot and comment on strategies through which more schools can be encouraged to become involved in trauma informed approaches	Sarah Newman, Bi-Borough Executive Director of Children's Services Steve Bywater, Supporting Families Strategic Manager Nicky Crouch, Director of Family Service

Health and Safety in Schools	To receive an update on health and safety in schools. This issue was referred to the Committee by the Audit and Performance Committee	Sarah Newman, Bi-Borough Executive Director of Children's Services Ian Heggs, Bi-Borough Director of Education
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ROUND FOUR 29th November 2021		
Agenda Item	Reasons & objective for item	Represented by
Cabinet Member Q&A	To update the committee on key areas of work within its remit and the Cabinet Member's priorities	Cabinet Member for Young people and Learning, Cllr Tim Barnes
Cabinet Member Q&A	To update the committee on key areas of work within its remit and the Cabinet Member's priorities	Cabinet Member for Business, Licensing and Planning, Matthew Green
Oxford Street Regeneration Project	To receive an update on the Oxford Street Regeneration Project	Debbie Jackson, Executive Director for Growth, Planning and Housing
Update on CYPMH Task Group	Chairman to provide a progress update on the CYPMH Task Group and discuss interim themes and recommendations	Chairman and Members of the scrutiny task group

ROUND FIVE 2nd February 2022		
Agenda Item	Reasons & objective for item	Represented by
Cabinet Member Q&A	To update the committee on key areas of work within its remit and the Cabinet Member's priorities	Cabinet Member for Young people and Learning, Cllr Tim Barnes
Cabinet Member Q&A	To update the committee on key areas of work within its remit and the Cabinet Member's priorities	Cabinet Member for Business, Licensing and Planning, Matthew Green
School Performance	To review the 2021 School Performance Strategy	Sarah Newman, Bi-Borough Executive Director of Children's Services Ian Heggs, Bi-Borough Director of Education
School Uniform	To receive an update from School Standards team on how it intends to work with schools to lower the cost of school uniform, as per the Education (Guidance about the Costs of School Uniforms) Act 2021. [Please Note: Guidance is yet to be implemented]	Sarah Newman, Bi-Borough Executive Director of Children's Services Ian Heggs, Bi-Borough Director of Education
Children and Young People Task Group Report	To review the Children and Young People's Mental Health Task Group report	Chairman and Members of the Scrutiny Task Group

ROUND SIX 31st March 2022		
Agenda Item	Reasons & objective for item	Represented by

Cabinet Member Q&A	To update the committee on key areas of work within its remit and the Cabinet Member's priorities	Cabinet Member for Young people and Learning, Cllr Tim Barnes
Cabinet Member Q&A	To update the committee on key areas of work within its remit and the Cabinet Member's priorities	Cabinet Member for Business, Licensing and Planning, Matthew Green
Al-Fresco Dining Scheme	To review the future of Al-Fresco dining in Westminster and to review what works best for residents and businesses ahead of summer 2022.	Debbie Jackson, Executive Director for Growth, Planning and Housing Raj Mistry, Executive Director of Environment and City Management
Westminster Investment Service	To receive an update from the Westminster Investment Service and to review its priorities	Debbie Jackson, Executive Director for Growth, Planning and Housing

UNALLOCATED ITEMS

Agenda Item	Reasons & objective for item	Represented by
Out of Area Care Placements and Semi-Independent Accommodation	To scrutinise the use of out of area care placements and semi-independent accommodation for looked after children	Sarah Newman, Bi-Borough Executive Director of Children's Services
NEET & Apprenticeships	To hear an update from the NEET task group set up by the Cabinet Member for Business & Planning and the Cabinet Member for Young People & Learning.	
Social Care Review 2021	To hear how the Council intends to implement recommended changes from the Children's Social Care Review 2021 [Please Note: Review is yet to be completed]	Sarah Newman, Bi-Borough Executive Director of Children's Services

TASK GROUPS AND STUDIES

Subject	Reasons & objective	Type
Children and Young People's Mental Health and Well-being	To understand children and young people's mental health needs in the Borough, what services Westminster provides and what can be improved	In progress Research Task Group
The Mound	To scrutinise the Marble Arch Mound	Extraordinary Meeting (27 OCT 2021)
Licensing	To review in detail the Council's licensing policy	

Appendix 2. Terms of Reference

BUSINESS AND CHILDREN'S POLICY AND SCRUTINY COMMITTEE

COMPOSITION

Eight (8) Members of the Council (five Majority Party Members and three Minority Party Members), but shall not include a Member of the Cabinet.

Four (4) co-opted Members with voting rights i.e. one co-opted representative each from the Church of England and Roman Catholic Diocesan Education Boards and two Parent Governor Representatives. 2 co-opted Members without voting rights, i.e. two Headteachers of Westminster maintained schools.

NB: The voting rights of the co-opted only extend to matters relating to Education.

TERMS OF REFERENCE

- (a) To carry out the Policy and Scrutiny functions, as set out in Article 6 of the Constitution in respect of matters relating to all those duties within the terms of reference of the Cabinet Member for Business, Licensing and Planning and the Cabinet Member for Young People and Learning.
- (b) To carry out the Policy and Scrutiny function in respect of matters within the remit of the Council's non-executive Committees and Sub-Committees, which are within the broad remit of the Committee, in accordance with paragraph 13 (a) of the Policy and Scrutiny procedure rules.
- (c) Matters within the broad remit of the Cabinet Members referred to in (a) above which are the responsibility of external agencies and in particular to scrutinise matters relating to the provision of Health Services within Westminster, including the consideration of any reports referred by the local Health Watch.
- (d) To scrutinise the duties of the Lead Members which fall within the remit of the Committee or as otherwise allocated by the Westminster Scrutiny Commission.
- (e) To scrutinise any Bi-borough proposals which impact on service areas that fall within the Committee's terms of reference.
- (f) Any other matter allocated by the Westminster Scrutiny Commission.
- (g) To have the power to establish ad hoc or Standing Sub-Committees as Task Groups to carry out the scrutiny of functions within these terms of reference.
- (h) To oversee any issues relating to Performance within the Committee's terms of reference.
- (i) To have the power to scrutinise those partner organisations that are relevant to the remit of the Committee.
- (j) To consider any Councillor Calls for Action referred by a Ward Member to the Committee.

February 2021

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February 2021

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