

Children Safeguarding Committee

GB 14/080b

Held on Monday 3 March 2014, 3.00 pm At Meeting Room 1, Hawthorn House, Ransom Wood, Rainworth, NG21 0HJ

Present:

Elaine Moss (Chair) Chief Nurse, NHS Newark and Sherwood CCG and

NHS Mansfield and Ashfield CCG

Cheryl Crocker Director of Quality and Patient Safety, NHS Nottingham

North and East CCG

Chris West Head of Quality and Patient Safety, NHS Newark and

Sherwood CCG

Rebecca Stone Assistant Director of Quality and Patient Safety, NHS

Nottingham North and East CCG

Nicola Ryan Head of Assurance, NHS Bassetlaw CCG

Val Simnett Designated Nurse Safeguarding Children, NHS Newark

and Sherwood CCG

Gary Eves Senior Public Health & Commissioning Manager,

Nottinghamshire County Public Health

In attendance:

Chris Few Independent Chair, Nottinghamshire Safeguarding

(for item CS/14/015) Children Board

Ellen Swainston (minutes) Team Secretary/Project Assistant, NHS Newark and

Sherwood CCG

Apologies:

Sharon Thompson Designated Nurse Looked After Children, County

Health Partnerships

Cathy Burke Nurse Consultant Safeguarding, NHS Bassetlaw CCG Victoria Walker Consultant Community Paediatrician and Named

Doctor for Looked After Children, Sherwood Forest

Hospitals Foundation Trust

Rebecca Sands Designated Doctor for Safeguarding Children, NHS

Newark and Sherwood CCG

Emma Fillmore Designated Doctor, Nottingham University Hospitals
Doreen Warrington Care Commissioning Manager, GEM CSU

CS/14/001 WELCOME AND INTRODUCTIONS

The Chair welcomed members to the meeting and introductions were made.

CS/14/002 APOLOGIES FOR ABSENCE

Apologies were noted as outlined above.

CS/14/003 DECLARATIONS OF INTEREST

There were no declarations of interest noted.



CS/14/004 MINUTES OF THE MEETING HELD ON 29 NOVEMBER 2013

The minutes of the meeting held on 29 November were accepted as representing an accurate record of discussions subject to the following amendment:

p.3 para 4 - CCH to be changed to 'CCG'

ACTION: Ellen Swainston

CS/14/005 MATTERS ARISING NOT ELSEWHERE ON THE AGENDA

The Chair outlined the outstanding actions and the following was noted:

 CS/13/052 - Sharon Thompson advised that a quarterly report of CIC medical assessments is available.

ACTION: Carried Forward – Quarterly report to be circulated for information and to be agenda item at next meeting.

 CS/13/069 – With regard to the Sepsis Bundle, it was noted that there is a CQUIN with both Nottingham University Hospitals (NUH) and Sherwood Forest Hospitals Foundation Trust (SFHFT. It was acknowledged that there seems to be a gap with primary care

ACTION: Elaine Moss and Cheryl Crocker to raise at the Area Team Safeguarding meeting.

• **CS/13/070** – Memorandum of Understanding (MOU) between the Integrated Commissioning Hub and CCGs to be shared with this group

ACTION - carried forward - Ellen Swainston to chase

 CS/13/071 – A paper detailing safeguarding training uptake for CCG staff was tabled.

Briefings have gone out from the Chief Nurses across all 6 County CCGs promoting the online training modules. It was noted that Nottingham North and East and Newark and Sherwood CCGs have the highest uptake. A number of staff have indicated that there are issues with the online training delivered via ESR

ACTION: Staff training to be reported to individual CCG governing bodies

Staff training to be reviewed in year.

ACTION: Ellen Swainston to add to forward plan

CS/13/078 - Elaine Moss suggested that it would be helpful to collate a list of members who sit on sub groups to represent more than their own individual CCG.



ACTION – carried forward - Ellen Swainston to collate information

JOINT DISCUSSION WITH CHILDREN SAFEGUARDING MEMBERS

CS/14/006 TRANSITION BETWEEN CHILDREN AND ADULT SERVICES

The meeting was advised that a workstream has been set up as part of Think Family, which itself was set up as a result of an Ofsted thematic review

Think Family is led by Anthony May and David Pearson, Nottinghamshire County Council and Val Simnett and Julie Gardner are health members on the group.

ACTION: Members to consider whether there is sufficient health representation

CS/14/007 GP SAFEGUARDING ASSURANCE FRAMEWORK.

The meeting was told that a performance tool has been chosen and will be discussed at the next meeting of the safeguarding network. The performance tool was presented for information and discussed.

ACTION: Val Simnett to request that GP reports are added to point 4 of the tool

ACTION: Val Simnett to request that MAPPA information requests are added to the tool

It was noted that Mansfield and Ashfield and Newark and Sherwood CCGs are advising GP practices to set up a safeguarding secure nhs.net email account to be used for sharing safeguarding information. This model would enable MAPPA, MARAC MASH and invitations to Child Protection Conferences to be promptly and securely sent and received. It is hoped to be expanded across all County GP practices. This process would require support from the LAT

ACTION: Val Simnett to raise at the next LAT safeguarding network and report back progress to next meeting

CS/14/008 THINK FAMILY

A paper was presented to the group which summarises the context of Think Family as part of the Government's Troubled Families Agenda.

An Ofsted inspection had identified that there is no strategic lead for Think Family.

CCGs are represented on the Think Family Group and the Childrens Commissioning Forum.

The lack of data from MASH which identifies the number of families affected was noted together with the need to act on information which is received in order to focus multi-agency working on the most troubled families.

Think Family will be on the agenda for provider quality scrutiny panels and it was requested that any exceptions are reported back to this group.



ACTION: All members of provider quality scrutiny panels

CS/14/009 LOCAL AREA TEAM REPRESENTATION AND GOVERNANCE ARRANGEMENTS

A discussion took place about the possibility of Area Team representation on this committee together with the purpose this might serve as there is an Area Team Safeguarding Forum.

ACTION: Elaine Moss to clarify LAT position on representation on the group and confirm agreed governance and reporting arrangements to the next meeting

CS/14/010 PREVENT

It was identified that PREVENT was gaining increasing prominence as part of the Governments counter-terrorism strategy and it was important to ensure that all NHS organisations had measures in place to equip staff to recognise and respond to vulnerable people at risk of radicalisation. It was confirmed that CCGs would continue to ensure that providers had appropriate arrangements in place as per PREVENT strategy and that this would continue to be undertaken through the Quality Scrutiny processes.

CS/14/011 MASH AUDIT REPORT

The MASH Heath Audit Report was presented to the group.

Between 30-50% of children's referrals made by health workers were recorded as NFA. However, analysis of the information identified that in 23% of these cases, the referrer had agreed to signposting to other services or to commence a CAF. An additional 25% of the NFA cases were either requesting or sharing information with the Local authority.

There were concerns around the quality of some referrals. An action plan has been submitted to the MASH Operational Group and will be monitored.

It was noted that referrals are recorded by discipline rather than provider and it was suggested that re-categorisation by provider organisation would enable feedback to be provided to organisations.

It was noted that the flowchart at Appendix 2 of the report will be rolled out across provider organisations.

In response to this report, the MASH Governance Group has agreed that an advice line would be set up.

An update on the action plan at Appendix 1 of the report to be brought to the June meeting. It was requested that timescales be reviewed in view of the expected staff changes at the MASH.

ACTION: Val Simnett to review timescales



The committee signed off the audit report subject to the review of action timescales.

It was requested that a letter be sent to Rebecca Vickers, who has now left the CCG, to thank her for her work on the report.

ACTION: Chris West to send letter

Elaine Moss requested that the report be taken to the NSCB for information and to encourage partners to review their own referral practice and consider undertaking a similar audit. Chris Few, Independent Chair, NSCB agreed.

ACTION: Val Simnett to send report to Chris Few

The committee noted that the Early Help Unit would be joining MASH from April 2014.

MASH Annual Report will be added to the Safeguarding Annual Report.

A mid-year review of the MASH will be added to the agenda for the August meeting.

ACTION: Ellen Swainston to add to forward plan

The group was told that a consultation document 'Reducing Avoidable Injuries in Children and Young People: A Strategy for Nottingham and Nottinghamshire 2014-2020' had been published. The consultation closes 18 April 2014.

Nottingham City and Nottinghamshire County Public Health colleagues put together the document but it was noted that there had been limited engagement. This has been discussed with Dr Kate Allen who will discuss further with public health colleagues.

ACTION: Ellen Swainston to forward document to committee members for review

CS/14/012 MARKERS OF GOOD PRACTICE S11 SELF-ASSESSMENT UPDATE

Val Simnett advised that the S11 Markers of Good Practice has been added to the 2014/15 workplan for review in-year. Outstanding areas were noted as Training and Paediatric Medical Assessments.

CS/14//013 CQC CLA AND SAFEGUARDING REVIEWS

The committee was told that a mock inspection would be undertaken in Bassetlaw.

ACTION: Nicola Ryan to ask Cathy Burke to provide feedback via email.

Clarity has been requested from the CQC as to whether the 12 cases to be included in the inspection are by CCG or local authority area.

Val Simnett said that Nottinghamshire is preparing ahead as far as possible and providers are ready. Acute trusts have raised a concern that they may not have capacity to assemble chronologies.



It was noted that Val Simnett and Cathy Burke are working collaboratively on plans.

ACTION: Val Simnett to share currently available information with Chris West and Elaine Moss

With regard to the Ofsted inspection, Gary Eves advised that Lucy Peel would contact Val Simnett and Cathy Burke to discuss contacts and request shared information.

CS/14/014 GP ATTENDANCE AT INITIAL AND REVIEW CHILD PROTECTION CONFERENCES

GP attendance at Initial and Review Child Protection (IRCP) conferences remains an issue with communication problems cited as one reason.

A revised approach is now required to reinvigorate the process and engage GPs.

Elaine Moss advised that concerns have been raised with the Area Team. The influence to enforce and engage with GPs lies with the Area Team and could be taken forward through the contracts.

It was noted that GPs regularly comment that they received invitations to IRCP conferences too late to enable attendance. GPs do not appear to be aware that evidence may be submitted and that and that attendance is not always required. It would also be useful to let GPs know that a 'nil' response would also be beneficial. Teleconferencing was also suggested as a possibility.

ACTION: VS To discuss with the Area Team possibility of adding contribution to Case Conferences to the GP safeguarding performance indicators currently under development through the Safeguarding Network

ACTION: Secure e-mail accounts in practices for receipt of invitations to be developed as item 007 above

ACTION: Val Simnett to provide feedback to the local authority; Royal Mail should not be used, use secure email addresses, consider teleconferencing.

It was requested that the current process between social care and GPs is mapped, consider how issues could be resolved and map what the process should be.

Gary Eves stated that a shared understanding of issues would be useful.

CS/14/015 NSCB FEEDBACK

Excellence in Safeguarding Tool

The Excellence in Safeguarding Tool was received for information. The tool was developed in response to a number of serious case reviews and has been promoted to providers.

Chris Few was welcomed to the group.



Following a new version of Working Together and a new Ofsted inspection regime for Looked after Children, Nottinghamshire County Council had instigated a review of the NSCB. This has now been completed and fedback to NSCB board members. A response document has been put together.

One of the recommendations highlighted whether the membership of the Board was appropriate and rationalisation of health representation was suggested.

It was acknowledged that management of the board would be made easier with a smaller membership and that is sometimes difficult to discuss issues. However, it was noted that effective communication and sharing of information would have to be ensured if board membership was reduced.

This idea had first been broached two years ago and all health partner organisations had indicated at that time that they still wanted to be part of the board.

A discussion took place and the following points were noted:

- Is the level of the decision makers on the board correct?
- Do the professionals who attend have the authority to take executive decisions?
- Would it be possible to reduce provider representation at the board
- Is it possible to reduce the size of the board without putting risk into the system? It was felt that, from a health perspective, risk would be increased.
- In some other areas designated professionals—only attend the LSCB which
 appears to work well. However Designated Professionals are clinical
 advisors to the Board and do not have the authority to make executive
 decisions.
- It is likely that NHS England would want to be represented on the board as they link directly with GPs

Elaine Moss said that she would attend the NSCB to represent herself and Cheryl Crocker, with Cheryl Crocker to deputise when necessary.

ACTION: Nicola Ryan to discuss this item with Denise Nightingale and advise Elaine Moss of the outcome

ACTION: Val Simnett to discuss NSBC representation at the safeguarding professional meeting and provide feedback to Chris Few

CS/14/016 CAMHS TIER 4 REGIONAL UPDATE FROM NHS ENGLAND

An update was received and noted on the regional and national initiatives underway to address the shortage of CAMHS tier 4 beds.

The Nottinghamshire county CAMHS review is ongoing and the number of young people placed out of area was noted. The Health and Wellbeing Board (HWB) have raised concerns. Gary Eves and Anthony May will be meeting with the HWB and the Overview and Scrutiny Panel.



Consideration is being given to how to work jointly to increase services for young people and stem referrals to tier 4.

CAMHS is on the risk register and it was agreed that this paper does not alter the current risk assessment.

ACTION: Val Simnett and Gary Eves to review the risk register wording of the CAMHS risk.

CS/14/017 RISK REGISTER

The Risk Register was reviewed and discussed and the following points noted:

- Risk no. 1 to be reviewed and the level of risk increased
- Risk no. 3 to be removed from the safeguarding risk register. CCGs need to ensure that this item is on the providers' risk registers and is monitored via the usual processes.
- Risk no. 4 it was noted that two named GPs have been identified. This
 risk to be removed from Risk Register.
- Risk no. 6 to be reworded.

ACTION: Val Simnett

CS/14/018 ANY OTHER BUSINESS

There was no other business to discuss.