

Working in Partnership to Safeguard Children & Young People

Minutes of the

NSCB Full Board Meeting

14 March 2018

Venue:
County Hall
Rufford Suite
Riverside Block

V0.3

Nottinghamshire Safeguarding Children Board Children, Families and Cultural Services County Hall West Bridgford Nottingham NG2 7QP

Tel No: 0115 97 73935

Nottinghamshire Safeguarding Children Board Wednesday 14 March 2018 - Attendance List

NAME ROLE, ORGANISATION PRESENT APOLOGIES DEPUTY

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				ATTENDED
Chris Few (Chair)	Independent Chair, NSCB	Y		
Julie Gardner (Vice Chair)	Associate Director for Safeguarding & Social Care, Nottinghamshire Healthcare NHS Trust	Y		
Colin Pettigrew	Corporate Director, Children and Young People's Services, Nottinghamshire County Council	Y		
Steve Edwards	Service Director, Youth Families & Social Work, Nottinghamshire County Council	Y		
Marion Clay	Service Director, Education, Learning & Skills, Children and Families, Nottinghamshire County Council		Α	
Laurence	Interim Service Director, Commissioning and		Α	
Jones	Resources Children and Family Services, Nottinghamshire County Council			
Joe Foley	Group Manager, Safeguarding, Assurance and Improvement group, Nottinghamshire County Council		Α	
Paul Johnson	Service Director - Strategic Commissioning, Access and Safeguarding Adult Social Care, Health and Public Protection, Nottinghamshire County Council	Y		
Kate Allen	Consultant in Public Health, Children's Commissioning and Consultant in Public Health, Children's Integrated Commissioning Hub and Public Health, Nottinghamshire County Council	Y		
Cathy Burke	Deputy Chief Nurse (Designated Nurse Safeguarding Adults, Children & LAC), NHS Bassetlaw Clinical Commissioning Group (CCG)		A	
Val Simnett	Designated Nurse, Safeguarding Children, NHS (Nottinghamshire) 5 CCGs		Α	Jane Brady
Fiona Straw	Designated Doctor for Safeguarding, NHS (Nottinghamshire) 5 CCGs	Y		
Nadya James	Consultant Community Paediatrician, Designated Doctor for Safeguarding, Nottingham University Hospital NHS Trust	Y		
Tina Hymas- Taylor	Head of Safeguarding, Sherwood Forest Hospitals NHS Trust	Y		
Rick Dickinson	Acting Deputy Director of Nursing, Midwifery & Quality – Doncaster & Bassetlaw Hospitals NHS Foundation Trust	Y		
Elaine Moss	Chief Nurse & Director of Quality, NHS Newark & Sherwood and Mansfield/ Ashfield CCGs	Y		
Nichola Bramhall	Director of Nursing and Quality, Nottingham North and East, Nottingham West and Rushcliffe Clinical Commissioning Groups		Α	
Nicola Ryan	Interim Chief Nurse, Executive Lead Quality and Safety NHS Bassetlaw CCG, Retford Hospital, North Road, Retford, Notts,		Α	
Bella Dorman	Head of Safeguarding, Nottingham University Hospital NHS Trust, Trust Head Quarters, 3 rd Floor, City Hospital Campus, Hucknall Road, Notts	Y		
Maria Stanley	Ambulance Operations Manager, Quality and Compliance, Safeguarding, East Midlands Ambulance Service	Y		
Bushra Ismaiel	Designated Doctor for Safeguarding, Doncaster & Bassetlaw Hospitals NHS Trust		Α	
Bob Bearne	Assistant Chief Executive,	Y		

	Derbyshire, Leicestershire, Nottinghamshire & Rutland Community Rehabilitation Company Ltd			
Nigel Hill	Head of National Probation Service, Nottinghamshire		Α	
Andrew Gowan	Head of Public Protection, Nottinghamshire Police	Y		
Clare Mayne	Service Manager, Early Intervention Team, CAFCASS		Α	
Leanne Monger	Newark & Sherwood District Council (District & Borough Council representative)		Α	
Sue Fenton	Manager, Home Start Nottingham (voluntary sector representative)	Y		
NSCB Officers	, , ,			
Steve Baumber	Service Manager, Partnerships and Planning, (P/T), Safeguarding Assurance and Improvement Group, NCC	Y		
Bob Ross	NSCB Development Manager	Υ		
Trish Jordan	NSCB Training Coordinator	Υ		
Michelle Elliott	Minute Taker - NSCB Administrator	Y		
NCC Councillo				
Tracey Taylor	NCC Lead Member with responsibility for Children's Social Care	Y		
Guests (and ag	enda item/s attended)			
Emma Shand (Presentation)	Advanced Social Work Practitioner, Transitions Team, Younger Adults – Newark & Bassetlaw, Meadow House, NCC	Y		
DS Jane Asher (Presentation)	Nottinghamshire Police Counter Corruption Unit, Sherwood Lodge, FHQ	Y		
Holly Smitheman	Programme Officer, Programmes & Projects Team, Resources, NCC.	Y		
Janet Smith	Service Manager, MASH – Fieldwork Services – MASH Assessment & EDT	Y		
Diamond Emmanuel (Observer)	Designated Doctor for Safeguarding, Nottingham University Hospitals NHS Trust	Y		
Nisha Tailor (Observer)	Foundation Year 2 Doctor in Public Health	Y		

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Agenda Item	Discussion	Action
& Paper circulated		
Welcome &	The Chair Chris Fow (CF), welcomed everyone to the meeting. Introductions	
Apologies	The Chair, Chris Few (CF), welcomed everyone to the meeting. Introductions were made and apologies were noted.	
Minutes of the meeting 6 December 2017 (Appendix A)	The minutes of the meeting held on the 6 December 2017 were reviewed for accuracy and actions:-	
	The following amendment was noted on Page 7 – under the item Children and Social Care Act 2017 – BR confirmed that the child death process has now moved from the Department of Education to the Department of Health.	
	CF confirmed that a number of actions have been completed in the minutes and the remaining items are on today's agenda.	
	Fiona Straw (FS) shared this would be her last Board meeting as she had accepted a new role as Clinical Lead for SARC. CF sincerely thanked FS for all her hard work on the Board and Vice Chair for CDOP and wished her all the very best in her new role. FS confirmed that Diamond Emmanuel, will be the board representative for designated doctor for Safeguarding NHS (Nottinghamshire) 5 CCGs. CF welcomed Diamond Emmanuel to the Board meeting.	
	The minutes were agreed as an accurate record of the last meeting.	
Independent Chair's	CF drew members' attention to the Independent Chair's update and in particular highlighted the following point:-	
update (Appendix B)	CF shared that the governance response to Working Together Consultation was published 2/3 weeks ago. Some areas within the consultation are going to be reviewed and adjusted. The main elements of the draft Working Together will remain the same. The final version of Working Together is due to be published at the end of May.	
	No questions/comments.	
NSCB Executive Report (Appendix C)	Julie Gardner (JG) drew members' attention to the NSCB Executive update and confirmed that a lot of business was dealt with at the February meeting and in particular highlighted the following key points:-	
	PIR Q3 - JG noted that there were some gaps in the Performance Information Report Q3 which related to data and commentaries to children affected by parental alcohol/drugs misuse, mental health issues work is ongoing to address these issues.	
	'Pregnancy Liaison Meetings' introduced in Bassetlaw has been identified nationally as good practice. SB confirmed that Debbie Reece-Pollard has won the award for developing the pregnancy liaison meetings. SB to add a brief summary in the NSCB June Newsletter. Confirmation regarding similar processes are being introduced in the rest of the County.	
	Business Plan - The latest updates and additional actions for 2016-18 have been reviewed and agreed, a number of actions were signed off as completed and a few items have been carried forward for inclusion in the 2018-20 Business Plan. (On today's agenda)	

No questions/comments. Closure of Sue Fenton (SF) shared Ashfield Home Start is still due to close on 31 March **Ashfield** 2018 despite the support of the County Council. SF confirmed it has been **Home-Start** agreed to spend the final quarter Grant Aid money to cover services April to update June. The team will be working on a part-time basis with the support from HS Nottingham allowing them to continue to support 20-25 families, many of (Verbal) whom are subject to Child Protection Plans or Children in Need Plans. During these months looking to find additional funding. As a County wide group of schemes an application has been made for LIS money (2018/21) and if successful, Notts Home-Starts collectively, can look at ways to continue to deliver a service supporting families in Ashfield as well as BGR, Mansfield and Newark. It was noted that the relevant short fall of money was £30,000 to continue with the service. No questions/comments. Fiona Straw (FS) provided for the following verbal update:-**SARC Update** (Verbal) NHS England initiated a tender process last year for integrated hubs to be established within the East Midlands (Lincolnshire, Derbyshire, Nottinghamshire, Leicestershire, Rutland and Northamptonshire). The Hubs will provide medical care and holistic assessment following sexual abuse for children and young people. Nottingham University Hospital will be the lead provider. The Service will go live on 1 April 2018 Two Hubs one located in the University Hospital and one in Northamptonshire Health Care Trust A lot of work has taken place with young people around the area asking for suggestions around what they would like to call the unit - it was agreed to change the name to East Midlands Children and Young People Sexual Assault Service (EMCYPSAS) Website: www.emcypsas.co.uk - (Holding page at the moment with a telephone number) working with a webs design company to develop a young people friendly website – which will include videos of the units so the young people are aware of the unit Telephone Number: **0800 1830023** – 24 hours per day, 7 days per week (and will be answered within 60 seconds by a Crises Support Worker). The medical examinations will be carried out between 9.00am - 7.00pm week days, 9.00am to 5.00pm weekends and bank The Service will see children up to the age of 18 Young People 16-18 have a choice as to whether they access the CYP or adult Services Adults with significant needs (Learning disability) up to the age of 24 All children and Young People will be supported by Crisis Support Workers (CSW) All offered sexual health advice Under 13 years old would be invited to come back to the visit the Hubs for follow-up screening for infection or medical concerns if required The Hub will see acute referrals and non-recent referrals

	 Risk Assessment – Pregnancy, Sexually Transmitted Infections, Self-Harm, Domestic Abuse, Child Sexual Exploitation, Female Genital Mutilation A doctor will be available outside of standard working hours if a child/Young Person needs to go to theatre in an emergency The doctor will be able to take forensic samples Therapeutic support will be offered, local to the home of the person FGM is included in the Service A handwritten summary will be provided at the time of examination including what the doctor has been told and the findings, this will be followed up by a formal report and a witness statement provided if required. 	
	Questions/Comments were invited: CF enquired if the Crisis Support Workers are equally prepared to deal with boys as the girls? FS confirmed that the service can provide equally for boys, but there is a problem at the moment very few boys are referred for medical assessments. (The current NUH Service have only seen six boys). Also concerns with Children/Young People with learning or physical disabilities not being referred. Employed specialist nurses to go into the community making communities aware of the service. FS confirmed that there is a team of female and male doctors to carry out medical assessments.	
	JG enquired if the 24 year olds includes problems with mental health issues. FS was uncertain as this point but thought probably not. – FS confirmed that there is going to be changers to adult services which hopefully we will be able to link into. FS to email an electronic leaflet explaining about the East Midlands Sexual	
	Assault Service. – Action : ME to forward a copy with the minutes to Board members. CF thanked FS for an informative update.	ME (done)
Amended JTAI Self Assessments (Verbal)	SB explained the JTAI Working Group meeting took place on the 26 February 2018. Updates were received but there were still quite a few gaps which needs to be completed. Once all the information has been received the Local Authority will complete the Self-Assessment Forms. SB shared that due to the recent Ofsted ILACs focused visit of care leavers it thought that a JTAI inspection will not take place in the immediate future.	
	Action: CF and SB to discuss outside this meeting a suitable time for the Self-Assessment Forms to be presented to the Board.	CF/SB
Transition (Presentation)	CF welcomed Emma Shand (ES), Advanced Social Work Practitioner, Adult Social Care to the meeting. ES explained that the Transitions Team is made up of social workers and community care officer who provide planning, assessment, advice and support services for young people preparing for adulthood.	
	Question/comments were invited on the report.	

TH-T enquired if any agency can refer into the team. ES confirmed that all agencies can make referrals through the NCC Customer Service Centre 0800 500 8080. Once calls are transferred through to the team the referrals are screened depending on age and urgency.

A question was asked where most of the referrals come from - ES confirmed that most of the referrals are from Children Social Care, Integrated Children Disability Services, Special Schools and some from families and carers. Work is ongoing with SENCOs in main stream schools making them aware of the service and providing links.

FS enquired if there was a referral form to complete - ES confirmed the referral forms are completed by the Customer Service Centre over the phone. A question was asked around parental consent and if there are any leaflets/literature which could be handed out to parents to explain the service. ES confirmed there were leaflets available on the NCC website along with the Transition Pathway Protocol or by contacting the duty social worker.

RD enquired if Adult Social Care are aware of the service and do they both work closely together. ES confirmed that the service accepts referrals up to seventeen and a half and will be directly referred to the adult team. Further work is ongoing around promoting early referrals to the service.

ES confirmed the service also work closely with health concerning young people with mental health problems. Some difficulties with transitions between CAMHS to adult services.

The 'Transitions Pathway' is now live on 'Notts Helpyourself' and can be accessed at:

http://www.nottshelpyourself.org.uk/kb5/nottinghamshire/directory/transitions-pathway.page

CF thanked ES for a very informative and useful presentation.

Notts Police Anti/ Counter Corruption Unit (Presentation)

CF welcomed DS Jane Asher (JA) from the Nottinghamshire Police Counter Corruption Unit. JA shared her presentation **raising partnership awareness** of what counter corruption means in terms of improper sexual and emotional relationships and how this affects vulnerable people in the community. How to feedback/report any queries to the counter corruption team.

Direct dial to CCU 0115 967 2751 email address PSUAntiCorruptionUnit@nottinghamshire.pnn.police.uk

Questions/comments were invited on the report.

It was noted that while the presentation related to the police similar issues need to be considered by other organisations who have staff that were in a position to exploit the contact they have with clients.

SB enquired if there has been any cross over with managing allegations and concerns about members of staff and volunteers when the behaviour relates to children. **Action:** SB to email Hazel McKibbin, Temporary SM Safeguarding Children (Strategic) & LADO to contact DS Jane Asher or DI Mike Allen.

SB (done)

Safeguarding	CF thanked JA for a very informative presentation. SB presented the options paper for the new safeguarding arrangements	
Arrangements - Options Paper (Presentation Part 1)	under the requirements of the Children & Social Work Act 2017. SB explained that the report was considered at the safeguarding partners meeting where it was agreed that option 2 was the preferred option. Following the presentation there were group discussions focused around particular questions on the safeguarding arrangements. Maria Stanley left the meeting at 3.10pm.	
	Break/Refreshments 2.55pm – 3.10pm	
Working Together (Feedback Part 2)	The following points were raised from the feedback on the new safeguarding arrangements: • Cross Authority working issues around lack of correspondence between the City and County concerning the development of the new safeguarding arrangements – SB noted that there had been contact with the City and that some of the safeguarding partners were shared between the two areas however it was clear that the City had already agreed their model and were moving forward with it • The practicalities of running the partnership group on a cross authority basis - there will be some shared agenda but will also be items that are so divergent people will not engage • Workforce development training concerns around priorities of resources that the provision of the County would be brought down to the current level of training in the City – It was noted that there are a lot more training opportunities within the County. • Inclusion of service users – positive • Quality assurance group – Monitoring outcomes for children, performance and effectiveness would require very good information for it to function effectively • One group felt that the challenges of the Wood Review were not particularly addressed by option 2, doubted if there would be less meetings and thought there would be a need for more task and finish groups. The only option they believed that would reduce meetings would be to have a joint safeguarding board and they felt that it would still be possible to address the needs of children in different geographic areas and have dual political oversight • It was noted that there is already Cross Authority working with shared procedures managed through a joint procedure subgroup and regular meetings of NSCB and NCSCB Officers and respective independent chairs – CF and CC to discuss further opportunities at the Cross Authority Meetings • Partners attend meetings within the City and County being on both Boards results in duplication of items discussed e.g. Counter Corruption Unit, SARC • SB pointed out that the preferred	

- Representation from schools (acknowledged still to retain DSL forum sits apart from this model) - Difficult as not statutory partners and also the number of different academy trusts etc. Positive that they are included in the safeguarding partnerships meetings. However, we would need to be clear as to how they linked in with strategic groups and quality assurance meetings. It was noted that it will be important to build relationships with the new tier of multi academy trusts
- Provides clarity around leadership expectations of the three safeguarding partners take joint lead rather than LA –Concern who would be able to make decisions and consider who is the right representation at each meeting
- Scrutiny Yes retaining independent Chair in quality and assurance meetings – attend strategic group good idea
- Child death review Currently accountable to independent chair but under the new Working Together this is no longer the case
- The new option provides greater clarity around the strategic leadership of the safeguarding arrangements
- Further work still to do regarding membership of the quality and effectiveness board and other groups
- Ensure clarity as where providers influence and input to maintain engagement – case reviews as appropriate / quality assurance
- Independent Chair will be very important and a process for appointing that person should be devised and people felt that wider partnership should be involved and that lay members should also be appointed
- Would it be possible to incorporate MASH governance in the structure going forward
- Vice Chair should be from one of the statutory partners

SB explained there is still a significant amount of work required to develop the new safeguarding arrangements. The safeguarding arrangements once agreed will need to be submitted to the Department of Education for approval and in addition undergo independent scrutiny. Once Working Together has been published there is a year to implement the new safeguarding arrangements.

Working Together 2018 - CDOP Options Paper (Appendix E)

KA shared that partners agreed to option 2 which is bringing Nottinghamshire County, Bassetlaw and Nottingham CDOPs together to function as a single panel.

Further work is required to work out governance arrangements a meeting is arranged for the 4 April 2018 which will include CDOP Chairs, Health, Social Care and Police.

KA confirmed that the City have reviewed 35 and the County 50 cases within the year.

Expectation in the new working together to align child death review arrangements with clinical care pathways – This has been considered and it was the view of those involved in CDOP that the pathways were complex and that the preferred option would address this issue to some extent but it was not possible to have a model that could deal with all the various clinical care pathways some of which extend out of the County.

No questions/comments.

MASH Report Update (Appendix F)

Janet Smith (Service Manager MASH) and Holly Smitheman (Programme Officer) were welcomed to the meeting. SE presented the MASH update report and highlighted the key points.

SE noted the commitment from all partner agencies concerning safeguarding and working together.

SE shared that within the report it was noted that the quality of the referrals to the MASH has improved. There were still some referrals that did not meet the threshold.

Janet Smith and Devon Allen arranging to attend key meetings and partnership meeting explaining how and when to use the MASH.

The online form is ready just waiting confirmation concerning data protection /GDPR

Questions/comments were invited on the report.

EM suggested from a Health perspective it would be very helpful if further work could be done on inappropriate referrals and referrals not meeting the threshold criteria.

After a short discussion it was agreed for the Multi-Agency Audit Subgroup to complete a piece of work around inappropriate referrals and referrals not meeting the threshold criteria. The audit to include all partner agencies not just health. CF suggested also looking at the significant difference between the numbers of referrals that meet the criteria coming from different areas and is there anything we can learn from this. To include escalation and information sharing.

CF noted that the report is named Children Social Care MASH and that this is likely to detract from what should be a multi-agency ownership of the MASH as a joint commitment.

It was also noted that each individual partner agency are responsible for quality assuring the advice/guidance given concerning inappropriate and appropriate referrals encouraging staff to look at the P2P and speaking to their safeguarding leads before referring into the MASH.

Action: CP confirmed as Chair that the Multi-Agency Audit Subgroup would complete a piece of work around inappropriate referrals and referrals not meeting the threshold criteria.

CP

Ofsted ILACs focused visit of care leavers (Verbal)

SE provided details of the outcome of the recent Ofsted inspection which reviewed the focused visit of the Leaving Care Service.

SB shared that it was a reasonable reflection of where we are at the moment.

The inspectors were impressed with what has been completed and how social workers and admin responded to LAC.

Key findings (areas of improvement) – High caseloads in the LAC and Care Leaving Service and slow to improve the capacity of PA's and Social Workers.

SB noted that there were 400 children taken into care 2008-09 rising to 900 children in 2012, before this some children were brought into care to late and because of this some of the children have significant problems.

No questions/comments.

Next Meeting	Wednesday 13 June 2018, 1.15pm – 4.30pm, John Fretwell Centre, Sookholme Road, Mansfield, Nottinghamshire, NG19 8LL.	
	Meeting ended at 5.00pm.	
AOB	None.	
	It was noted that due to the new safeguarding arrangements being introduced there will be a need for further discussions regarding the funding arrangements for 2019-20.	
	SB noted that the contribution of £7,000 towards training from the School Forum has not yet been agreed. It was noted that this would have a considerable impact on the training charging policy which would have to be revised. SB explained that LJ has written to Marion Clay concerning the School Form Funding suggesting that schools would be charged for each training course. SB mentioned the contribution of £2,000 towards training costs paid by NCC Early Years on behalf of child minder providers has also been withdrawn. LJ to email Early Years.	(40110)
	Safeguarding Board. Bob Bearne (BB) confirmed that it had been agreed that DLNR CRC would make a contribution for both 2017/18 and 2018/19. SB confirmed that no monies had been received. Action : BB to confirm and email correct details to SB.	BB (done)
Budget 2018- 20 (Appendix H)	partner contributions should remain at the same level as the previous nine years with the exception of NHS Bassetlaw CCGs who raised concerns at the level of their contributions compared to other CCGs. It was agreed for the NSCB Vice Chair to write to all the CCGs asking them to resolve how the health contribution to the Board should be divided. SB confirmed that the CCGs have agreed to pay the same contribution as previous years but will not pay towards the Bassetlaw contribution. SB noted that Bassetlaw CCGs also make a contribution to Doncaster	
NSCB Interim	Board members were allocated as leads on particular actions on the Business Plan. SB confirmed that leads will be allocated for each action shortly. SB explained at the Executive meeting on the 14 February it was agreed that	
	Board members approved the NSCB Business Plan 2018-20 as a working document dependent on the new safeguarding arrangements. SB mentioned in the last Ofsted inspection Ofsted were impressed that	
	CF invited comments/questions on the Business Plan for 2018-20 – No questions/comments.	
(Appendix G)	CF shared the new Business Plan 2018-20 includes actions carried forward from the previous Business Plan and will include a section on transitions.	
Business Plan 2018-20	CF explained that the current NSCB Business Plan was for two years. The Executive has signed off majority of the actions as completed.	