



Working in Partnership to Safeguard
Children & Young People

Minutes of the

NSCB Full Board Meeting

20th September 2017

Venue:
Nottingham Racecourse
Colwick Park Close
Nottingham

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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 20th September 2017 - Attendance List

| NAME | ROLE, ORGANISATION | PRESENT | APOLOGIES | DEPUTY |
|--------------------------------------|--|---------|-----------|--------|
| 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 Families and Cultural Services, Nottinghamshire County Council | Y | | |
| Derek Higton | Service Director, Youth Families and Cultural Services, Nottinghamshire County Council | | A | - |
| Steve Edwards | Service Director, Children's Social Care, Nottinghamshire County Council | Y | | |
| Marion Clay | Acting Service Director – Education Standards and Inclusion, Nottinghamshire County Council | | A | |
| Laurence Jones | Group Manager, Early Help Services, Nottinghamshire County Council | Y | | - |
| Joe Foley | Group Manager, Safeguarding & Independent Review, Nottinghamshire County Council | | A | |
| Stuart Sale | Temporary Group Manager, Access and Safeguarding, ASCH&P, Nottinghamshire County Council | Y | | |
| Kate Allen | Consultant in Public Health, Nottinghamshire County Council | Y | | |
| Cathy Burke | Nurse Consultant Safeguarding, NHS Bassetlaw Clinical Commissioning Group (CCG) | Y | | |
| Val Simnett | Designated Nurse, Safeguarding Children, NHS (Nottinghamshire) 5 CCGs | | A | Y |
| Fiona Straw | Designated Doctor for Safeguarding, NHS (Nottinghamshire) 5 CCGs | Y | | Y |
| Nadya James | Consultant Community Paediatrician/Named Doctor for Safeguarding, Nottingham University Hospital NHS Trust | Y | | |
| Tina Hymas-Taylor | Interim 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 | | A | |
| Nichola Bramhall | Director of Nursing and Quality, Nottingham North and East, Nottingham West and Rushcliffe Clinical Commissioning Groups | Y | | |
| Nicola Ryan | Interim Chief Nurse, Executive Lead Quality and Safety NHS Bassetlaw CCG, Retford Hospital, North Road, Retford, Notts, | Y | | |
| 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 | | A | - |
| Bob Bearne | Assistant Chief Executive, Derbyshire, Leicestershire, Nottinghamshire & Rutland Community Rehabilitation Company Ltd | | A | Y |
| Nigel Hill | Head of National Probation Service, Nottinghamshire | | A | |
| Rob Griffin | Head of Public Protection, Nottinghamshire Police | Y | | |

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| Clare Mayne | Service Manager, Early Intervention Team, CAFCASS | | A | - |
| Leanne Monger | Newark & Sherwood District Council (District & Borough Council representative) | | A | - |
| Sue Fenton | Manager, Home Start Nottingham (voluntary sector representative) | Y | | |
| Donna Trusler | Principal, The Manor Academy | | A | - |
| NSCB Officers | | | | |
| Steve Baumber | NSCB Business Manager | Y | | |
| Bob Ross | NSCB Development Manager | Y | | |
| Trish Jordan | NSCB Training Coordinator | Y | | |
| Michelle Elliott | Minute Taker - NSCB Administrator | Y | | |
| NCC Councillor | | | | |
| Tracey Taylor | NCC Lead Member with responsibility for Children's Social Care | Y | | |
| Deputies | | | | |
| Jane Brady for Elaine Moss, Val Simnett | Designated Nurse, County CCGs | Y | | |
| Jonathan Webb for Bob Bearne | Performance and Development Manager, Derbyshire, Leicestershire, Nottinghamshire & Rutland Community Rehabilitation Company Ltd | Y | | |
| Guests (and agenda item/s attended) | | | | |
| Diana Bentley (Child Sexual Abuse - workshop session) | Team Manager for the Social Work Practice Consultants based in the Practice Support Service | Y | | |
| Devon Allen (MASH Review - workshop session) | Group Manager with responsibility for MASH Assessment Service and EDT, CFCS, NCC | Y | | |
| Holly Smitheman (MASH Review - workshop session) | Programme Officer, Programmes & Projects Team, Resources, NCC | Y | | |
| Moira Cordon (MASH Review - workshop session) | Education Adviser, MASH Assessment & EDT, CFCS, Notts | Y | | |

Minutes of NSCB Full Board Meeting, 20th September 2017

| Agenda Item & Paper circulated | Discussion | Action |
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| <p>Welcome & Apologies</p> | <p>The Chair, Chris Few (CF), welcomed everyone to the meeting. Introductions were made and apologies were noted.</p> <p>CF introduced the following new Board members:-</p> <ul style="list-style-type: none"> • Bella Dorman, Head of Safeguarding, NUH NHS Trust • Maria Stanley, EMAS, Ambulance Operations Manager • Tina Hymas- Taylor, Interim Chief Nurse, Sherwood Forest Hospital • Nicola Ryan, Interim Chief Nurse, NHS Bassetlaw CCG • Councillor Tracey Taylor, Lead responsibility for Children’s Social Care, NCC • Stuart Sale, Temporary Group Manager, Access and Safeguarding, NCC <p>It was noted that Cathy Burke, Designated Nurse would also represent NHS England, North Region (Yorkshire and Humber) at the Nottinghamshire Children Safeguarding Board.</p> <p>SB mentioned that we are in the process of employing a candidate for the latter half of the week for the Board Managers role. The preferred candidate is due to start shortly once all the relevant paper work has been completed.</p> | |
| <p>Minutes of the meeting 7th June 2017</p> <p>(Appendix A)</p> | <p>Action 08 from a previous meeting held on 7th December 2016 (Jane Brady) JB to confirm completion date for the action and notify the Board - JB shared that (Val Simnett) VS and herself will be meeting with providers shortly to gain assurance concerning the action plan – to report back to the Board meeting in September – JB confirmed that the CQC Action Plan has been completed and is to be signed off by the Safeguarding Committee in October. Multi-agency aspects will be dealt with through a new group called Children in Care – Service Improvement Forum (SIF) which is chaired by Nicole Chavaudra, COMPLETED.</p> <p>Actions outstanding from the meeting held on the 8th March 2017:-</p> <p>Sarah Lee (SL) to raise with Tony Shardlow (TS) if there is adequate representative from Health on the Steering Group and contact Julie Gardner (JG). JG confirmed that she has had no contact from SL or TS. SB has spoken to Tony Shardlow (TS) who confirmed that there is no Health Representative on the Steering Group. Any issues raised in terms of strategic matters will be dealt with by the Safer Nottinghamshire Board (SNB). The Health Representative for the SNB is Barbara Brady who will link in with health organisations. TS confirmed the Health Representative on the Channel Panel is Caroline Brooks for operational cases. –COMPLETED.</p> <p>Action 04-March 17:- Multi-agency working group to be put in place to drive forward improvements, recommendations and an action plan encompassing previously identified actions in addition to those identified by this audit. JF to take this forward – JF confirmed that progress has been made since the last Board meeting with Social Care, Police and Health – To review the</p> | <p align="center">JB</p> |

recommendations and action plan – Delay with the Multi-Agency Working Group looking to arrange a meeting for some time in June/July. **Item to be covered on today's agenda.**

Action 08-March 2017:- SARC Commissioning – CF to raise this issue with NHS England on behalf of the Board. CF explained that he had previously been re-assured that existing services will be maintained until superseded when a SARC provision is commissioned. Unfortunately this is not the case. A meeting is being held on 07/06/2017 with Commissioners, Providers from the Nottingham and NHS North England to resolve this issue. CF to notify Board members of any changes by email. **CF confirmed that he has contacted NHS England again and was given re-assurance that existing services will be maintained until a SARC provision is commissioned – On today's agenda.**

Minutes of the meeting held on the 7th June 2017 were reviewed for accuracy and actions:-

Action 02-June-17:- TJ to prepare a bulletin on 'learning from the School audit' to be circulated across schools. **TJ confirmed a Learning Bulletin 'Safeguarding Children in Education Audit 2016-17' has been published on the NSCB website and Schools portal – COMPLETED.**

Training Needs for NSCB Members – TJ confirmed that she is in the process of reviewing the training needs analysis forms and will incorporate Board members.

Action 03-June-017:- LADO Allegations – HJ/JF to review the cases that fall under the category resigned (alt to dismissal) – Dip sample the 26 cases – feedback to the Board in September to provide assurance around the steps taken to ensure that a person is not re-employed in another area inappropriately (e.g. notification of professional bodies/DBS notifications etc). Hannah Johnson (HJ) has checked the cases and confirmed that the individuals concerned had been appropriately considered and dealt with through disciplinary processes. The term 'resigned as an alternative to dismissal' refers to an outcome of the disciplinary process. Assurance was also given that appropriate strategy meetings had taken place and notifications were made to the relevant professional bodies.

Action 05-June-17:- Laurence Jones (LJ) and Rob Griffin (RG) to discuss outside this meeting proposals to provide qualitative data regarding children in custody including drug/alcohol factors and feed back to the Board in September – this need to take account of the work to provide data to the Youth Justice Board – **LJ confirmed that he has spoken to the East Midlands data analysts who confirmed that the data can be broken down further for Nottinghamshire. Action:** - To report back to the Executive Meeting.

Action 06-June-17:- Unaccompanied Asylum Seeking Children/Child Migration Report – Leanne Monger (LM) and Devon Allen (DA) to meeting outside the meeting to discuss expanding future reports to the Board to include all settlement programme – **COMPLETED – Report to be presented to the Board on the wider migration schemes which involves resettlement of vulnerable households with children in the County in 9 months time.**

LJ

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| | <p>SCR KN15 Action Plan – Bob Ross (BR) confirmed that proposed actions have been drafted for the recommendations within the report. Relevant colleagues have been made aware if the actions affect their agencies.</p> <p>The minutes were agreed as an accurate record of the last meeting.</p> | |
| <p>Independent Chair’s update (Verbal Item)</p> | <p>CF presented a verbal update.</p> <ul style="list-style-type: none"> • CF mentioned two consultation events being led by the DfE concerning the new Safeguarding arrangements under the Children and Social Work Act 2017. The first event being held on Friday 22nd September 2017 in Sheffield. This event would be looking at the new ‘Working Together’ statutory guidance draft document, new safeguarding arrangements, and timescales. Any Feedback to be emailed out to Board members. • A meeting has been arranged for November of what will be the new Safeguarding Children Partners under the Children and Social Work Act. This issue is likely to be an agenda item at the NSCB Full Board meeting in December. • The Health and Wellbeing Board have agreed the launch of the consultation for the second Joint Health & Wellbeing Strategy for Nottinghamshire 2018 onwards. The consultation will run until 29 October 2017. CF encouraged Board members to contribute their views and if possible attend any of the meetings. CF to forward details be Board members. COMPLETED. • CF shared he had received a recommendation from the Serious Incident Review Group for a Serious Case Review in respect of a young man who had taken his own life – Letters including the TOR will be sent out in the next couple of weeks. | |
| <p>NSCB Executive Report (Appendix C)</p> | <p>SB summarised from the NSCB Executive update and highlighted the following key points:-</p> <ul style="list-style-type: none"> • Clayfields Secure Unit Annual Report was presented to the Executive on the use of restraints. The Executive confirmed that it was satisfied with the measures in place to reduce the use of restraints. • The Youth Justice Board in previous years required assurance from the LSCBs around the use of restraints. This has been replaced by the Youth Custody Service - enquiries are being made to confirm whether they require a copy of the report. • A report was presented on Child Protection Conferences and LAC Review Feedback – Very positive feedback received from parents, carers, children and agencies following reviews. It was noted there had been an improvement in sharing agency reports with parents and carers in advance of meetings. • The Executive reviewed the Annual Report (Item on today’s agenda) The Executive agreed that a Media Strategy should be developed before the publication of the report. | |

Child Sexual Abuse

(Workshop Session)

CF welcomed Diana Bentley (DB) to the meeting. SB and DB presented a presentation on Child Sexual Abuse which covered the following points:-

- Child Sexual Abuse – Outline of session - Why reviewing this particular topic
- Summary of issues – disclosure, joint working, support for victims
- Strategy Discussions
- Medical Assessments – Concerns raised concerning commissioning of a Sexual Abuse Referral Centre (SARC) and interim arrangements – Assurances re; continuity of service – Support for inclusion of FGM in SARC arrangements – First SARC procurement process unsuccessful
- Familial Sexual Abuse Audit findings

Group discussion- A questionnaire was shared within groups to discuss what they understood familial sexual abuse to be by answering the following questions:-

- What is your understanding of familial sexual abuse?
- Where do you get your knowledge from?
- Do you have any gaps in your knowledge?

DB explained the questionnaires would be collected after the workshop and proposed ideas/suggestions would be identified and shared in December within the self-assessment.

Strategy Discussions - SB said the Board agreed a working group should be formed and that group has developed a combined action plan which incorporates actions from the HMIC Action Plan 2015, ICPC audit November 2015 and Sexual Abuse audit in 2016. Progress has been made against the actions and work is ongoing in relation to; the response to stranger abuse, out of hours arrangements, performance monitoring, data and quality assurance, engaging with health professionals, and use of technology for conference calls.

SARC - SB explained that due to the current procurement process a representative from NHS England is unable to attend the meeting today but shared the following points for information: -

- ITT (invitation to tender) for the Procurement closed 12/09/17 – Joint procurement between NHSE and the 5 PCCs for forensic medical examinations
- Evaluators will be evaluating over the coming months
- Moderation in mid-October
- Clarification interviews end of October
- Inform preferred bidder Nov/Dec
- Mobilisation January onwards - services goes live 1 April 2018

DB spoke to the Familial Sexual Abuse joint audit between the County and City – DB explained that the report final is to be finalised shortly. DB shared the following points from the joint audit:-

- 10 cases were selected by the police of Familial sexual abuse cases – 5 cases city, 5 cases County

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| | <ul style="list-style-type: none"> • Audit tool covered 12 specific areas and asked for overall grading (Outstanding, Good, Requires Improvement and Inadequate) • Victims all female, age range between 2 -16, lived in different parts of the local authority, 3 LAC • Perpetrators all males <p>Group Discussion – Each group was given five case examples and asked to consider the following questions based on their own and agency role and knowledge:-</p> <ul style="list-style-type: none"> • The benefits of joint working when dealing with familial sexual abuse, • Strengths of our current practice • Areas of joint working that could be strengthened to improve outcomes for children <p>Comments and feedback:-</p> <ul style="list-style-type: none"> • JG queried how we ensure ourselves that children’s wellbeing doesn’t stop being protected – which could involve complex needs long term complications and impact on child and adulthood. • CF asked the question Familial Sexual Abuse ‘useful construct’ if child who has been sexually abused the considerations should be the same whoever the offender is? • SF shared that Health were not automatically invited to strategy meetings and therefore is a potential gap in information <p>DB shared the emerging findings from the Familial Sexual Abuse audit. It was agreed that once the audit report had been finalised it should be presented to the Multi-Agency Audit sub group to agree and ensure that actions are identified to address any issues that are raised</p> | |
| Break/Refreshments 2.55 pm – 3.10 pm | | |
| <p>Adult H Safeguarding Adult review (Appendix D)</p> | <p>Stuart Sale (SS) was welcomed to the meeting and informed the NSCB of relevant learning and findings from the NSAB SAR H16.</p> <p>Comments/questions were invited on the report. The following points were raised:-</p> <ul style="list-style-type: none"> • Concerns were expressed that this child was missed by Health, Social Care and Education and what assurance do we have that this will not happen again even though we have policy/procedures and transition service. Children with low risks are the children that seemed to get lost in the system. • CF mentioned that since the adult review improvements have been implemented and suggested that the Board invite someone from the transitions services and provide information on their services. • CB spoke about the safeguarding issues that were leading up to her being an inpatient were not identified - and | |

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| | <p>queried whether a joint review between adults and children was possible in the future where there are possible issues about transition from a child to adult services.</p> <ul style="list-style-type: none"> BR clarified that current statutory guidance (reflected in our own local procedures) does not cater for jointly commissioned reviews and that may present difficulties in terms of ownership and sign off etc. However there have been many examples where reviews have covered a range of issues and children's and adult services have both contributed to reviews and NSCB officers have linked in to ensure TOR and scope address all relevant issues. LJ spoke around school attendance and how the system failed the child not referring to appropriate agencies – Suggested a message/letter to go out to Head Teacher concerning making appropriate referrals for children not attending school. LJ to speak to Marion Clay. TJ noted that the animated film 'Did Not Attend', developed by Nottingham City Safeguarding Children Board, has been incorporated in Working Together Safeguarding training over the last 6-8 months with practitioners as well as being promoted with Board members to use in their organisations. <p>Action:- Future Agenda Item on Transition Services</p> | <p>LJ</p> <p>CF / ME</p> |
| <p>MASH Review (Workshop Sessions) (Appendix E)</p> | <p>CF welcomed Devon Allen (DA), Moira Cordon (MR) and Holly Smitheman (HS) to the meeting.</p> <p>DA spoke to the MASH Referral Report and presentation outlining the following key points:-</p> <ul style="list-style-type: none"> The number of children's MASH enquiries increase year on year 50% of enquiries to the MASH did not meet the threshold for an assessment During a 3 months telephone pilot it was found that 22% of telephone calls to MASH from its partner agencies were inappropriate. <p>Group discussion – Examples of referrals and telephone calls were distributed to Board members within groups to explore the issues raised and consider the recommendations within the report and presentation.</p> <p>Steve Edwards (SE) welcomed feedback on the examples asking for ideas on what could be done better or differently. The following feedback was given:-</p> <ul style="list-style-type: none"> Referrers could do more in terms of gathering information and considering other more appropriate services before contacting the MASH It was noted that it's not easy to find numbers for other services – suggestion of adding relevant numbers to the Pathway to Provision and that the MASH is also used for advice and guidance also some uncertainty as to how and when to contact the SCIMT A discussion took place on the merits of written referrals and whether all referrals should be made in writing – it was | |

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| | <p>noted the police do this already and screen referrals however there were still apparently a significant number of inappropriate referrals from the police</p> <ul style="list-style-type: none"> • Health organisations reported that they already audit safeguarding referrals to the MASH and it was agreed it would be helpful if this was shared. SS said that the Adult Safeguarding Board had run a successful audit on their referrals and he'd be happy to share the methodology etc. • A discussion took place about the value of providing a further breakdown of the cases where inappropriate contact had been made with the MASH. This would provide further information for partners however it would entail more work on the part of the MASH and there was a query whether there wasn't already sufficient information to confirm that there was an issue of around inappropriate contacts with the MASH which needed to be addressed. • It was agreed that further training/communication with frontline staff would be helpful around the role of the MASH, Pathway to Provision, making a referral and other services available – NSCB members should do this with support of the NSCB <p>Actions: -</p> <p>MASH have already identified a number of initiatives to tackle the issue (as per the presentation) and an update on progress/impact should be reported back to the NSCB</p> <p>NSCB members work together to resolve the issues by ensuring their staff have sufficient skills and knowledge to make appropriate use of the MASH. The NSCB will support members through the provision of communications etc.</p> | <p>DA/HS</p> <p>All</p> |
| <p>NSCB Annual Report</p> <p>(Appendix F)</p> | <p>CF asked for any comments or observations to the Annual Report to be emailed to Steve Baumber or Chris Few within the next 7 days.</p> <p>CF noted that the Annual Report is to be presented at the Children and Young People's Committee on 25th September 2017.</p> | |
| <p>AOB</p> | <p>No further items were discussed.</p> | |
| | <p>Meeting ended at 5.00 pm.</p> | |
| <p>Next Meeting</p> | <p>Wednesday 6th December 2017, John Fretwell Centre, Sookholme Road, Mansfield, Nottinghamshire, NG19 8LL</p> | |