



CALDERDALE SAFEGUARDING CHILDREN BOARD MEETING MINUTES

THURSDAY 3 APRIL 2014 - 2 PM – 5 PM

SHIBDEN ROOM – 5th FLOOR, F MILL, DEAN CLOUGH, HX3 5AX

PRESENT

Richard Burrows	RB	-	CSCB Independent Chair
Julia Caldwell	JC	-	Business & QA Manager – CSCB
Karen Hemsworth	KH	-	Associate Director – CHFT
Jeff Rafter	JR	-	Service Manager – Youth Offending Team (Upper Valley Early Intervention)
Dr Pamela Ohadike	PO	-	Designated Doctor - CHFT
Jo Sewell	JS	-	Service Manager - CAF/CASS
Steve Blackman	SB	-	Safeguarding Lead - North Bank Forum
Gill Poyser Young	GPY	-	Designated Nurse – Calderdale CCG
Tim Breedon	TB	-	Director of Nursing, Clinical Governance & Safety – SWYPFT
Julie Lodge	JL	-	Named Nurse - SWYPFT
Cllor Megan Swift	CMS	-	Lead Member – Children & Young People, Calderdale
Jacquie Hellowell	JH	-	CSCB Lay Member
Geraldine Sands	GS	-	Assistant Director of Patient Experience – NHS England, West Yorkshire
Iain Baines	IB	-	Head of Safeguarding & Quality, Adults, Health & Social Care - CMBC
Maggie Smallridge	MS	-	Head of Service, Bradford & Calderdale – West Yorkshire Probation
Veronica Mellor	VM	-	Service Manager – Safeguarding & QA
Penny Woodhead	PW	-	Head of Quality – Calderdale CCG
Ian Hughes	IHu	-	Head of Democratic & Partnership Services – Democratic and Partnership
Jamiila Sims	JSi	-	Service Manager, FRT - CSC
Allison Waddell	AW	-	CSCB Multi-agency Trainer



Darren Burton **DB** - ASB & Interventions Manager – Pennine Housing (Together Housing Group)
Chief Superintendant
Angela Williams **CSAW** - West Yorkshire Police
Stuart Smith **SS** - Director – Children & Young People’s Services
Angela Everson **AE** - Joint Chief Executive – WomenCentre
Lisa Golding-Smith **LGS** - CSCB Business Support Co-ordinator (minute taker)

APOLOGIES

Beate Wagner **BW** - Head of Early Intervention & Safeguarding – CMBC (represented by Jamiila Sims)
Janette Pearce **JP** - Head of Pennine Housing, Together Housing Group (represented by Darren Burton)
Bev Maybury **BM** - Director, Adults Health and Social Care – Well Being and Social Care
Robin Tuddenham **RT** - Director for Communities and Business Change
Dr Steven Cleasby **SC** - Assistant Clinical Chair – Calderdale CCG
Ian Hillas **IH** - CSCB Lay Member
Leona Binner **LB** - Head Teacher – St Augustine’s School (Primary Heads representative)
Martyn Greenwood **MG** - West Yorkshire Fire & Rescue Service
Chris Jones **CJ** - Principal – Calderdale College
Jill Farrington **JF** - Consultant in Public Health Medicine – CMBC
Wendy Moffat **WM** - Head Teacher – Crossley Heath School (Secondary Heads representative)

IN ATTENDANCE

Cheryl Baxter **CB** - Team Manager IRO Service - Safeguarding & QA Service (for Item 3.10)



	Subject	Discussion and Action Agreed	Responsible Person	Timescale
1	Welcome, Introductions and Apologies for Absence	Members were welcomed, introductions made and the apologies noted. Apologies were made for the papers going out late and apologies for one of the reports not being password protected as it contained sensitive information.	RB	
2	Minutes of Last Meeting and Matters Arising (6 February 2014)	<p><u>Front Page</u> Action - Add members initials next to their name on the present list</p> <p><u>Page 5</u> Typo. Action – LGS to amend</p> <p><u>Page 6</u> AW did circulate the conference agenda to CSCB members.</p> <p><u>Page 7</u> The additional budget information didn't go out before the meeting. 4 out of the 6 agencies have replied regarding their 14/15 contributions.</p> <p><u>Page 12</u> RB did reflect and consult with a number of people. Have commissioned the audit and it is on the agenda with Terms of Reference. Involving the Voluntary Sector in the audit. JH confirmed that nurseries have a good audit process and she has put herself forward for the Voluntary Management Committee.</p>	<p>LGS</p> <p>LGS</p>	



		<p><u>Page 19</u> The Safeguarding Week Overview was not distributed before the meeting. It is in the papers for today</p> <p><u>Page 20</u> Typo. Action – LGS to amend</p> <p><u>Page 24</u> A discussion followed on how it is the norm for adapted minutes to be in the public domain. Action – Ask the Business Group to explore issues to achieve this</p> <p>The minutes from the meeting held on 6 February 2014 were agreed.</p>	<p>LGS</p> <p>JC</p>	
<p>3.1</p>	<p>Single Assessment Framework - CHFT</p>	<p>Verbal report presented together with copies of the Single Assessment format</p> <p>A discussion followed on how members and the children’s workforce will be clear what the Single Assessment is and what it means CSCB joint working arrangements and PMQA function. How will we know it is making a difference? Are we ready and are we prepared for that?</p> <p>The Single Assessment came about after recommendations from Munroe and Working Together, being creative engaging families and having assessments that are timely and make a difference. Assessments will be conducted in a timescale of not more than 45 day with review points at 15 days, that will determine intensity and further time needed to complete assessment. How will it be different for partners? Focuses on joint working and keeping people involved. Social Care as lead agency will look to actively involves other agencies and they can provide written contributions.</p> <p>JS has had discussions with the Early Intervention Team and a range of Health services and</p>		



implications for agencies were not felt to be unmanageable. NB A section on joint visits will be added to the Form. Although assessment and intervention is a dynamic process the form helpfully lays out expectations. It is hoped that the procedures are already clear and agencies will be able follow these. (The Single Assessment Form is ready to go live on Monday (with CSC staff - only Social Worker's will complete this Form).

Need to be clear about the roll out process and review and JS thinks it should come out from the CSCB and be on the website. Agencies will need to know where they fit in and what is expected. **It was agreed that it might help if it said CSC at the top of the Form, as it is a CSC led process.**

The intended measures of success from moving into Single Assessment are likely to look like this (subject to further CSC outcome measures and amendment of CSCB PMQA_

- It will cut down bureaucracy
- Be clearer for the family
- Resource wise it will cut down on Social Worker's time
- Not bombard the family with paperwork
- This is a clearer Form that will highlight the risk and make planning quicker (currently it can take hours to complete)
- This will be more user friendly and the Social Worker can spend more time with children and their families

(It was noted that benefits for partner agencies needed to be included)

SS explained that Calderdale weren't in a position to use Single Assessment straight away (after Munroe) but Initial and Core Assessments are now back up to a reasonable standard (JS and her team have worked really hard), and he noted that implications for partners around the table needed to be worked through but a positive step forward for children



		<p>and their families and would further support CSC in its improvement journey. The following was agreed: The CSCB to support the implementation but need to know more details. To look at the risk about not reviewing and meeting new timescales. The CSCB to respond to this (a valid challenge for the CSCB). Need a clear benchmark to be incorporated into PMQA and regular performance reporting to the Board CSC to be asked to provide further report in 3 months time including update on involvement of partners</p> <p>Action – As listed above</p> <p>RB thanked JS for her presentation and members for their contributions and stressed that this was a significant step and an opportunity to ensure a more joined up approach to assessment and interventions that help children and their families</p>	<p>JC/Business Group Performance management Sub group JC</p> <p>CSCB</p>	
3.2	Multi-agency Referral Form (MAST) - JS	<p>An amended form was available, that reflected the work done following the discussion at the previous Board. It has also been agreed that although this referral form was intended for partner agencies to use, it was a CSC form as they are the lead agency, and that CSC are submitting it to the Board for approval.</p> <p>Discussion followed and included comments about space on Form for additional children and significant people living in the house. The helpfulness of clear prompt of what is needed from CSC and what has been done already with the family. Combined chronology. Explicit about parental consent.</p> <p>The following was agreed: The Form is better from a multi-agency point of view and reflects the suggestions of members</p>		



		<p>The Board formally endorsed and agreed the introduction of the form. (This is going live on 1 May 2014 and will review after 3 months) Action - Bring to the CSCB after the review day – place on rolling programme for Board agenda</p>	JSi	
3.3	<p>Multi-agency Training Programme 14/15 and proposed evaluation schedule</p>	<p>Update report tabled; RB explained that as a Board we faced a predicament in that it had not been possible to complete as hoped a paper and the proposed MAT programme and evaluation measures in the form that would reflect the specific concerns and suggestions raised by members at a previous meeting. He felt this was regrettable given the need for the Board to be able to approve and agree a programme that was effective, met the Board’s priorities and demonstrated how we would measure impact on practice and children.</p> <p>JC confirmed work was being progressed so that we can capture more information and that the database makes a distinction between private and voluntary sector and also health, and we can break this down. (The Learning & Development Sub-group has requested this information and the process have started).</p> <p>This means that as a Board we will continue to deliver multi agency training but at the moment we haven’t got the evidence to say that the training provided works and the impact it gives.</p> <p>RB therefore advised the Board that it was still the intention to bring forward a full programme that met the parameters identified by Board members and how we would evaluate effectiveness and impact, but that this would require more time and would be a priority for the L&D sub group and JC/AW.</p> <p>RB asked the Board mindful that this was not the desired position to agree that this matter be reviewed at each meeting.</p> <p>Discussion followed and the following points were made by members:</p> <ul style="list-style-type: none"> - Not a desirable situation and members need to be assured that progress is made 		



		<p>information raised certain questions in terms of representation as a % of the LAC population.</p> <p><u>Health assessments – Health contribution to LAC (PW)</u></p> <p>Risk to LAC – CCG working on the risk. Providers have continued to do a sterling job and measures have been put in place for appropriate arrangements to be put in place. This is to be nailed down and PW has committed to a 4 week piece of work to do this. It reflects on the CCG risk register at this time.</p> <p>A number of other points were raised relating to how CSCB currently scrutinised the different functions outlined in the report and what links the Board should have to other scrutiny arrangements re LAC</p> <p>The report helpfully outlined some possible questions for the Board to consider</p> <p>The following was agreed:</p> <p>Allegations Management is an important issue that the CSCB should scrutinise on a regular basis.</p> <p>CSCB needs to be clearer about placements in and out of borough, as well as general placement trends and outcomes for LAC across health, education, development and well being. (If there are any issues with placements, it can be reported to the CSCB, but is there a clear mechanism for this? Does the multi agency case audit programme reflect the vulnerabilities of LAC?)</p> <p>Overall RB asked the Board to consider does the report show the CSCB that children are safe and are the Board’s arrangements sufficient.</p> <p>Are the CSCB asking the right questions and looking at the right information?</p> <p>Action – Business Group to look at the above and draw up a clear approach to ensure that the Board addresses Looked After Children across all its functions and governance relationships</p>	<p>JC/Business Group</p>	
3.5	Budget	2 papers received. RB advised Board that this was a standing item and work in progress		



		<p>with the aim of ensuring that the Board set oversee and manage its budget. JC outlined main points in reports re income, expenditure and confirmed small under spend for 13/14 and that this was likely to be used to fund SCR's. Feedback from members is appreciated in trying to make the management of the budget more visible. JL confirmed that she would like more detail. It was noted that CSCB could have challenged about the Munroe money if they had the details earlier, and that this supported the current move to manage the budget at Board level. It was agreed that the CSCB would like more detail on a monthly basis (including variation) and to bring to each meeting. Action – JC to bring to each meeting</p> <p>The meeting reviewed partners contributions and risks re budget for 14/15 Agencies were asked to look at contributing by letting the CSCB use their rooms for meetings as the Secretariat are shortly moving out of Heath Training & Development Centre. CSCB Partner Financial Contributions for 2014/15 Letters were sent on 14 March 2014. Responses received: CCG – in discussions with CCG team and will confirm in due course West Yorkshire Police – yes Calderdale Council – Yes Probation - the same 12 month figure as 2013/14 will be forthcoming CAFCASS – no response as yet</p>	<p>JC</p>	
<p>3.6</p>	<p>Joint Adults/ Children's Protocol</p>	<p>Paper received that outlines the work completed to date regarding making clear joint working arrangements between services who primarily focus on children and those that primarily focus on adults. (It was noted that this is an area of interest re the Improvement Plan) Following the recent Prevention of Harm Sub-group meeting, there will be minor</p>		



		<p>amendments. There is also a need to assess whether the implementation of the Care Bill (adults) should delay introduction.</p> <p>The following was discussed and agreed:</p> <p>The draft protocol should go to the Business Group to start with and then to the Sub-group. To consider whether the issue of interim guidance to assist practitioners across all agencies for children and adults would be beneficial.</p> <p>Explanation of acronyms was needed (as with all CSCB documents)</p> <p>Greater clarity re voluntary sector services (DV can be used as a trigger).</p> <p>To put EDT as point of contact for out of hours.</p> <p>Health – a GP doesn’t see themselves as a service just to adults.</p> <p>Timescale – 3 – 4 months.</p> <p>Probation – will they be having contact with children?</p> <p>Action: Business Group and Sub group to address above points and issue as interim guidance pending clear review date and work plan for final version</p>	JC/Business Group	
3.7	Outline revised Board priorities and business planning	<p>This item was deferred due to time pressures on agenda and late circulation for which RB apologised. RB asked members to refer to and reflect on the document as to whether it was an accurate representation of the issues and discussions to date. It complimented papers previously presented and considered by the Board and was intended to a) provide some clear benchmarks for the new priorities, b) develop the “story” behind the changes that members are making and c) to help the Business Group in drafting the next version of the Business and Action Plan.</p>		
3.8	Proposed changes to Board Sub-group Structure	<p>Paper received. RB explained that this was the next step in re working and aligning the sub group structure following the Board’s decision to form the Business Group</p> <p>JC explained that each of the Sub-groups is being asked to lead on the core functions of the CSCB. The first 5 are core function orientated and the 6th one is proactive and</p>		



		<p>responsive. The Business Group will coordinate and integrate activity to the priorities and agenda set by Board members.</p> <p>The Section 11 etc box is about how we go about our business and the key frameworks and standards we use. JC felt that we are at a critical stage in turning the principal into practice as a Board.</p> <p>RB reminded members about the thinking and the intentions behind the structure.</p> <p>A point was raised as to how members would ensure that priorities were carried through as this had not always been the case in the past – RB confirmed that it is Board member responsibility and through each Sub-group member.</p> <p>It was agreed leadership at a Board level and in terms of chairing and supporting the sub groups was important and that careful consideration was needed as to how and what basis these roles were allocated and agreed.</p> <p>RB confirmed it was also important to be pragmatic and focus in on role and priorities as well as identifying ways of ensuring that members (Board and sub groups) were clear as to what needed to be done.</p> <p>Board members agreed to progress with implementation taking into account the points raised.</p>	JC	
3.9	Evaluation of Board meetings and becoming a more effective Board	<p>Action – JC highlighted trial feedback form for members to use after each meeting and return to her. This would build a body of feedback and enable continuous improvement to the way we work as a Board</p> <p>Action - Ask the Business Group to look at the Business Plan in order to incorporate effectiveness measures</p>	ALL JC	
3.10	Strengthening Families	<p>CB was welcomed and paper received.</p> <p><u>RB explained that it was helpful for the Board to learn more about this development and</u></p>		



to understand where this fits in the wider scheme of things? (Especially the Boards core functions)

This way of working with meetings makes for a more meaningful engagement for parents and this is hitting home quite quickly. Improving parent's understanding and may be contributing to the need for children being on CP Plans for a 2nd time. This is an important performance measure used by Ofsted and that the Board would support such developments provided other aspects of the child protection process were not compromised.

GPY pointed out that there is an issue on emailing requests out (secure emails). CB confirmed that a lot of work has been done regarding this. There are still some gaps with some voluntary organisations and GP's and it was felt that this will be ironed out in time. The quality of information that comes to the Conference varies and are planning to regularly feedback to the CSCB and Sub-groups and there are still some teething problems re preparation needed by chairs of meetings.

The following questions were asked:

What were the key lessons?

Did we set a level of ambition around ticking all the criteria and ensuring better outcomes for children?

Have we got further work to do with agencies about supporting this process?

Members agreed that it seems a really good idea but wondered whether the trial period should be extended so can collect more evidence? VM confirmed that we need to shift from thinking that all children coming to a CP Conference do not need to be on a plan. It is brand new and putting a lot of pressure on agencies. 6 months to look at the comparative data would provide a sounder base for integration and incorporation into joint working procedures and practice.



VM reminded members that the CSCB have already endorsed the Strengthening Families model and they said they would pilot it for a month. And it had been agreed that it would be helpful that the CSCB receive feedback after the 1st 10 cases but the CSCB needs to be clear if this is for all or some children.

It was confirmed that the Service made the decision that when a child comes off a plan, they receive a questionnaire, and to look at the advocacy service to get the feedback. There is a request that agencies attend the multi-agency training that is being offered.

AE feels that more feedback needs to come back to the CSCB. AE has observed a meeting but is not 100% convinced so she would like to observe another and encourages other members to observe and be involved in the Steering Group.

A discussion followed on whether the CSCB would we be talking about this if we had the level of attendance or commitment of agencies, and do members actually know their agencies attendance and commitment? This discussion highlighted the need to progress and improve performance reporting, analysis and scrutiny at the Board

RB concluded on the basis of the discussion and the current position of the Board to be in a position to evaluate and scrutinise whole system effectiveness, that this seemed like a positive step forward based on the limited length of the pilot and the sample group. He therefore proposed that the it continue as a Board sponsored pilot for a further 5 months pending a fuller evaluation on the basis of improved outcomes for children, the impact and contribution of partners and a fuller evaluation in the context of an improved CSCB PMQA function so as to be able to weigh up whole system impact.

The CSCB agreed to further role out and extension of pilot pending final evaluation and

CSCB

VM/CB



		<p>report to CSCB Members of CSCB agreed to continue to support the roll out and members to commit to match the resources. Action – Bring an interim report to the June 2014 CSCB Meeting and date to be set for final evaluation and report</p>		
4.1	Ofsted LSCB review preparation and readiness report	<p>Ofsted review of LSCB’s placed urgency on need for Board to be prepared and ready. JC informed Board that this had commenced following a similar process being followed by CSC.</p> <p>RB as a member of the Association of LSCB Chairs has already met with Ofsted and is meeting them again in June 2014, as Ofsted are concerned to get “reviews” right. An evaluation of the first 11 Reviews to be published in April.</p> <p>JC noted that the first Task & Finish group was cancelled as only 4 members able to attend.</p> <p>It was agreed that it is imperative we have a Task & Finish group for Ofsted readiness.</p> <p>That the aim should be to be:</p> <ul style="list-style-type: none"> • clearer about what needs to be done • better on self-assessment, and • CSCB Business Plan to reflect on what Ofsted will be looking at <p>It was confirmed that key players would be sat round the table at the Business Group, so maybe they could look at it. PW thinks it needs a Performance Management group rather than a Task & Finish group.</p> <p>CMS confirmed that she has Sheffield’s presentation.</p> <p>Action – CMS to send the report to JC Action – JC to ask the Business Group to focus on this</p>	CMS JC	
4.2	Improvement Board Feedback	<p>RB noted that Claire Burgess had hoped to attend, but was unable to but will attend a future meeting. RB noted this was a standing item to provide members of both Boards with the opportunity to share and feedback.</p>		



<p>4.3</p>	<p>Interim Performance Report and Member Scrutiny</p>	<p>Report received. JC outlined progress itemised in the report. PW asked if there is a different way of coming at this and how would we resource. She also asked that from some of the actions described, are we clear we have the right capacity and capability? JH feels that the pace has accelerated and she has brought this up at the QA & Performance Sub-group. The last QA & Performance Sub-group meeting was productive but RB feels not productive enough because it didn't come out with something at the other side. RB reminded members that this was an area where members needed to achieve measurable progress as the scrutiny of the child's journey and member contribution to joint working and positive outcomes for children was at the heart of why the Board was here.</p> <p>The following was discussed and questioned:</p> <ul style="list-style-type: none">• Commissioned work with C4E0. Now looking at the Voice of the Child but is this the right time to look at different data?• Where is the data from the other partners, not just CSC? <p>GS would be happy to share her data but feels the framework needs to be broader. JC said this has been recognised and the data will be made broader. RB noted that achieving a multi agency data base was a challenge for all Boards and therefore he would encourage an incremental approach built on regular reporting and scrutiny at every Board meeting</p> <p>It was agreed that the CSCB need to identify a day to scrutinise what we have got and if we need extra resources, where are we going to get them from? (RB has raised with the Chief Executive).</p> <p>The following was agreed:</p> <p>The data means nothing if you can't turn it into intelligence.</p> <p>The CSCB need someone to pull all this together.</p> <p>The CSCB need something that is fit for purpose now.</p>		
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		<p>Actions:</p> <ul style="list-style-type: none"> -Business Group through new sub group structure and composition to focus on achieving as full a report to the board as quickly as possible <ul style="list-style-type: none"> - Current resource deployment to be assessed and options identified for additional resourcing from partners - Board to agree and publish PMQA framework and strategy asap 		
4.4	<p>Section 11 – Proposals for analysis and identifying learning</p>	<p>Letter and Tool circulated</p> <p>JC explained that the Tool will only let you fill in the bits you are supposed to fill in and automatically collate your actions to the back page, so will have an automated action plan set up for you.</p> <p>RB reminded members that this was the first step in a 3 year plan to embed an new approach to Sect 11 audit and self assessment on an annual basis across all organisations and groups who work with or have regular contact with children and young people in Calderdale. This would produce a level of assurance within existing local governance arrangements and support the Board forming its annual view as to how safe children and young people are in Calderdale.</p> <p>The Business Group will take forward and will update at the next meeting.</p> <p>Action – JC to send out the Tool in a single email and clarify whether want a separate one for GS or Primary Care</p> <p>JC confirmed that if there is a section that you can't fill in, then don't fill it in. It is about engaging people in self-assessment and self-assurance across all agencies. This requires members continued support and encouragement.</p> <p>There will be a specific area on the website to support agencies/organisations.</p> <p>RB and JC are meeting with Commissioners next week and RB stated that everyone should be using this because it is a central aspect of our core function as a LSCB</p>	JC	
4.5	<p>Consultation on ill</p>	<p>2 papers received. Members were asked to note the consultation and pending the</p>		



	treatment and wilful neglect	outcome be prepared to look at any implications for joint working arrangements. RB noted that he intended to provide members with the opportunity to contribute to such consultations as a Board. .		
4.6	SIIP	Paper received and the CSCB key priorities are in this. Members were asked to note and ensure that these travelled through into the revised business plan. RB would be reporting to the Improvement Board on behalf of members. Action – JH speak to JC outside this meeting regarding the issues she has Action – CSCB to drive forward areas of SIIP it has assumed responsibility for Action – Future agendas to include updates on progress	JH/JC All JC	
4.7	HMIC Police Inspection Letter	Inspection cycle starts in April 2014, will cross over into partnership working and arrangements especially re DV and CSE. CSAW has a DV report if members want to look at it It was confirmed that the Police are attending the June CSCB meeting to talk about DV. Action – CSAW to send the report to JC so can distribute to members Action - CSAW to advise and brief members on inspection outcomes Action – JC and CSAW to brief members in event of local inspection	CSAW CSAW JC/CSAW	
4.8	Agency Impact Statement	CHFT had an unannounced inspection and met all the 5 standards. Action – KH to send LGS the link so can distribute to members CAFCASS had an inspection and verbal feedback is positive. Action – JS to feedback at the June 2014 meeting Probation is splitting into 2 so not sure whether 1 or 2 members. SWYFT – will stretch strategic partnership working together. There were no other contributions.	KH JS	
5.1	Serious Case Review Update	Timelines for current reviews being revised to accommodate for improved QA and challenge in one review and because of some difficulties with the report in the other. Members will be formally briefed and advised prior to the next meeting or can speak with		



		<p>It was noted that for one member the current day of the Board conflicted with another commitment. It was felt this could be included in the planned review of Board membership</p> <p>Action – JC to explore whether to change the day for future CSCB meetings as a part of planned consultation</p>	JC	
7	Deferred Items for June Meeting	CSE Strategy and Update		
8	Dates of Future Meetings	<p>Thursday 5 June 2014 – Wainhouse/Hardcastle Rooms Thursday 7 August 2014 - Wainhouse/Hardcastle Rooms Thursday 2 October 2014 - Wainhouse/Hardcastle Rooms Thursday 4 December 2014 - Wainhouse/Hardcastle Rooms</p> <p>All meetings – 2 pm – 5 pm – 5th Floor, F Mill, Dean Clough</p>		



CSCB Membership

Representing:	Name:
Independent Chair	Richard Burrows - RBA Consulting
Adult Safeguarding Board, CMBC	Iain Baines – Head of Safeguarding & Quality Bev Maybury – Director, Adults Health & Social Care
CAFCASS	Hilary Barrett – Head of Service Jo Sewell – Service Manager
Calderdale & Huddersfield Foundation Trust	Dr Pamela Ohadike – Consultant Paediatrician Karen Hemsworth – Associate Director
Calderdale CCG	Dr Steven Cleasby – Assistant Clinical Chair Gill Poyser Young – Designated Nurse Penny Woodhead - Head of Quality
Calderdale College	Chris Jones – Principal
Children & Young People’s Service, CMBC	Beate Wagner – Head of Service Early Intervention & Safeguarding Stuart Smith – Director
Communities, CMBC	Robin Tuddenham – Director for Communities and Business Change
Councillors	Councillor Megan Swift – Lead Member for Children’s Services
CSCB	Allison Waddell – Multi-agency Trainer Julia Caldwell – Business & QA Manager
Democratic & Partnership Services, CMBC	Ian Hughes – Head of Democratic & Partnership Services
Housing	Janette Pearce - Head of Pennine – Together Housing Group
Lay Member	Ian Hillas Jacquie Hellowell
NHS England	Geraldine Sands – Assistant Director of Patient Experience
Primary Heads	Leona Binner – Head Teacher, St Augustine’s School
Probation Trust	Maggie Smallridge – Head of Service
Public Health	Jill Farrington – Consultant in Public Health Medicine
Safeguarding & QA Service	Veronica Mellor – Service Manager
Secondary Heads	Wendy Moffat – Head Teacher, Crossley Heath School
South West Yorkshire Partnership Foundation Trust	Julie Lodge – Named Nurse/Trust Lead Tim Breedon – Director of Nursing
Voluntary Sector	Angela Everson – Joint Chief Executive, WomenCentre Steve Blackman – Sector Support Calderdale, North Bank Forum
West Yorkshire Fire and Rescue Service	Martyn Greenwood
West Yorkshire Police	Chief Superintendent Angela Williams
Youth Offending, CMBC	Jeff Rafter – Head of Youth Offending Team