

**CALDERDALE SAFEGUARDING CHILDREN BOARD  
THURSDAY 3 NOVEMBER 2016 – 2 PM – 5 PM  
THE SHAY STADIUM, HALIFAX**

**2015/2016 Meeting Attendance**

<b>Member</b>	<b>Agency</b>	<b>2.4.15</b>	<b>4.6.15</b>	<b>6.8.15</b>	<b>1.10.15</b>	<b>3.12.15</b>	<b>3.3.16</b>	<b>5.5.16</b>	<b>7.7.16</b>	<b>1.9.16</b>	<b>3.11.16</b>
Iain Baines	Adults H&SC	D	A	Y	N	Y	A	Y	A	Y	A
Jo Sewell	CAFCASS	D	D	Y	D	A	Y	Y	A	A	Y
Penny Woodhead	Calderdale CCG	Y	Y	A	D	Y	Y	Y	Y	Y	Y
Howard Browes	Calderdale College	Y	N	A	A	Y	A	Y	Y	A	D
Raj Unsworth	Calderdale Govs Assoc.	-	Y	A	Y	A	Y	Y	A	Y	Y
Pamela Ohadike	CHFT	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Robin Tuddenham	Comms & Service Support	Y	D	Y	A	A	Y	D	A	N	Y
Julia Caldwell	CSCB	Y	Y	Y	Y	Y	Y	Y	Y	A	A
Richard Burrows	CSCB Independent Chair	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Julie Jenkins	CYPS	Y	Y	Y	Y	Y	Y	Y	A	Y	Y
Stuart Smith	CYPS	Y	Y	Y	D	-	A	A	A	A	Y
Ian Hughes	Democratic & Partnerships	Y	Y	Y	Y	Y	D	-	-	-	-
Julia Kirkbright	Democratic & Partnerships	-	-	-	-	A	Y	Y	Y	N	Y
Janette Pearce	Housing	N	Y	D	N	N	Y	A	Y	A	D
Shaheen Khawaja	LAY Member	Y	Y	A	Y	Y	A	Y	A	Y	Y
Jo Taylor	LAY Member	Y	A	A	Y	Y	Y	A	A	A	A

Councillor Megan Swift	Lead Member (Participant observer)	Y	A	N	Y	A	Y	N	N	A	N
Maggie Smallridge	National Probation Service	Y	A	Y	Y	N	Y	D	Y	Y	Y
Gill Poyser Young	NHS Commissioners	A	Y	Y	Y	Y	Y	A	Y	Y	Y
Chris Stoddart	NHS England	Y	A	Y	Y	Y	A	D	Y	Y	Y
Vicky Thersby	NHS Trust	Y	Y	Y	Y	A	Y	Y	Y	A	Y
Lesley Bowyer	Primary Heads	-	Y	Y	Y	Y	Y	D	A	Y	Y
Laura Newcombe	Primary Heads	A	Y	A	Y	Y	Y	D	Y	D	Y
Nick Hawley	Probation CRC	A	Y	A	D	Y	A	D	D	Y	A
Ben Leaman	Public Health	A	A	A	Y	Y	Y	Y	Y	Y	Y
Laura Knights	Safeguarding & QA Service	A	A	A	Y	Y	Y	Y	Y	A	Y
Andrew Fisher	Secondary Heads	Y	Y	Y	Y	Y	Y	Y	Y	A	Y
Tim Breedon/ Julie Warren-Sykes	SWYPFT	Y	D	A	Y	Y	A	N	D	Y	Y
Jayne Leech	Voluntary Sector	Y	Y	D	D	Y	A	Y	Y	A	Y
Martyn Greenwood	West Yorkshire Fire	Y	Y	Y	Y	Y	N	Y	Y	N	D
Dickie Whitehead/ Vincent Firth	West Yorkshire Police	A	N	A	Y	A	D	Y	D	Y	Y
Angela Everson	Women's Centre	Y	Y	Y	D	Y	Y	Y	A	Y	Y
Jeff Rafter	YOT/Early Intervention	Y	Y	A	Y	Y	Y	Y	A	Y	A

**Key: Y = Attend, N = Did Not Attend, A = Apology, D = Deputy attended in place**

**In attendance for apologies**

Paul Hutchison (representing Howard Browes)  
Darren Burton (representing Janette Pearce)  
Martyn Greenwood representative

**Observer**

Jayne Sykes – Head of Performance & Analysis – West Yorkshire Police

**In attendance for Item 4.4**

Julie Killey - Service Manager Commissioning, Commissioning & Partnerships

**In attendance for Item 4.7**

Jacquie Hellowell – CSCB PMQA Officer

Subject	Discussion and Agreed	Responsible Person	Complete/Progress
1 <b>Welcome, Introductions and Apologies for Absence</b>	Members were welcomed, introductions made and the apologies noted. Superintendent Vince Firth was welcomed as a new member.		
1 <b>Declarations of Interests</b>	There were no declarations of interest.		
2 <b>Minutes of the Last Meeting and Matters Arising (1 September 2016)</b>	<p><b>Page 3</b> <u>Challenge Logs</u> Challenges in red.</p> <p><b>Page 4</b> <u>Child Friendly Calderdale Cabinet Report</u> JJ to feedback CSCB comments to SS.</p> <p><b>Page 5</b> LGS has added to the Challenge Log regarding sensitive to practitioners has</p>		<p><b>COMPLETE</b></p> <p><b>COMPLETE</b></p> <p><b>COMPLETE</b></p>



	<p>The Action Plan will also be looked at by School/Education Board Members.  <b>RB felt this was a good example of strategic development and working and may help us to move to the next level</b></p> <p>AE noted that there are women and men in the criminal justice system whose children may be with alternative carers AE has spoken to JJ and they are going to follow this up to see if any work can be done.</p> <p>RB advised that he hoped that there would be a swift completion in producing information available in different languages re private fostering.</p> <p><b>Page 9</b>  <u>Partner Impact Statements</u>          Members discussed recent decision to look at partner inspections and that JC was developing guidance. Members agreed that they would continue to bring other issues relating to developments as they might impact on safeguarding for this standing item</p> <p><b>Page 11</b>          VT to feedback at the next Board regarding the CQC inspection – On November 2016 agenda</p> <p><u>Reporting and Acting on Child Abuse and Neglect: Consultation</u>          Incorporated into RB’s submission. RB thanked JJ for sharing the LGA/ADCS response which he will circulate</p> <p><b>Action - RB to send the draft response to CSCB members</b></p> <p><b>Page 12</b>  <u>Care Quality Commission (CQC) Document: ‘Not Seen, Not Heard’</u>          Report and learning to be subject to further consideration through the CCG and</p>	<p></p> <p></p> <p></p> <p></p> <p></p> <p>RB</p>	<p></p> <p></p> <p><b>ONGOING</b></p> <p></p> <p><b>COMPLETE</b></p> <p></p> <p><b>COMPLETE</b></p>
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	<p>the boards arrangements with a view to identifying key themes for partners and board objectives. This is to be incorporated into the development day revision of business plan – To go into the Development Day.</p> <p><b>Page 13</b> <u>Child Sexual Assault Assessment Service (CSAAS)/Sexual Assault Referral Centre (SARC)</u> <b>Action – LGS to amend that TB said that this was the case – delete the words “not sure”</b></p> <p>CS to check regarding SWYPFT involvement. It was agreed to push on to see what is happening and respond to developments. There is a meeting next week.</p> <p><b>Action – RB to contact Edwina Harrison about the meeting</b></p> <p><b>Page 14</b> <u>Child Sexual Assault Assessment Service (CSAAS)/Sexual Assault Referral Centre (SARC)</u> CS to establish and share current position with CSCB and partners.</p> <p>CSCB to clarify present arrangements for medicals to ensure operational arrangements is understood - Pathway re-circulated.</p> <p>CCG and Public Health to liaise with NHSE and PCC to ensure joined up approach to consideration of future options and arrangements - PW asked to ensure all interested parties are included in further developments.</p> <p>It was also noted that PMQA arrangements may need to consider whether this is an activity that is monitored – JC meeting with JJ &amp; RB 3.11.16).</p>	<p>LGS</p> <p>RB</p>	<p>COMPLETE</p> <p>COMPLETE – Awaiting response</p> <p>COMPLETE</p> <p>COMPLETE</p> <p>COMPLETE</p> <p>COMPLETE</p>
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	<p><b>Page 15</b> <u>Safeguarding Week</u> CSCB members to encourage attendance at the Safeguarding Week Launch and the Safeguarding Week Events - SS/JW have advertised Safeguarding Week in Blogs/Newsletters etc.</p> <p>Thanks to all partners who were involved in Safeguarding Week and will take a formal evaluation at a future meeting. Members felt that it had gone well.</p> <p>AW to take other LA's Launch Events into account when planning Safeguarding Week next year.</p> <p><b>Page 16</b> <u>Independent Chair Annual Appraisal</u> JC and PW have and agreed that the key outcomes document is shared with Board members.</p> <p><b>Page 17</b> <u>LSCBs Protecting Children with Disabilities</u> Board confirmed continued development of new ways of scoping and assessing issues and it was agreed that RB/PW/JC to have more thought about the Task &amp; Finish Group approach, noting the comments made by members to bring forward revised proposal so as to ensure that the potential issues around this vulnerable group were not lost sight of on the basis of the need to refine Board process - Further discussion/reflection on task &amp; finish approach scheduled for Chair/Vice Chair meetings with JC.</p> <p><b>Page 18</b> <u>Budget</u> BL to liaise with JC about assisting her with the Budget Paper.</p>		<p><b>COMPLETE</b></p> <p><b>COMPLETE</b></p> <p><b>COMPLETE</b></p> <p><b>COMPLETE</b></p>
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	<p>It was agreed to continue to develop and present a Budget Paper to the CSCB as members wanted to monitor budget and risk – On November agenda.</p> <p>It was agreed that members try and provide free or part cost venues for meetings/training – Partners have offered.</p> <p>JC to clarify what meeting rooms are required (size).</p> <p>PO to look at the Learning &amp; Development Centre at the hospital for rooms.</p> <p>Will look at the Challenge Log on scheduled basis. Challenges to continue to be highlighted in minutes and cross referenced against actions/matters arising and agreement of minutes.</p> <p><b>The minutes of the meeting held on 1 September 2016 were agreed.</b></p>		<p><b>COMPLETE</b></p> <p><b>COMPLETE</b></p> <p><b>COMPLETE</b></p> <p><b>COMLETE</b></p> <p><b>ONGOING</b></p>
<p><b>2.1 Correspondence Received and Sent</b></p>	<p>CSCB Annual Report Letters from CSCB to PCC, Chairs of HWBB, CYPPE, Scrutiny, Leader of the Council and Chief Executive – Letters sent 24 October 2016. Letters available on request.</p> <p>SARC Letter from Edwina Harrison, Chair of Wakefield LSCB to RB – Paper received.</p>		
<p><b>3.1 CDOP Annual Report 2015-2016</b></p>	<p>Paper received and presented by BL.</p> <p>BL asked members are happy that this is a public facing document and highlighted the series of recommendations for the CDOP for the year 2016/17 (pages 1/2).</p> <p>BL confirmed that the report indicated that right people are around the table to carry out the work and the meetings are always quorate.</p> <p>The CDOP Form is being modified to further target the review process.</p> <p>A question was asked about timeframes and timeliness, BL said there are no mandated timeframes other than a 6 month measure, and the report evidences over a 5 year period performance of the panel in this respect.</p>		

Cases subject to SCR's might not come to Panel for some time and there were a number of other factors that could contribute to delay. PW asked if any help is needed from Partners regarding escalating information supply and BL said that he felt there was a good process in place and if there were any issues they would be brought to the appropriate member on the CSCB.

BL noted that an Action Plan which includes a training programme for Front Line Staff (re ethnicity, culture belief and consanguinity), was being prepared and was funded. Also linking in with Bradford CDOP because of their experience in this area.

VF said that there is a Diversity Reference Group in Bradford attached to the LSCB that helps provide families with information so they can make informed choices and he is pleased that Calderdale are aware of issues. VF wondered if this was a model that the CSCB might want to consider.

RB summarised:

- Did members feel that the report provided a full and transparent account of the work of the CDOP, noting that it is a statutory function of the Board?
- As this was an important issue of relevance to other partnerships, had we got arrangements in place to ensure that any learning with our endorsement was shared with them? (e.g. the Health and Wellbeing Board). RT agreed that we should be widening approach and awareness and BL agreed.
- RB requested that members consider whether they needed to disseminate the report and raise awareness and or learning.
- BL confirmed that Public Health saw the CDOP outcomes as central to their wider approach and strategies and could lead on this with the CSCB
- RB noted that it may be helpful to consider how a clearer picture of the learning from child deaths in Calderdale could be better understood, notwithstanding the need to aggregate data for the purpose of analysis?

	<p>The CSCB formally endorsed and accepted the report, including its publication.</p> <p><b>Actions -</b></p> <ul style="list-style-type: none"> <li>- All partners to promote and share report</li> <li>- BL – Public Health to ensure learning is shared across partnerships and influences other strategic work streams</li> <li>- The suggestions and comments made by members to be noted in the development of the panel, review of cases and future reports</li> <li>- CSCB to continue to take regular updates from CDOP including highlights, exceptions and risks.</li> </ul>	<p>ALL</p> <p>BL</p> <p>BL</p> <p>CSCB</p>	
<p><b>3.2 Proposal to combine Calderdale and Kirklees Child Death Overview Panel (CDOP) with Wakefield CDOP</b></p>	<p>Paper received and presented by BL. BL explained that there had been discussion across the 2 panels to propose a combined Calderdale, Kirklees and Wakefield Child Death Overview Panel (CDOP). At the moment, Wakefield is separate. The report outlined the rationale, potential advantages and disadvantages.</p> <p>LK asked about the impact on the CSCB’ capacity (support/contribution and achieving good outcomes for children) if we join up especially as numbers are low compared to the other Local Authorities. BL feels the system will work better overall in terms of shared back office and being able to have a more valid overall population base to enable more meaningful statistical analysis. RB had hoped that the report would provide a more detailed explanation of the costs and benefits associated with the proposal. BL agreed but confirmed that there will be no cost. AF suggested that a trial would allow for us to return either to present arrangements or a stand-alone panel.</p>		

GPY confirmed that under the present arrangements core tasks were shared out and each LA area was responsible for ensuring notification and supply of information/cooperation with review process. GPY did feel there may be implications in terms of time/length of meetings as well as possibly travel time. GPY confirmed if agreed meetings would change to quarterly. RU thought that there could be gains and benefits for us, in terms of economies of scale and access to experience and expertise regarding the earlier discussion re, ethnicity and communities. LK agreed with this but still felt that the fact that there were fewer cases to review in Calderdale presented some issues that were not really addressed in the report.

RB summarised:

- The extent to which and when the proposals made in the Wood Review was as yet unclear as the legislation was currently being considered by Parliament and indicative timescales if the legislation is enacted indicate that any transitions may take place in 2018. Until this is clearer as a Board we may be wise to attend to our current responsibilities.
- It was clear from the discussion that more information was needed and there were questions around costs, equity and distribution of process, responsibilities and potential risks as well as impact on CSCB overall performance.
- He felt that in principal, there was Board support to look at a shared arrangement for CDOP to replace the existing shared arrangement with Kirklees.

However he noted the comments from members and the concerns raised, and felt that at present we could not endorse or enact the proposal other than in principal and that further discussion and working out of detail was needed.

**The Board endorsed this position.**

	<p><b>Action – RB and BL to discuss possible steps to address questions</b></p> <p><b>Action - RB to write to chairs of Wakefield and Kirklees LSCB's to make them aware of our position.</b></p>	<p>RB/BL</p> <p>RB</p>	
<p><b>3.3 Learning Disability Mortality Review (LeDeR) Pilot – Yorkshire and the Humber</b></p>	<p>Paper received and presented by PW. This is about a pilot project by NHS England to review learning from all deaths involving people (4 – 84) with learning disabilities. ICCG Expects 3 or 4 cases to be reported through from now till end of the financial year, but Reviewing process yet to be finalised and they are waiting for further guidance. PW confirmed that there is an offer from NHS England to come to a CSCB meeting and talk more about the pilot. <b>It was agreed that this may be helpful but the Case Review sub group would need to consider any further implications for the CSCB case review process as details were clarified.</b> PW noted that there would be more focus on the learning from adult deaths from an incidence basis. BL confirmed that the CDOP review every child death. RB wondered whether the NHSE project has sufficiently taken into account the LSCB and SAB statutory responsibilities and processes.</p> <p><b>Action – PW share the Flow Chart from her Project Team with GPY and BL</b></p> <p><b>Action – GPY and Case Review Sub-group to look at process with a view to identifying any issues or implications for CSCB so as to share these and identify resolution if necessary.</b></p> <p><b>Action – CS to raise points (fit with LSCB/SAB process, avoidance of duplication, resource implications for partners) with NHSE</b></p>	<p>PW</p> <p>GPY/JC</p> <p>CS</p>	
<p><b>4.1 CSCB Business Group Exception Report for the Local</b></p>	<p>Paper received and presented by LK. RB reminded members that we were still trying out new ways of doing things, so that this was the first time the Board had taken one of its agreed annual reports</p>		

**Authority Designated Officer  
Annual Report (cross reference  
to 5.2) AKA Allegations against  
professionals who work with  
children arrangements**

from partners about a core function/responsibility, so feedback would be helpful. It was also noted that in line with this approach a full copy of the LADO annual report has been circulated for members to refer to.

The report raised a concern re low level of referrals from the health sector. GPY reported that she has carried out an audit for health and there were only 2 cases that could have been referred but didn't meet the threshold. It was not clear whether these had been reported as opposed to becoming a referral. GPY advised that it may be necessary to further explore in the health sector present internal arrangements for sharing reports or notifications re allegations against staff who work with children. GPY did feel there was a robust procedure. It has been agreed at the Business Group, that further enquiry was required to ensure that there were not anomalies between internal reporting and how these were made known to/referred to the LADO.

RU would like more information about how we can be assured that children are being listened to within the process. LK felt that the primary concern of the LADO was to be sure that whenever an allegation was made, all partners provided a consistent response, and in doing so this would demonstrate that all were listening to children and taking them seriously. RU accepted that there were constraints re process and resources, but did feel that the report especially in terms of reports/referrals that did not result in a clear outcome could suggest that children were not being fairly listened to? LK felt that the reports/referrals that resulted in a child protection response by CSC produced some assurance but agreed that further consideration of the need for an additional level of assurance could be something the LADO takes forward.

AF asked about LADO reports/referrals about allegations against the Police and asked how we could better understand how internal processes relate to the LADO process? VF confirmed that the Police information/data can be provided to the CSCB. This report has challenged VF's thinking and he will look into things and report back to the CSCB. It was agreed that the apparent anomaly that the Police are involved in LADO process/response investigations but that

they were not reports to the LADO.

PW would like to obtain assurance from commissioned Health Providers before carrying out an audit as she would want the CCG to be better aware of the position in order to strengthen the LADO arrangements.

JL and AE confirmed that they are going to carry out some more awareness raising and suggested that learning be shared with other VCS groups.

**JWS challenged the information on page 2 - point 6 and asked how do we know that the physical restraint was carried out appropriately?**

RB felt that this was an appropriate challenge, and that it might be reasonable to allow the LADO some time to consider this and bring back a report It was confirmed that the above is included in the Section 11 Audit.

RB summarised:

- He thanked the Business Group for its report and he felt that this additional level of scrutiny had been helpful enabling members to engage and agree actions as a result (see below)
- He noted the learning points re the new process for reports and added that we may need, having looked at the attendance and representation of the Business Group that we may need to consider safeguards re conflicts of interest and ensuring sufficient partnership input?
- He proposed and this was agreed that the report and the learning it represented was accepted. He also asked the Board to note that the LA had revised its arrangements, and was maintaining its commitment in terms of resources and responsibilities.
- He noted that as in previous years the LA was encouraged to have a clear development plan including risk management and to continue to report on progress and impact through the annual report.
- He felt that as a result of scrutiny the following actions and steps had been identified;

	<p><b>Actions –</b></p> <ul style="list-style-type: none"> <li>- <b>Further enquiries and reporting by partners re the specific issues around level of shared information into LADO process/arrangements (as noted above)</b></li> <li>- <b>The LADO to respond to the questions raised re; to what extent and how does the current process ensure that we know children are being listened to? And consideration of the issues and opportunities to better be assured that the use of physical restraint across all settings was being appropriately responded to.</b></li> <li>- <b>The agreement of the new referral form</b></li> <li>- <b>Clarification of the statutory reporting requirements for all partners and confirmation of this in guidance and information</b></li> <li>- <b>All partners to be aware of training that can be accessed/provided and to ensure that their own staff are trained.</b></li> <li>- <b>The CSCB will continue to look for improved information sharing and how this is applied within the LADO process to ensure effective outcomes for children and that this will be evidenced through the LADO annual report and any internal scrutiny/QA arrangements the LA may have in place.</b></li> </ul>	<p><b>VF/PW/JL</b></p> <p><b>LADO/LK</b></p> <p><b>VF/PW/LK</b></p> <p><b>ALL</b></p> <p><b>ALL/LADO/ Local Authority</b></p>	
<p><b>4.2 Partner Impact Statements</b></p>	<p><u>Adult &amp; Children Merger update (SS)</u>  SS provided an update now that the Council had agreed the arrangements. They were looking to identify possible synergies and an advert has just gone out for a Project Manager (e.g. Looking to create a single front door for out of hours).  SS made the Board aware that there was a substantial reduction in Service Manager posts in CSC and this was necessitating a wider look at current</p>		

	<p>structures and arrangements. The Council was concerned to maintain the progress made in respect of CSC post intervention.</p> <p><u>CQC Inspection of CCG (PW)</u> Finally received the CQC, Children Looked After and Safeguarding report. There is a lot of work going on with Action Planning. Report has been formally sent to the CSCB Chair. PW noted that Public Health can be inspected but don't receive a CQC report.</p> <p><b>Action – PW to advise the Board of the CCG response to CQC report and any implications for partners and current joint working arrangements.</b></p> <p><u>School Nursing Service (BL)</u> The School Nursing Service is under pressure due to receiving a lot of referrals.</p> <p><b>Action – BL to get more information from the Nursing Service and take to the Business Group</b></p> <p><u>Domestic Violence Homicide Review (AE)</u> There has been a learning event with practitioners and there will be a report. AE will ensure that learning is fed into the Case Review Sub-group</p>	<p><b>PW</b></p> <p><b>BL</b></p> <p><b>AE</b></p>	
<p><b>4.3 Local Authority Early Intervention Panel Review</b></p>	<p>Paper received. JJ explained that for a number of reasons it was thought to be a good time to review arrangements and the report highlighted these. JJ felt that on the present evidence there was a good understanding of thresholds and there were many positives. She was keen for members to be fully involved in the review and its outcomes. JJ agreed to share the Terms of Reference. It was intended that the findings would be collated in December.</p> <p>SS noted that the LA has and continues to take a lead in early intervention arrangements and there is a question as to whether 4 panels as now is</p>	<p><b>JJ</b></p>	

<p>sustainable, not only because of recent staffing changes. The Council will need to formally consider any changes given the importance of early intervention and panels to the current strategy to reduce numbers of CLA and ensure children are effectively protected.</p> <p><b>SS provides a challenge to partners as to whether or not they could become more actively involved in the resourcing and chairing of panels and early intervention?</b></p> <p>BL agreed that a more multi-agency approach to Charing would be welcomed and that as a board we need to be assured early intervention arrangements remain robust and effective,</p> <p>AE confirmed her support for the arrangements and that these have resulted in a much more effective response to domestic abuse</p> <p>RB summarised:</p> <ul style="list-style-type: none"> <li>- All partners recognised the value and importance of the commitment to early intervention and the role this played in protecting children, the CSCB had a statutory responsibility to ensure that these arrangements were effective and improving through its scrutiny and arrangements for thresholds.</li> <li>- He thought it would be helpful to for the board to have a clear view of the options arising from the review before these were agreed so that the Board had the opportunity to exercise its responsibilities and support continued partnership commitment and contribution.</li> <li>- He reminded members of SS challenge/invitation and encouraged all concerned to look at the possibilities</li> </ul> <p><b>Action - JJ to advise, re terms of reference and further questions raised (including point re involving Anti-social Behaviour Panel</b></p> <p><b>Action - JJ to advise as to final process and how the CSCB could</b></p>	<p><b>ALL</b></p> <p><b>AE</b></p> <p><b>JJ</b></p> <p><b>JJ</b></p>	
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<p><b>4.4 Update from the Local Transformation Plan for Emotional Health and Wellbeing</b></p>	<p><b>contribute to and be consulted</b></p> <p>Paper received.</p> <p>Julie Killey was welcomed to the meeting. RB reminded meeting that as a Board we had taken an interest in and were supporting this significant area of development for 2 reasons; firstly because we were aware that the services and arrangements in question addressed the needs of some of the most vulnerable children and young people and secondly because we knew from national and local learning that there were particular risks that could compromise the protection of children. He also noted that as a Board we were seeking to develop how we worked with commissioners and other partnerships to ensure that the protection of vulnerable children and mitigation of known risks was effective and a priority.</p> <p>JK explained that the paper provided background and progress against the multi-agency plan/strategy that was intended transform how the emotional and mental health needs of children in Calderdale were met.</p> <p><b>Members raised the following points and challenges:</b></p> <ul style="list-style-type: none"> <li>- It was confirmed that the 80 days waiting time is a genuine waiting time and is not fabricated. There is a crisis team for urgent cases.</li> <li>- The early intervention arrangements were carefully targeted and were incrementally being rolled out, however the length of waiting times and the impact of new services was still a matter of close scrutiny by the Task Group and the report demonstrated this.</li> <li>- JWS confirmed that this has had a positive impact on the Tier 3 CAMHS service.</li> <li>- PW asked: What metrics should the CSCB be looking at as this is important to think about? Need to think about the impact of waiting times and do we understand what happens to the children who are not in the crisis situation? Do we need a Deep Dive? Kirklees have carried out some work and there could be some learning for Calderdale.</li> <li>- Julie Killey confirmed what support families receive) and how a lot of</li> </ul>		
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	<p>work is carried out by the Voluntary Sector.</p> <ul style="list-style-type: none"> <li>- AF asked about measuring the impact and Julie Killey confirmed that the feedback received has been very positive but it was recognised that a fuller set of measures and analysis was being developed.</li> <li>- The Local Transformation Plan is not just about CAMHS and SWYPFT have successfully received some funding which augments the wider approach.</li> <li>- Julie Killey confirmed that the data is being monitored and PW said there will need to be safeguarding checks.</li> <li>- It was noted that further work is being done to ensure that, there will be the Voice of the Child to help shape and form the services.</li> </ul> <p>RB summarised, and thanked Julie Killey for a full and comprehensive report that gave members a good feel for how things were going:</p> <ul style="list-style-type: none"> <li>- Clearly this was an important and ambitious approach in an important area, and he felt that the Board remained concerned at the length of time it can still take for some children who are in need of help to get this, but was assured that this was improving and that there were emergency/fast track arrangements in place.</li> <li>- Board members have confirmed there was evidence from their points of view that some of the early intervention services were working through.</li> <li>- Board members noted the commitment to include the voice of the child in all aspects of the plan and that a better range of metrics and analysis were being worked on.</li> </ul> <p><b>Actions -</b></p> <ul style="list-style-type: none"> <li>- <b>PM Sub-group to continue to monitor indicators relating to children’s mental health as this impacts on the protection of children</b></li> </ul>	<p><b>PM Sub-group</b></p>	
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	<ul style="list-style-type: none"> <li>- <b>CSCB and CYPPE/Task Group to maintain liaison and to ensure regular updates to the Board to ensure that risks to children and safeguarding joint working arrangements remain effective</b></li> <li>- <b>Board and Business Group to ensure thresholds and other core Board outputs/outcomes reflect the development of this plan</b></li> </ul> <p>Thanks were given to Julie Killey.</p>	<p><b>CSCB</b></p> <p><b>CSCB/ Business Group</b></p>	
<p><b>4.5 CQC Report from the CHFT Inspection</b></p>	<p>Link received providing access to full report.  RB thanked VT and noted that as a Board we were developing how we sought assurance from partners in the light of inspection as to their learning and any wider learning for the Board.  VT highlighted the positives which included Training – recommendation from the CQC was that that all staff under take safeguarding training and delivery was improving within the context of the Trust setting more realistic targets.  The report noted that the Trust had FGM guidelines but there were opportunities for more join up across services and the information systems and this was being taken forward through additional training. Trust leadership had a recent “go see” and were reassured that the work carried out since March is working. The Trust has developed a Consent Task &amp; Finish Group to address this aspect of the findings  RB asked if there is any learning for the CSCB and VT feels they have moved on a long way. There is a recruitment drive that is ongoing and at the moment it is hard to release staff for training, so this is a risk both for the trust and joint working arrangements.  JJ felt that there was a need for the Trust and partners to be more transparent about the recruitment and training/staffing levels as this was an important area for the Boards PM and scrutiny arrangements.  PW would like to understand why the CSCB would have interest in the staffing issues and A&amp;E may not being safe. JJ reminded the board that this was a board priority re “leadership and governance” area of the PM data indicator and</p>		

	<p>welcomed the challenge. JJ felt that whilst some further clarification would be worked out, the essential issue was being able to be aware of the extent to which partners and therefore the board were aware of pressure points as these impacted on core joint working arrangements to protect children.</p> <p>Reconfigured service arrangements in the light of the learning have gone out to consultation and PW confirmed that the CCG have a day by day view of what is happening. It was noted that changes might have to be made quickly for a safety point of view.</p> <p>RB summarised as follows:</p> <ul style="list-style-type: none"> <li>- Members could read the full report and it was helpful to learn from VT how the Trust was getting on in response to the findings.</li> <li>- In terms of developing how we share and respond the discussion provided some direction to this in terms of sharing information, making sure the Board's monitoring and scrutiny were covering key points across the system and that we could recognise from findings and learning opportunities to further support and improve joint working arrangements to protect children.</li> </ul>		
<p><b>4.6 CSCB Local Authority Internal Audit of Management of LSCB</b></p>	<p>Members were asked to note the report and the positive outcome.</p>		
<p><b>4.7 CSCB Performance Management Dataset Reports</b></p>	<p>Jacque Hellowell (JH) was welcomed to the meeting. Five papers received. Highlight and Exception reports from Quarter 1, from the Performance Management Sub-group. Quarter 1 Child Protection Overview Exception Report. Quarter 1 Children Looked After and Adoption Exception Report. Quarter 1 Early Help Overview Exception Report. Quarter 1 Leadership and Governance Overview Exception Report. The above 4 documents are basically the journey of the child through the process. Feedback from the last CSCB had been incorporated and JH was continuing to</p>		

work on development as well as working closely with partners to improve the sharing and cleansing of data and information.  
 JH also monitors all red indicators on a regular basis.

**Early Help Indicators 1.1 – 1.10**

Positives (Green)  
 Jacquie Hellowell briefed members on the positives (green). The Board accepted that these gave assurance that this important part of the child’s journey was performing well and that partners monitoring and measurement was in place. The sub group was asked to note the discussions earlier in the meeting re the impact of review of early intervention

Areas to Watch (Amber)  
 CAMHS – PW felt that this was not clear as to meaning or significance, she did not disagree that this was an appropriate area to look at. **BL questioned whether this should be Amber and his challenge is that this is looking at the performance of CAMHS.**  
 JH said there are some transitional issues re data and analysis. JJ confirmed that this can be discussed at the Performance Management Sub-group with a view to clarifying position.

Areas for Improvement (Red)  
 PW asked why this is red and are there still issues?  
 BL thinks to have data sharing but not of the highest quality. He suggested amber/red rather than just red. RB says this is an important area that we need to look at.  
 It was felt that it is the narrative that goes with it.

**Child Protection Indicators 2.1 – 2.12**  
 Tier 4 is solely commissioned by NHS England and there is ongoing work to reach a viability point in terms of data/information. The Board confirmed this as

<p>a priority</p> <p><b>Children Looked After and Adoption Indicators 3.1 – 3.8</b> The Board reviewed these, but due to time constraints and on the advice of the chair any further points to be fed back to JH. PM Group will continue to develop, monitor and scrutinise</p> <p><b>Leadership and Governance Indicators 4.1 – 4.5</b> This was noted and given that earlier in the meeting there had been challenge/discussion re this area, these outcomes and actions were endorsed.</p> <p><b>Learning points</b> It was confirmed that it is much more helpful to read the above documents with the fuller pack/data indicator report as this allowed members to follow up and supported effective scrutiny and challenge. JH reminded members that the full report had been circulated with the papers. Members were thanked that their colleagues working very hard to bring this information together, but it remained complex and sometimes challenging. The Board thanked JH for her work The Overview and exception reports were felt to be working but must reference with the bigger report. There were some practical issues re colour printing and power supplies for devices. The use of and understanding of comparator measures, national, regional and local remained an issue, so it was felt helpful to keep working on this. The Performance Management Sub-group will continue to work to solutions. <b>It was agreed that there is a lot of good work going on and how we should stick with the reports.</b></p> <p><b>Actions and Summary:</b></p> <ul style="list-style-type: none"> <li>- <b>Performance Management Sub-group and JH to maintain direction of travel</b></li> </ul>	<p><b>PM Sub-group</b></p>	
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	<ul style="list-style-type: none"> <li>- All partners to continue to prioritise cooperation and contribution of information analysis and expertise</li> <li>- Board identified learning to be considered and adopted as appropriate</li> <li>- Specific challenges to be followed up</li> <li>- Issues around time/facilitating member engagement, provision of narrative etc all remain valid</li> <li>- Evidence supports a) that we have an appropriate range of indicators, b) that reporting arrangements continue to offer potential to improve whilst demonstrating delivery so that Board members can be better assured that we know what is working</li> <li>- Members were asked to note that the chair is in consultation developing his role in being assured that our PM arrangements are ensuring we are well sighted, proactive and responsive</li> </ul>	<p>ALL</p> <p>CSCB</p> <p>JJ/JH</p> <p>CSCB</p>	
<p><b>4.8 Multi-agency Audit Group (MAAG) Report</b></p>	<p>Paper received. Due to time constraints RB asked the Board to defer this item. He noted comments received that there may be an opportunity to add to the quality of this report.</p> <p><b>Action – Discuss Multi-agency Audit Group (MAAG) Report at the next CSCB meeting</b></p>	<p>LK</p>	
<p><b>4.9 Children &amp; Young People’s Partnership Executive (CYPPE) and linkage with CSCB</b></p>	<p>Paper received.</p> <p>RB explained that we were trying to close the gaps between partnerships and the CSCB and take more ownership about keeping children safe in Calderdale. There were a number of challenges and questions raised which were noted and due to time constraints RB will respond in writing to members</p>		

	<p><b>Action – RB to respond to points raised in writing with a view to confirming endorsement</b></p> <p><b>Action – wider issue of partnership development is scheduled for the Development Day</b></p>	<p>RB</p> <p>RB</p>	
<b>4.10 Serious Case Review (SCR) Update</b>	<p>Paper received and was noted GPY drew particular attention to <u>Child M</u></p> <p>The Child M Report is planned to be published on 16 November 2016. This will be a pro-active publication as it was announced in the court process that undertaking a SCR.</p>		
<b>4.11 Budget</b>	<p>Paper received.</p> <p><b>Action – Members to send any direct questions to JC</b></p>	<p>ALL</p>	
<b>5.1 Minutes from Sub-Groups</b>	<p>Minutes received from:</p> <ul style="list-style-type: none"> <li>Business Group – 19 October 2016</li> <li>Performance Management – 6 September 2016</li> <li>Learning &amp; Improvement – 11 October 2016</li> <li>Communication &amp; Engagement – 14 July 2016</li> <li>Early Help &amp; Prevention – 18 July 2016</li> <li>Proactive &amp; Responsive – 15 September 2016</li> <li>Multi-agency Audit Group – 18 October 2016</li> </ul>		
<b>5.2 Full LADO Annual Report</b>	<p>Discussed in Item 4.1.</p>		
<b>5.3 Section 11 Challenge Events Information</b>	<p>For information and pending future agenda</p>		
<b>5.4 Section 11 Report from Initial Evaluation</b>	<p>For information and pending future agenda</p>		
<b>5.5 Full Performance Management</b>	<p>Three papers received.</p> <p>For information only to cross reference with Item 4.7.</p>		

<b>Dataset and Scorecard</b>	CSCB Performance Indicator Report Quarter 1 July 16. CSCB Scorecard Context Report Quarter 1 August 2016. CSCB Scorecard Report Quarter 1 August 2016.		
<b>6 Any Other Business</b>	JK raised an issue that an e mail she had recently seen appeared to suggest that there was a statutory duty to report any safeguarding issue. After discussion it was felt this may have related to the recent government consultation, but needed to be checked.  <b>Action – JK to send RB the email</b>	<b>JK</b>	
<b>7 Rolling Reports/Future Agenda Items</b>	Planned for January 2017: CSE & Missing West Yorkshire Peer Review Feedback. Domestic Violence Strategic Group Update. Learning & Improvement Sub-group Bi-annual Update and Safeguarding Week Feedback. Section 11 analysis and feedback		
<b>8 Deferred Items for January 2017 Meeting</b>	Children Looked After Annual Report – deferred from November 2016 CSCB meeting due to report not being ready. Independent Reviewing Officer (IRO) and Child Protection Conference Chair Annual Report 2015-16 - deferred from November 2016 CSCB meeting due to full agenda.		
<b>9 Date and Time of Future Meetings (2017)</b>	All meetings – 2 pm – 5 pm – Shay Stadium, Halifax Thursday 19 January 2017 Thursday 2 March 2017 Thursday 4 May 2017 Thursday 6 July 2017 Thursday 7 September 2017 Thursday 2 November 2017		