

**CALDERDALE SAFEGUARDING CHILDREN BOARD
THURSDAY 3 DECEMBER 2015 – 2 PM – 5 PM
THE SHAY STADIUM, HALIFAX**

Meeting Attendance

Initials	Agency	2.4.15	4.6.15	6.8.15	1.10.15	3.12.15
IB	Adults Health & Social Care	D	A	Y	N	Y
JS	CAFCASS	D	D	Y	D	A
PW	Calderdale CCG	Y	Y	A	D	Y
HB	Calderdale College	Y	N	A	A	Y
RU	Calderdale Governors Association	-	Y	A	Y	A
JY	CHFT	Y	-	-	-	-
PO	CHFT	Y	D	Y	A	A
RT	Communities & Service Support	D	Y	Y	N	Y
JC	CSCB	Y	Y	Y	Y	Y
RB	CSCB Independent Chair	Y	Y	Y	Y	Y
BW	CYPS	Y	Y	Y	D	-
JJ	CYPS	-	-	-	-	Y
SS	CYPS	Y	Y	Y	Y	A
IH	Democratic & Partnerships	N	Y	D	N	N
JP	Housing	D	Y	A	Y	D
SK	LAY Member	Y	A	A	Y	Y
JT	LAY Member	Y	A	N	Y	A
CR/CMS	Lead Member	Y	A	Y	Y	N
MS	National Probation Service	A	Y	Y	Y	Y
GPY	NHS Commissioners	Y	A	Y	Y	Y
CS	NHS England	Y	Y	Y	Y	A
VT	NHS Trust	-	Y	Y	Y	Y

LB	Primary Heads	A	Y	A	Y	Y
LN	Primary Heads	A	Y	A	D	Y
NH	Probation CRC	A	A	A	Y	A
CW/BL	Public Health	A	A	A	Y	Y
LK	Safeguarding & Quality Assurance Service	Y	Y	Y	Y	Y
AF/WM	Secondary Heads	Y	D	A	Y	Y
TB	SWYPFT	Y	Y	D	D	Y
JL	Voluntary Sector	Y	Y	Y	Y	Y
MG	West Yorkshire Fire	A	N	A	Y	A
DW	West Yorkshire Police	Y	Y	Y	D	Y
AE	Women's Centre	Y	Y	A	Y	Y
JR	YOT/Early Intervention	Y	Y	Y	Y	Y

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

Observer - Julie Warren-Sykes (JWS) - SWYPFT

In Attendance for Items 3.2 and 3.3 – Jacquie Hellowell (JH) – CSCB PMQA Officer

In Attendance for Item 4.3 - Sadia Hussain (SH) – CMBC Prevent Co-ordinator Neighbourhoods

1 Welcome, Introductions and Apologies for Absence	Members were welcomed, introductions made and the apologies noted. It has been proposed that JJ will be the new Chair of the Performance Management Sub-group and she chaired the last meeting. RB confirmed that members who have joined the Board recently will receive an induction.		
Declaration of Interests	These will be dealt with if any are declared. No conflicts of interest were made known in advance.		
2 Minutes of last Meeting and Matters Arising and Action Log	Minutes Page 1 PW sent a deputy to represent her at the October 2015 meeting.		

<p>(1 October 2015)</p>	<p>Action – LGS to amend the attendance sheet – COMPLETE</p> <p>Page 3 <u>Section 11</u> Section 11 is on the March 2016 agenda.</p> <p>Page 6 <u>Child Death Overview Panel (CDOP)</u> Conversations are still underway. Not ready to come to the CSCB yet but a paper will be ready for the March 2016 meeting. RB has a meeting with the Kirklees Independent Chair.</p> <p>Page 8 CDOP Annual Report 14/15 report not yet published. It will be published in December.</p> <p>Page 21 <u>CSE National Working Group Gold Network</u> Further information has been circulated but not yet on the website.</p> <p>The minutes of the meeting held on 1 October 2015 were agreed.</p> <p>Action Log <u>3.4 - Safer Recruitment Training</u> No issues were raised. Maintain in action log ongoing monitoring.</p> <p><u>4.3 – Performance Management (QA & Audit)</u> Only one partner has come forward with possible auditors, LK understood that many agencies were under pressure, but audit programme could not move forward as planned without active</p>	<p>LGS</p>	
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support from members. The intention and the agreement is to create a larger pool of people who can be released for multi-agency case audits, as presently we are over reliant on a very small group of people. RB wondered if partners fully appreciated and understood what was being asked for, and whether we could be clearer that the time commitment is relatively small, people will be supported and it is in itself a valuable activity which can support career development.

Mapping of single agency audits; This was a key part of the work plan, which aimed to find out the range and extent of single agency audit activity (or the equivalent thereof) so as to draw on this for assurance and to help target multi agency audits, thus reducing the demand on members time (ref previous point). Response had been disappointing so another request had been sent out.

Action – Members to consider impact on progress of not being able to achieve a viable pool of “auditors” and to complete the mapping of single agency audits.

ALL

Action - Members to identify solutions within their own agencies and identify auditors.

ALL

Action - JH/JC to look at communicating requirements in ways that would support member recognition of the importance of this activity and objective.

JH/JC

(JC reported she has met with Lisa Handley with this in mind).

Action – LK to report progress at the next Board meeting and sub group and current auditors to continue with audit programme

LK

<p>2.1 Correspondence received and sent</p>	<p><u>National Probation Service</u> Letter received. MS noted early stages of proposed organisational changes which may impact on capacity and contribution to current safeguarding joint working arrangements. RB thanked MS and noted it was most helpful when partners were able to advise the Board of planned or imminent changes especially when they may impact on safeguarding arrangements.</p> <p><u>National Panel of Experts re SCR Decisions</u> Panel has agreed with Chair's decision that the 2 cases did not meet the criteria for SCR</p> <p><u>Ministers Letter Re Direction Notice and Improvement</u> The Ministers Letter was received yesterday and will be circulated later. Calderdale have been lifted out of the improvement notice.</p>		
<p>3.1 Business Plan update to include progress against Ofsted recommendations</p>	<p>Two papers received and presented by JC.</p> <p>Response to and progress in relation to Ofsted Review recommendations. The self-assessment was completed in October 2015 using the Business Plan and evidence from the work of the sub groups and Board meetings.</p> <p><u>3.1 – Managing the response to CSE</u> Progress is being maintained but there are some areas of risk (e.g. CSE recording/data). Darren Minton is working with Jacquie Hellowell to rectify this. It also reflects a regional issue. DW asked if there is something at Force Level that can be done. Stuart Piper is the PCC lead on CSE for West Yorkshire and he might not have the data from all the force areas. RB asked what this meant in terms of the Board's primary responsibilities to evaluate the effectiveness of joint working</p>		

core response remains positive and this year has seen the launch of challenge events, although these are running behind schedule, early feedback from these is positive. There remain issues around non engagement of some schools, the need to further evaluate and afford an appropriate on line tool, and we have yet to agree detailed plans for engaging third sector organisations that sit outside those covered by commissioned services, (and there is further learning to consolidate in respect of the inclusion of Section 11 into service specifications).

Analysis, learning and further recommendations will be completed in time for the 14/15 exercise.

Action –Board members to take report at either the Development Day in January 2016 or the March 2016 CSCB meeting in order to agree next Section 11 and continued investment and development of the strategy which is a key part of our PMQA framework.

Business Plan

JC reminded members that the Business Plan is the central document that underpins reporting in from the sub groups and forms the basis on ongoing monitoring and risk assessment, which the Business Group and the Independent Chair oversee.

3.2 – The PM dataset is further developed to enhance Board member scrutiny, assessment and challenge

PW feels the work being carried out on a regular basis can be evidenced and thinks this should be green not amber. This raised the wider issue of “how do we determine what good looks like/how do we describe it” RB felt we should be cautious in how we assess

ALL

	<p>Register and maybe for the Business Group to consider some of the above comments and learning. JC confirmed that now is the time for self-assessment becoming more focused in the context of the development day, the commitment to link this to the publication of an interim Annual Report Executive summary as a part of our normal business cycle.</p> <p>PW noted that the CSCB are firmly committed to developing a risk assessment and that rag rating by itself is not enough. TB asked how do we know when the rag rating is green and felt that this would be better integrated into our core processes.</p> <p>RB asked members if they felt that the information, evidence and discussion allowed them to confirm that “Direction of travel is satisfactory?” It was agreed that it was.</p> <p>RB further asked if members supported the further integration of risk assessment and self-assessment into the annual report led business planning cycle supported by the development day. This was confirmed.</p> <p>This links into the agenda for the Peer challenge in March 2016 and to get the lines of enquiry for the Peer challenge really tied in.</p>		
<p>3.2 Performance Management Indicator Dataset and Scorecard Development and Review</p>	<p>Paper received and presented by JH.</p> <p>RB explained that this was a challenging area for all LSCB’s and the purpose of this item was to review and assess development of our approach and arrangements. He also reminded members that we had agreed this was an important priority.</p> <p>JH said that on the basis of 12 months development of the Performance Management Framework, the report will show continuous improvement including the capacity to compare indicators with neighbours and trend analysis.</p>		

<p>JH emphasised that there was still progress that needed to be achieved. JH explained the role of the Performance Management Sub-group re development and use of the framework and how this informs and supports overall scrutiny, assurance and the need Board members to engage with areas of concern and enquiry. JH noted that this would also now be more important as the LSCB filled some of the gaps formerly filled by the Improvement Board</p> <p>JH drew member’s attention to the 4 source documents she has used and how this draws on developments elsewhere in the country.</p> <p>Work is ongoing to draw on what is known as the “Herd Indicator Report” (which draws LA data together) as this will benefit some of the indicators. Development of the indicators is being supported by lead officers from partners who have an interest in the respective indicators.</p> <p>JH highlighted some of the key points in the Report. The strategic drivers for change. Development of how we report the data and analysis (e.g. Traffic Light report) and potential and opportunities.</p> <p>A key emerging issue was how we should establish and agree assurance thresholds.</p> <p>Members were advised to look at the recommendations on page 14. JH invited comments and questions;</p> <p>PW would like timeframes around thresholds and endorsed that the CSCB have a user guide.</p> <p>AE asked about the Domestic Abuse indicators as she doesn’t know whether the information she reports is coming through and RB</p>		
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<p>confirmed that this was an issue in a number of areas/indicators, that integration/read across was a significant long term challenge. It was observed that perhaps the thematic focused and looking at good practice could be developed? It was noted that the application of an outcome based Proforma can help in this respect. TB agreed with PW's point about thresholds and said that a conversation needs to be had about this. RB confirmed that this would be the case .TB thought it is important to get the foundations right. RB felt we needed to be sure we had the balance right between looking forward as well as backwards.</p> <p>JJ suggested that the Performance Management Sub-group develop how risk factors in relation to what the indicators are telling us to the CSCB and this was agreed.</p> <p>RB indicated that as we developed our capacity we needed to ensure that each element of our process was clear, thorough and reflected the independent status of the Board. He would want to look at his role in the emerging framework and arrangements.</p> <p>Actions:</p> <ul style="list-style-type: none"> - Further consideration of framework and its use/development at development day - Agreed and progress changes identified in the report - Sub Group to consider criteria for risk and enquiry triggers - Sub group and chair to further consider assurance thresholds - It was agreed that we could spend time on this at the Development Day 	<p>JJ</p>	
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	Thanks were given to JH and her report.		
3.3 Quarterly Performance Management Dataset and Scorecard	<p>Four papers received and presented by LK. The Reports identify the areas of challenge and the current work/lines of enquiry that the Performance Management Sub-group is undertaking.</p> <p>The CSCB noted the Report.</p>		
3.4 Performance Management Quality Assurance Post review (temporary)	<p>Paper received and presented by JC. RB noted that the purpose of this item was for members to form views as to the effectiveness and impact of this temporary role/additional investment. In order to consider whether there were options for when the post finished, This post was agreed for 12 months and funded by 3 of the statutory partners (Pennine Housing, Police and the Local Authority). She noted that the need to develop the Board's PMQA arrangements was and remains a priority and a significant risk. The report and the former agenda item as well as past reports provided evidence to show how the post had been used and to what effect. It was noted that in effect this was a 9 month review but this was necessary if there was to be consideration of any extension of the role/post.</p> <p>Members asked what the impact would be on the CSCB if didn't continue with this post and JC confirmed that before JH came into post the CSCB relied on a Local Authority resource but this resource is no longer available, and in any case may not be appropriate given LSCB role. JC noted that in preparing the report she had surveyed arrangements in neighbouring LSCB's and there was a clear trend towards ensuring the LSCB had in house capacity re PMQA. JC felt that the post has resulted in a lot of positive changes and improved the CSCB understanding of the data.</p> <p>The post heavily involved in the Performance Management Sub-group, leads on Section 11 and the Challenge Event and is the Single Point of Contact (SPOC) for CSE.</p>		

<p>SK feels that there is a clear need for a dedicated person for performance management data.</p> <p>RB referred to 7.1 in the report and how the areas covered by this post are key to CSCB governance and effectiveness.</p> <p>There was discussion about how such posts were funded, and the difficulties that resulted as a result of there not being a nationally agreed funding formula for LSCB's, which meant that each Boards position was different. PW noted that this meant that it did not relate to numbers of children in an area.</p> <p>JJ feels it would be the wrong move if this post was not continued. RB confirmed that this seemed to be the consensus, but raised the issue of how this could be achieved.</p> <p>PW suggested that the budget reports could show this role/post so it would be clearer where and to what activity partnership funding was being deployed.</p> <p>Actions:</p> <ul style="list-style-type: none"> - On the basis of Board support to explore and continue the extension of the role the following was agreed; - RB to formally write to partners who funded the post to ask them to formally confirm that they were satisfied that they had been provided with sufficient evidence to justify their investment - RB to write to all members in the light of a positive response from the above partners to ask them for their suggestions/offers as to how the Board could maintain the post and role - JC to develop options and clear cost/benefit/risk analysis 	<p>RB</p> <p>RB</p> <p>JC</p>	
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	<p>- RB to report back to members on the outcome from the above.</p> <p>Thanks were given to JC.</p>	RB	
<p>3.5 Female Genital Mutilation Strategic Response</p>	<p>Two papers received and presented by GPY. GPY had been tasked by the Board with updating the Strategic response following their agreement which she has. She received no feedback from agencies.</p> <p>The FGM Strategy is going to the Adult Board next week and the Community Safety Partnership hopefully in the New Year, for their support and sign up. This may result in a need for some further updating. RB confirmed that this will only come back to the board on the basis of planned review and evaluation, unless either of the other strategic partnerships has raised significant points or issues.</p> <p>GPY advised that each partner needed to ensure that there was a read across into their training arrangements and that the relevant LSCB sub group would also address this.</p> <p>PW said she would be interested to know how the gaps were going to be filled in the Action Plan and is the Task & Finish Group a standing group? RB understood that the T&F group was time limited and that this was tied to the points at which members agreed the response and the relevant reporting and monitoring arrangements were integrated into member and LSCB processes. At this point the group he felt should be stood down and review arrangements would be overseen as a part of the LSCB PMQA arrangements.</p> <p>AE put herself forward to be involved in the Task & Finish Group. AE was thanked and her offer accepted.</p>		

	<p>RB highlighted to the Board that the name of the document was intentional i.e. “Strategic response” and as with the recently agreed “supervision principles and framework”, it signalled that the LSCB and other strategic partnerships was to seek agreement as to how members would work together on an issue, and sought their commitment to this. The LSCB role was then to support and monitor this and respond to key learning, successes and exceptions. It was confirmed that the FGM Strategic response is a good example and can be used as a pilot.</p> <p>Actions:</p> <ul style="list-style-type: none"> - Once this has been to the 3 Boards, RB will write to the Chief Executives of member organisations to formally endorse their commitment. - T&F Group to finalise action plan and embed in partner and Board arrangements and then to confirm stand down date. - LSCB sub groups and Business Group to work with T&F Group to integrate monitoring and reporting arrangements. - A Conference planned in March 2016 that will provide the opportunity to promote FGM and partners response. - <p>Thanks were given to GPY and the Task & Finish Group.</p>	<p>RB</p> <p>Task & Finis Group</p> <p>Sub-groups/ Business Group</p>	
<p>3.6 Multi Agency Training Evaluation (Quarters 1 & 2 and Overview)</p>	<p>Four papers received and presented by JC.</p> <p><u>Summary Report</u></p> <p>This sought to bring together in summary form the range of data and information contained in the more detailed quarterly reports. These were in turn subject to continued development and improvement as efforts were being made to rationalise, correlate and integrate data and information so that it matched the key lines of enquiry and</p>		

scrutiny determined by our strategic objectives and the risk status of this activity.

JC highlighted points on the report.

JC highlighted some main points and where deficits in information and objectives were being addressed.

JC highlighted progress being made in respect of event/course evaluation and the intention is to provide members with an overall indication of progress as well as what it is telling us. This work would also ensure that via Board reports there could be feed into other forms of scrutiny and assurance such as Section 11.

JC highlighted the recommendations. DB asked about the Training Leads and highlighted that Pennine Housing were not included and would like to be.

It was noted that the Learning & Improvement Sub-group are working on a more strategic approach and will bring this forward shortly (ref Ofsted recommendation) It was suggested that the collecting and analysis of data could come under the PMQA role/brief?.

RB noted that from the reports available and the discussion it felt that there was progress being achieved, but he expressed a personal view that he had found it hard to co-berate this from the ways in which the information and analysis was presented. He felt that this might be an area we could improve on?

IB felt that we ought to be able to benefit from a deeper dive into and position re the impact of training activity

AE pointed out the wider training and how some agencies bring in external training is not yet reported in the reports/data. She felt

	<p>more should be done on this.</p> <p>Actions:</p> <ul style="list-style-type: none"> - Member comments to be noted and included in current sub group drafting of recommendations for the Boards approach in the future (ref Ofsted recommendation) - Members felt that there was continued evidence of progress in key areas re delivery and evaluation of impact, and supported the recommendation that both the use of and reporting of data could usefully be improved and it was suggested that the PMQA role be considered for this(Subject to any decision re this role) - The Sub-group will develop an integrated approach to use of evidence/data that relates to key requirements and objectives and supports a revised approach to reporting. - RB asked members to note that our statutory responsibility is to establish policies and procedures for the coordination of multi-agency/training and to evaluate its effectiveness and impact. <p>Thanks were given to Allison Waddell/JC and the Sub-group for reports.</p>	<p>JC</p> <p>L&I Sub-group</p>	
<p>3.7 Continuum of Need Document</p>	<p>Two papers received and presented by JR. JR noted recent stages of development and highlighted the amendments that had been made. (Feedback is noted in his report).JR will re-draft the document after the changes and will go to print. From a parent's point of view, PW felt there should be a brief introduction (for parents) .RB wondered if the document should just be for professionals but in any case it would still need an introduction.</p>		

<p>invited comment and questions. PW pointed out that there is a limited section on health and thinks quite a bit that could be strengthened. LK confirmed that she did liaise with Hannah Smith over this section but agreed it could be further developed. AE felt that there could be more emphasis on Pathways arrangements. The question was raised as to what the LA assurance and scrutiny arrangements were in respect of corporate parenting and CLA. LK explained this and it was felt this highlighted the need for the LSCB to be clearer as to how it worked with these arrangements The meeting considered the learning and recommendations for the LSCB especially in relation to children placed in and out of the area. JWS asked about restraint and it was confirmed that this is included in team teach training.</p> <p>Actions:</p> <ul style="list-style-type: none"> - Future reports to include fuller consideration of health needs and effectiveness of joint working arrangements for CLA. - Future reports to develop focus on pathways/transitions and leaving care arrangements - Link to Council Corporate parenting and scrutiny arrangements to be included in future reports and included in current governance and relationship development activity. - Areas of learning identified for the LSCB by the report to be further considered as the basis of inclusion in revised business plan. - Members agreed that PMQA would ensure exception reporting re CLA and that this report should in this 	<p>LK LK LK JC</p>	
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	<p>format with suggested revisions, as an annual report, that informed the LSCB view of and focus on this vulnerable group of children and young people.</p> <ul style="list-style-type: none"> - To discuss Children Looked After (CLA) at the Development Day 		
<p>4.3 Prevent Co-ordinator Report</p>	<p>Thanks were given to LK.</p> <p>Paper received and presented by SH. RB explained that pending agreement between the respective Boards (SAB and CSP) he felt the lead for Prevent rested with the CSP, but that as a Board we needed to be clearer about what we needed to take forward and how we reported this back to the CSP. He also noted that the “duty” placed on a number of partners including schools and other academic institutions are range of requirements.</p> <p>SH briefly explained her role and that her report identified what she felt were currently the main issues and implications the Board needed to be considering.</p> <p>Response to this agenda was still at an early stage but the Channel Panel was established in September and will now meet monthly as this reflects the demand. SK asked about the children at risk if their parents are getting radicalised and it was confirmed that this is what the Channel Panel is for.</p> <p>The CSCB, Adult Safeguarding Board and Community Safety Partnership need to be re-assured that this is running effectively and that it is incorporated into existing pathways and joint policies and procedures.</p> <p>There is RAP training (workshop to raise awareness around Prevent) and this would be developed. The CSP recognises that</p>		

people have a choice about where they access training and awareness raising from and would hope that partners would support the training they are coordinating.
SH produces quarterly reports that will highlight anything that may impact on the CSCB.

Actions:

The following was agreed:

- **As a Board we need to develop and keep a strategic overview (a watching brief) and only get involved in agreement with the CSP/SAB in specific areas.**
- **To get the chairs together from the Strategic Boards.**
- **To agree where overlap exists and who will do what and how this will be reported**
- **The CSCB will need to ensure that the appropriate and proportion data and information is provided for PMQA and that clear thresholds and terms of reference are agreed for SH's reports.**
- **Review Policy & Procedures with SH and WY Consortium**
- **Training & Development – to be considered for inclusion in future Programme in line with revised strategic brief.**
- **To support further dialogue and understanding of issues for Schools and HE Sector**
- **RB and JC to agree timeline for future report on progress and being able to clarify LSCB contribution and level of priority.**

It was confirmed that Prevent information will shortly be on the website.

Thanks were given to SH.

<p>4.4 Update from Improvement Board and Cross Board/Partnership working</p>	<p>Time constraint led to this item being deferred however the issue was partially addressed in other items.</p>		
<p>4.5 Mental Health and Emotional Wellbeing Position Paper</p>	<p>Paper received. RB noted that the context of this item was to ensure that the Board was sighted on this important development and that such developments addressed and reflected current and past learning from safeguarding. He also noted that going forward this was likely to have implications for LSCB re thresholds/pathways, Policies and Procedures, PMQA and overall focus on health wellbeing and safety of CYP. PW felt this item would have been more helpful as a 5 minute presentation.</p> <p>Action:</p> <ul style="list-style-type: none"> - Members noted developments and potential implications for LSCB - It was agreed to have Mental Health and Emotional Wellbeing Position Paper as a development item. - To look at alternative ways of how the Board receives information and reports 		
<p>4.6 Serious Case Review Update</p>	<p>Paper received and noted</p>		
<p>4.7 HMIC Inspection of the Youth Offending Team (YOT) in Calderdale (November 2015)</p>	<p>JR briefly outlined recent inspection pending feedback</p>		
<p>5.1 Calderdale Clinical Commissioning Group Annual Report</p>	<p>Two papers received. GPY noted that report like the CSCB report had run a little behind schedule, but was now available. RB noted that agreement had been reached to look at the cross</p>		

	reference and read across between the 2 annual reports, given the CCG report provided a comprehensive range of evidence re impact of and learning from safeguarding activity across the a large part of the health sector.		
5.2 A - Association of Directors of Children's Services Policy paper re LSCBs B -Office for Children's Commissioner - report re Child sexual Abuse C - NSPCC: Concerns Neglect of Teenagers aren't being reported D - Family Drug and Alcohol Court FDAC E - NSPCC Service for Schools F - Free App for personal safety from the Hollie Gazard Trust	Link received and for information only. Link received and for information only. Link received. Paper received. Two papers received. Link received.		
5.3 Minutes from other Partnerships/Boards and sub-group Reports/Minutes	Papers received from and for information only: Business Group (11 November 2015) Performance Management (10 November 2015) Learning & Improvement (3 November 2015) Communication & Engagement (5 November 2015) Early Help & Prevention (16 November 2015) Proactive & Responsive (22 October 2015) Multi Agency Audit Group (24 November 2015)		
6 Any Other Business	Some members expressed their concern over the volume of papers for CSCB meetings and RB confirmed that work is being carried out refine current internal processes, use of alternative mediums to		

	<p>access information, clearer labelling and to specify for providers of reports required formats.</p> <p>It was agreed to address matching demand to available time and resources on Development Day.</p>	ALL	
7 Rolling Reports/Future Agenda Items *	<p>Papers to be received from: Communication & Engagement: Marketing Strategy Learning & Improvement Strategy to include sign off of 2016/2017 (Multi agency Learning and Improvement Programme which will be circulated to members in advance for comment) Section 11 analysis and proposals for 15/16 and update on current strategy</p>		
8 Deferred Items for March 2016 Meeting			
9 Date and Time of Next Meeting	<p>Thursday 3 March 2016 – 2 pm – 5 pm – Shay Stadium</p> <p>Please note date for the Board Development Session: 21st January 2016 at The Orange Box, Thomas St, Halifax, West Yorkshire HX1 1AF NB Part of this day will be dedicated to any urgent Board business.</p>		