Notes from the Shropshire Safeguarding Children Board Meeting

1:00pm – 4:00pm, 31 October 2018

Wilfred Owen Room, Shirehall

Keeping our children safe from harm

Present

Safeguarding Children Board Members

Keith Barham	(KBa)	Youth Justice Service
Phil Beaumont	(PB)	Service Manager, CAFCASS
Karen Bradshaw	(KB)	Director of Children's Services, Shropshire Council
Dawn Clarke	(DCl)	Executive Director of Nursing, Shropshire CCG
Sharon Conlon	(SC)	Safeguarding, Lead Adults & Children, SSSFT
Julie Harris	(JH)	Named Nurse for Safeguarding, Shropshire Community Health Trust
Colleen Male	(CM)	Head of Safeguarding, Children's Services
Adam Matthews	(AM)	Shropshire Fire & Rescue Service
Ivan Powell	(IP)	Interim Independent Chair SSCB
Dee Radford	(DR)	Shrewsbury & Telford Hospital NHS Trust
Kerry Williams	(KW)	Voluntary Sector Representative, Shropshire Youth Association

Also in attendance

Jo Banks	(JB)	Care Group Director – Women & Children's
Nick Bardsley	(NBa)	Lead Member Children & Young People, Shropshire Council
Rebecca Bishop	(RB)	Inspector, West Mercia Police
Laura Caldecott	(LCa)	Nurse Specialist, Looked After Children, SCHT (Observing)
Frances Darling	(FD)	Trading Standards & Licensing Operations Manager, Public Health
Siobhan Hughes	(SH)	Service Manager, Quality Assurance & Performance
Liz Murphy	(LM)	Independent Author

Apologies

Nicki Bellinger	(NB)	Robert Jones Agnes Hunt Hospital
Nicola Bond	(NBo)	Primary Head Teacher Representative
George Branch	(GB)	Community Rehabilitation Company
David Coan	(DC)	Designated Nurse, Shropshire Clinical Commissioning Group
David Cookson	(DCo)	Deputy Head, National Probation Service
Sarah Godden	(SG)	Secondary Head Teacher Representative
Ellen Green	(EG)	Community Member
Steve McAlinden	(SM)	Further Education Representative (Shrewsbury College Group)
Kevin Purcell	(KP)	Chief Superintendent, West Mercia Police
Dr Jessica Sokolov	(JS)	Named Doctor, Shropshire CCG
Bev Tabernacle	(BT)	Director of Nursing, RJAH

Rod Thomson	(RT)	Director of Public Health
Jason Wells	(JW)	West Mercia Police
Clive Wright	(CW)	Chief Executive, Shropshire Council
Deirdre Fowler	(DF)	Director of Nursing & Quality, SaTH
Audrey Scott-Ryan	(ASR)	Designated Nurse/Chair of CDOP

SSCB Business Unit

Sam Anderson	(SA)	Shropshire Safeguarding Boards Business Manager
Lisa Charles	(LC)	SSCB Development Officer
Corinne Chidley	(CC)	SSCB Training Co-ordinator
Sarah Chidlow	(SCh)	SSCB & Children's Trust Administrator (Minute Taker)

Item		Actions
1	**Welcome and introduction** The Chair welcomed everyone to the meeting.	
2	**Shrewsbury & Telford Hospital Update** RD presented the presentation.  Presentation for Safeguarding - 31.1(The board members discussed the presentation and The Chair asked about the CQC findings and the longer Secretary of State review. The Secretary of State review is still ongoing due to some of the cases going back 20 years. The CQC review is separate to the other review. The Chair mentioned pregnant mothers have declined services, as they do not want to go to the PRH, therefore do the board need to do anything to encourage these mothers to attend the PRH. DR replied the consultants need to make sure the pregnant mothers understand the reasons for attending the PRH. DCI reported in 2017 the Royal College of Nursing reviewed the midwifery services and the feedback was positive. Since then there have been a number of improvements for example: heart monitors are being used. The Royal College is also seeking assurance on a weekly basis. Not all mothers want to go to the central units but all CCGs are taking place at Shrewsbury or Telford. The local maternity unit review feedback about reducing the foetal heart issues, as mothers do not recognise the foetal movement. There is a lot of work nationally. The CCG concerns have been escalated to NHS England for a risk review on ED. After unannounced visits, asked if identified any safeguarding issues and they said no.	

The Chair mentioned there is no possible date for the Secretary of State review, is there anything the board members could do to get the message out about foetal movement.

DR reported SaTH could share what to say to mother's about foetal movement.

Action: DR to circulate what members of the board / professionals can say to pregnant mothers about the foetal movement. **Dee Radford (A146)**

3 CDOP 10 Year Report

ASR was unable to present this report, however, JH mentioned about a CDOP lead nurse appointed. ASR received no comments from partners regarding the 10-year annual report that she presented at SSCB Executive sub group with SSCB CDOP template. ASR working with CCG executive nurse safeguarding leads, public health and CDOP team to implement new CDOP plans to meet working together 2018 recommendations within a tight timescale.

4 SCR – Child D

LM gave an overview of the SCR report and the findings.

SSCB presentation 31.10.18.pptx

Child D said when he was late 5 or early 6 years old, 'I just want to make everyone happy'. There was parental conflict. There are 5 priority areas for learning.

<u>Learning Point 1: Safeguarding Referral Pathway</u>

CM mentioned Compass is both Initial Contact Team and Early Help.

LM reported from the GP and schools perspective, they thought they had made a safeguarding referral to Children's Social Care. The Threshold document was revised but not all referrals are made in writing, as mentioned in the Threshold document.

<u>Learning Point 2: Managing allegations in respect of children of separated parents</u>

LM mentioned about the safeguarding allegations in paragraph 4.2.16 of the report.

JH reported some cases of child protection are categorised Neglect due to domestic abuse.

CM mentioned in the last 12 months there has been an increase in emotional abuse.

The Chair stated the sexual abuse allegation was not investigated, therefore where was it reported to the police.

LM replied the explanation is in the report provided by Police; the information was shared and a decision was made to file the report by public protection.

Learning Point 3: Working with fathers
LM mentioned about the unconscious bias in paragraph 4.2.26 of the report. There was a reduction in contact between father and Child D but mother had breached this contact order.

PB explained that mother made allegations in court and therefore pushed for supervised contact. Could father have been approached by the domestic abuse agency or would he have had to self-refer.

CP mentioned father took the case back to court about contact not mother.

LM explained the domestic abuse agency could have worked with both parties but would not contact father, just because the mother had self-referred.

Learning Point 4: Section 37 enquiry/report referral pathway
The Chair asked if this is a national issue with Section 37 requests.

PB reported CAFCASS should notify the LA of a Section 37. There are 137 LAs, each front door operates differently; therefore, CAFCASS needs to clarify their safeguarding procedures. CAFCASS concerns may not meet the threshold of safeguarding.

CM mentioned if professionals have safeguarding concerns for a young person, then those concerns need to be referred in.

PB agreed with CM about referring in all safeguarding (child in need) and child protection concerns to the LA.

LM shared CAFCASS will amend their internal guidance so that they notify the LA of Section 37 and reiterated that if there are any safeguarding concerns below significant harm threshold, internal guidance should require that they be reported too.

Recommendations
LM raised the recommendations on page 32 to the partners.

The recommendations around processes/procedures/systems are recommendations a, e and f in the report.

The recommendations around audit/assurance are recommendations b and d in the report.

The recommendation around workforce development is recommendation c in the report.

The recommendation around culture are recommendations g and h in the report.

Next Steps

LM reported the paternal family members have asked to see the report before publication. Father has asked for extra time to read and digest the report and has stated he will not go to the media.

Discussion on the report took place. DCI found the report and representation really helpful.

The Chair asked if mother is still in denial and the police are unable to define the time of death.

LM mentioned mother is still in denial. In response to the time of death,? the police have based their information on mother's self-reporting.

KB suggested if mother had phoned the school to say Child D was not attending, school would not automatically phone father to inform him.

LM informed the board that father's main contribution to the report is that he had made safeguarding concerns, which were not acted on. Father had co-residence of Child D. The system thought mother was the victim.

The Chair asked about the timescale for the recommendations to be completed.

CM reported there was lots of discussion at the SCR panel meeting. CM asked when is the report going to be published. Some of the recommendations have been started already, the LA are working with partners around pathways into the front door. CM asked how and when are the updates on the recommendations going to be reported to the board, maybe at the next Executive sub group.

The Chair reported there have been initial discussions with the communications team around the publication of the report. The actions will be reviewed elsewhere, and will be publishing what happened since the incident.

CM asked who would be meeting father prior to the publication of the report.

CP reported LC and CP would meet with father. LC has met father previously. They are hoping to meet with father in November before the publication date. They are going to ask the mother if she would want to see the report before publication but she has previously declined. There will also be feedback to mother's partner and half sibling, before the publication date.

CM explained father has contributed to the process, his voice has been heard and has said things we all know, which is really important. CM suggested should Liz meet with father, as she has formed a relationship with father and she is not a partner agency, father is very angry with local authority and feels let down, does he not need reassurance from an independent person that this review has been rigorous?

LM replied that she was happy to be involved but in the first instance the contact with father would be through the Safeguarding Board. Father has asked for report in advance and then said he would want his victim support

representative at the meeting, therefore, LM thought father will need time to process the report findings
The Chair raised concern about father having the report 3 weeks before formal publication. The Chair is less worried than LM and LC about him having the report prior to the meeting, as he needs to be supported to read and digest the report and ask questions. Father needs to understand the report has been completed to address the terms of reference and the review process is now complete . Father has a good relationship with LC and victim support will be present.

CM expressed concern that we do not know how he is going to feel on receiving the report.

CP replied they can explain to father CP's role in the process, therefore, CP does not think it requires LM. CP mentioned they would not be giving the father the report prior to the meeting, he can read it with the victim support worker.

KB asked if father acknowledges LM as independent, would he ask specific questions. Does father think the incident could have been preventable?

LM replied she thinks he will ask questions later, they want the report published as soon as possible, so they can grieve. Maybe victim support can help father. Father has not said he thinks the incident could have been predicted and he has indicated that mother is responsibility for Child D's death. Paternal grandmother has been supporting the family.

The Chair summarised that the report is not to be given to father prior to the meeting. The report can be given to father with victim support present, prior to the publication. LC and CP to ask father if he has any questions / clarity on the report.

Partners raised concerns about father going to the specific agencies for answers to questions, for example, any questions that relate to CAFCASS, and then they could go direct to CAFCASS but should go through the board.

CP explained they would try and manage the situation around questions.

KB reiterated that agencies do not respond to any questions from father, but to direct him to the Safeguarding Boards Business Unit.

CM asked if the timeline could be circulated to partners, as that would be useful to inform staff and any learning events to take place.

The Chair reported Gareth is working to a communications plan.

Once proposed document is ready, it will be circulated to the board members.

LM mentioned the board action plan needs to go to the National Panel. Some changes have been made.

5	**Minutes and matters arising from SSCB Board Meeting held on 16 April 2018** The members agreed the minutes were an accurate reflection of the meeting, except SC asked for SSSFT to be replaced with MPFT. The board members went through the action log. ***Action A119: The Chair to consult with other West Mercia Independent Chairs and write to West Mercia Police with the challenges on behalf of the LSCBs, with a draft letter being circulated for comment before sending.*** The Chair reported he is due to meet with JW and Kevin Purcell to discuss further and will include the training attendance discussion. There is an issue with consistent police attendance; Kevin is picking up over the 5 areas The following actions were agreed to be closed: ***Action A136: The Chair and SA to write an action plan from the development day and circulate to members.*** The Statutory Safeguarding Partners (SSP) has been established. ***Action A140: To obtain evidence and conduct Section 11 audit analysis.*** The evidence section has been amended on the online Section 11 tool and evidence has been uploaded. Analysis to be completed by LC. ***Action A141: Exclusions to be a theme for multi-agency audits in the future.*** The exclusions audit was agreed to be a single agency audit and if there were wider safeguarding issues raised, then it would be a multi-agency audit. ***Action A142: The Chair to meet with JP regarding schools approach to hate crime.*** JP, IP and SA met to discuss hate crime, KCSIE updates and exclusions (link with county lines, contextualised safeguarding and drug and alcohol abuse). Potentially to link in exclusions with future audits. ***Action A143: Voluntary Perpetrator Programme Evaluation to be reported to Domestic Abuse Forum and SSCB.*** GB to inform when the review by Chester University will be conducted and arrange a future agenda item accordingly. The following action was to remain open, due to it still ongoing. ***Action A137: The Chair, Kevin Purcell and JW to meet and consider who SSCB should formally communicate to within West Mercia Police to ensure that during any change programme activity the board impact assessment is fully completed.*** The Chair is due to meet with JW and Kevin Purcell to discuss further and will include the training attendance discussion. ***Action A138: IP, SA and SH to review the Board performance dataset to ensure that it is multi-agency.*** A meeting had taken place to discuss the new dataset, and will be implemented from quarter 2. The dataset is moving forward and is ongoing. Siobhan has updated Children's Social Care dataset, The Chair is liaising with DI Jon Roberts from West Mercia Police and SA is pursuing other partners particularly health for their data. The police have a new IT system, which is the reason for the difficulty in getting all the data.	**Ivan Powell (A119)** **Ivan Powell (A137)** **Ivan Powell, Sam Anderson, Siobhan Hughes (A138)**

Action A139: Recommendations relating to writing to agencies and Shrewsbury Town Football Club should be conducted by The Chair. **Ivan Powell (A139)**
This action is still outstanding.

Action A144: Quality Assurance and Performance Sub Group to monitor progress of the Children's Social Care Action Plan. **Siobhan Hughes (A144)**

Action A145: JI will explore Andreea Aschenazi's comments around sharing information on claimants, when required. **James Ibbs (A145)**
The Chair to chase this action.

6 Quality Assurance & Performance report – Multi-Agency UASC Audit, Quarterly Dashboard & Section 11 Audit

SH reported the dataset is still working progress. The new dataset was sent to partners and the QAP sub group will continue to monitor.

Item 6a SSCB 2018 Dashboard Q1.pdf

SH reported the data is Social Care data. The referrals continue to go up but are lower than their statistical neighbours. Neglect is the biggest category for CP. The repeat referrals are increasing.

KB explained there is a significant rise in LAC cases. They are managing the demand for young people into the system, but Children's Social Care cannot continue to manage the demand due to the challenges with families. It costs a lot of money for the LA, health and police when young people are placed into care. The board needs to understand why the increase in LAC children is happening. County lines is impacting on the system. Alcohol and substance misuse is also impacting on families.

Further discuss took place and The Chair asked whether the joint needs assessment does what it should do. There is a lot of complexity within the families. The Chair asked if the right people are attending the SOCJAG meetings, to ensure multi-agency response. Also, need to look at the JSNA.

KB reported maybe SOCJAG is the first place to identify the issues but health, substance misuse and mental health maybe included in those meetings.

KBa reported that the first time entry has been going down since 2009 but in the last quarter, it was increasing.

The board members discussed exploitation, due to the lack of an exploitation pathway, and there are similar issues being raised with criminal exploitation as CSE. Shropshire has high number of low risk CSE cases. There are plans in place to have a joint (adults and children's) exploitation sub group. SH mentioned JR and SH had raised the need for an exploitation pathway. There needs to be a better understanding of the exploitation issue and how agencies respond to the issues. The members mentioned about the complexities including the mental health and alcohol,

substance misuse abuse within the families. The cohort of high level of need families has increased, as well as young people being exploited through county lines. The challenges with mental health issues is different to 4 years ago.

The members agreed there needs to be understanding on why this increase is happening before the agencies can do anything about it. There needs to be an analysis of young people entering into the LAC system. KB suggested identifying what intelligence is first then a task and finish group look at the identifying intelligence before taking to the summit. There are meetings taking place on exploitation.

KBa asked are the agencies tracking children involved with criminal exploitation and the care system, or are the adults involved with criminal exploitation, substance misuse and then the young people coming into the care system due to neglect.

KB mentioned there were not these issues 12 months ago; there was a huge shift about 6 to 8 months ago in LAC.

Multi-Agency Audit – CSE

SH reported the multi-agency audit was completed on Child Sexual Exploitation and the transition into adult services to provide assurance to the SSCB regarding practice in this area.

Item 6 QAP Report for SSCB October 20

County Lines was discussed at this audit. The CSE pathway had been embedded. The young people have a CSE marker on the police system but once become an adult; the only marker the police can use is vulnerability marker. In Telford, they have CATE workers and it was discussed that Shropshire should have a CATE worker, and Sarah Corteen agreed to take this further.

KB asked if young people who do not meet the threshold for adult services still receive support.

SH informed the board members that there is no provision for young people who do not meet the threshold for adult services.

Section 11 Audits

LC reported on the Section 11 audit.

Item 6b S11 report October 2018.docx

Shropshire piloted the new regional section 11 audit tool. There were 3 standards completed in 2017 and the other 4 were completed in 2018. The audit was sent to 18 agencies and only 16 completed the full audit. Only 5 agencies completed the questions in full. National Probation Service and CAFCASS complete national Section 11 audits. Energize submitted their evidence for Section 11.

Action: LC to check the average scoring for the Section 11 audit on the system. **Lisa Charles (A147)**

KB asked what they are doing about the agencies who have not completed the full Section 11 audit.

SH mentioned they need to understand why the agencies could not complete the audit.

LC clarified that each agency needs to put a narrative against every scoring. LC suggested for agencies that span more than one LSCB they could just complete one Section 11 audit.

The Chair suggested feeding back the findings to the regional group, around the issues agencies have had in completing the audit.

KBa mentioned some LA's questions are different in regards to evidence. Telford and Worcestershire have localised their Section 11 audits.

JH reported she struggled to upload some of the documents.

LC mentioned the themes have been around some agencies not providing the evidence, some agencies provided evidence of practice of change, there were a lack of actions plans, which agencies need to be challenged about. There was no safer recruitment training in place. Agencies were weak in providing evidence in relation to the number of referrals to the LADO in the Section 11 audit, but the LADO has been receiving referrals.

The Chair suggested it would be useful to gather feedback on the Section 11 audit, especially given that some boards have changed some of the questions.

SA explained there was a discussion at the last Executive Sub Group in relation to a task and finish group being set up to look at the feedback from the Section 11 audit.

7 SSCB Training Annual Report

CC presented the Training Annual Report and the updated Training Strategy.

Item 7b Report on SSCB Multiagency Tr

Item 7a Review SSCB Training strate

CC informed the members that the training strategy is kept up to date and current, with all the training packages, however, some of the terminology could be wrong now. The business unit check who attend the training and they listen to the evaluations.

8 Discussion around Parents taking their babies (under 1's) to 15/18 rating films in the Old Market Hall cinema

FD informed the members that KB had suggested bringing this agenda item to the meeting, as she thought the board members were the appropriate people to mention this too. The BBFC is in place nationally,

but LA's can determine what films are shown to whom. The Old Market Hall approached FD to put in place a baby/parent screenings for 15 and 18 rated films. There is a duty to protect young people from harm. Shropshire Council owns the OMH. There are 5 questions on page 6 of the report, for which the board are being asked to answer.

Item 8 SSCB 101031
- Parent and baby fil

The Chair asked are the BBFC aware of this issue.

FD responded the BBFC have the skills to rate and put those ratings in place. It has happened for 12As and below films previously. The strategic licensing committee to make a decision on whether the 15 and 18 films can have parent screenings.

The Chair explained licensing needs to reassure the board that young people are being safeguarded.

CC reported Attingham Park in the summer were screening Dirty Dancing and there were babies present to that, which was rated a 15 film.

PB mentioned there are baby and parent screenings for films 12/12A and under taking place in Shropshire.

CM understands why parents want to take a small baby to the cinema because they are asleep, but 12 month old children run around. CM does not think there is a fix answer to that question, and therefore can only give a personal view.

SC suggested just giving the answer that is the view of the BBFC.

FD will take the views of the board members way and The Chair will speak with FD out of the board meeting about this agenda item.

9 Any other business

There was no any other business raised.