

**MINUTES OF BLACKPOOL LOCAL SAFEGUARDING CHILDREN BOARD (BLSCB)
TUESDAY 14th JULY 2009**

Present:

Dennis Charlton	Independent Chair
Sheila Sutherland	Assistant Director, Targeted Services, Children and Young People's Department
Paula Swindlehurst	Quality Assurance Service Manager
Angela Walmsley	LSCB Business Development Manager
Tess Tackett	LSCB Training Coordinator
Peter Jefferson	Chief Executive, Blackpool Coastal Housing
Ian Phillips	Assistant Chief & Area Director Blackpool, Lancashire Probation Service
Liz Holt	Director of Children's Community Health Services, NHS Blackpool
Dr Cathie Turner	Designated Nurse, Child Protection NHS Blackpool
Dr Robert Wheatley	Designated Doctor, Child Protection, Blackpool Hospital's Trust
Marie Thompson	Director of Nursing & Quality Clinical Governance Directorate, Blackpool, Fylde & Wyre Foundation Hospitals Trust
Lynne Worden	Headteacher, St John Vianney Catholic Primary School
Julie Smith	Pupil Welfare Manager
Dawn Lang	Assistant Director, NSPCC
Andrew Lowe	Head of Service, Youth Offending
Steve Hobson	DI, Lancashire Constabulary, representing DCI Justin Srivastava
Sarah Price	Local Safeguarding Children Board Administrator

Guests:

Amanda Quirke	LADO
Ruth Clayton	CDOP Coordinator
Lynn Donkin	Public Health Specialist
Andrea Thorley-Baines	Partnership Manager, Domestic Abuse

1. INTRODUCTIONS

Introductions were made.

APOLOGIES RECEIVED FROM:

Alison Long, Principal Solicitor, Legal Department, Blackpool Council
Delyth Curtis, Assistant Director, Children's Health
Dr Arif Rajpura, Director of Public Health
Justin Srivastava, DCI, Lancashire Constabulary
Susan Morley, Service Manager, Blackpool & Lancaster CAFCASS
Dr Colin Scott, St Paul's Medical Centre
Janet Hambly, Senior Service Manager Operations, Targeted Services
Dr K Vasudev, Faith Group Representative
Efrem Jones, Vice Principal Sixth Form College
Jim Keefe, Deputy Head, Arnold School
Sue Harrison, Assistant Director Learning & Achievement, CYPD
Karen Smith, Assistant Director, Assessment Prevention & Support, Adult Social Care & Housing

2. MINUTES AND MATTERS ARISING FROM 2nd June 2009

Parenting Handbooks

These have now been sent to all primary schools and High Schools for year 7 parents. The PDF version has been sent to the LSCB Admin to put

Action

onto the LSCB website.

Minutes agreed as an accurate record.

Agenda Items 27.01.09

3. Budget

Following discussions at the last Board, the Chair has sent the proposal back to the External Communications Manager, with a request to review the proposal and halve the original cost. A response is expected imminently. Once this is received it will be sent to all Board members to review.

LSCB Admin

There has been no further movement on establishing a Safer Recruitment working group. Chair requested that all representatives forward the name and contact details of HR representatives from their agency to LSCB Admin, **within 2 weeks**.

All Members

LSCB Admin will then forward to Chair.

LSCB Admin

4. LADO

The LADO gave a progress update of tasks undertaken since being in post. All members received a copy of the report produced. The LADO informed the Board that as well as providing training to private nurseries, more training and briefing sessions are being arranged with the 3rd sector.

The LADO suggested that an Allegations Management Group be set up.

Assistant Director Targeted Services suggested that the report be referred to the Operational and Quality Assurance Sub Group for more detailed analysis and review, and to discuss the mechanics for setting up the Allegations Management Group.

There is a self assessment tool for allegations that the LADO would like all member agencies to complete, and requested the views of the Board as to the best way to go about it.

It was agreed that the tool would be sent out to all members, and any that require assistance completing it inform the LADO, who will arrange to meet with them.

Safer Recruitment

The LSCB Business Development Manager, LADO, LSCB Training Coordinator and Strategic HR Manager for Blackpool Council are meeting to ensure that safer recruitment requirements for the Board are met. Information will then be fed into the Board for all agencies to share.

Feedback from meeting to be shared at the next Board on 29th September 2009.

The issues was raised that some agencies have representatives sitting on more than one Board as they are county wide services. The tools provided to them are not always uniform, creating extra work.

Chair confirmed that the tool in question is provided by Central

Government, therefore, all Boards should be using the same one.

Chair and the Business Development Manager are meeting with the Chairs from Lancashire and Blackburn with Darwen on 4th September. This issue will be raised at that meeting.

Chair requested that the LADO feed back to the Board every 6 months.

5. CDOP Procedures

The draft procedures were brought to the Board for ratification, and a request made to designate the Lancashire CDOP Coordinator as the single point of contact to be notified of all child deaths (under 18) occurring to Blackpool residents, or occurring in the Blackpool area.

The Public Health Specialist went through the procedures and accompanying flow charts, to ensure clarity to all members. The recommendations and flow charts have been taken from DCSF information and guidance.

Any agency can notify the CDOP Coordinator of a child death. If the Board approve the procedures, the information will be published in the public domain to ensure that the information is available to all.

All information from the forms that are completed upon a child death, are held on a central database, with information on all child deaths in Lancashire.

The CDOP Coordinator is required to submit an annual return to DCSF, which the LSCB Chair is to approve and ensure its submission.

The CDOP have already approved the procedures.

The question was asked if information is also provided from the registrar of deaths. This is the case, however, registrars only inform once the inquest is complete.

The Board would like clarification on the calculation of the proposed costings. Initially, agreement was reached in principal. PCT's normally contribute based on the population of the county and not a straight split.

The LSCB Business Development Manager will investigate this further and provide clarification.

The Board agreed to approve the procedures, and to designate the CDOP Coordinator as a single point of contact.

The question was raised re; procedures being in place in the CDOP Coordinators absence from work. The Board was reassured that there are a team of people working with the Coordinator, who will provide cover during any absence.

6. Domestic Abuse Action Plan – Priorities for LSCB

An updated report was given to all members.

The original Domestic Abuse Strategy expired in April 2009. The new strategy document is a longer term, 5 year plan.

**Business
Development
Manager**

There has been a change of focus; the new perpetrator programme. There is no longer a requirement that support be provided only to those in the criminal justice system.

There are 4 outcomes in the new strategy document:

- Outcome 1 – Excellence in tackling domestic abuse
- Outcome 2 – Zero tolerance towards domestic abuse
- Outcome 3 – Safe, consistent and high quality services
- Outcome 4 – Victim and family safety.

The Domestic Abuse Statement of Intent and Delivery Plan and indicators were highlighted.

The strategy should be seen as a working document, that has room for expansion as and when updates are required to the processes involved.

The new Catalyst Team was launched on 14th July 2009. In preparation for this, some members of the team went out with police over the weekend, and, surprisingly, no calls were made that related to domestic abuse. One of their tasks is to reduce repeat domestic abuse occurrences by 3% in the 1st year of operation.

The question was asked how gender neutral are the services on offer, as the LGBT community have a low reporting rate.

There is only Fylde Coast Women's Aid which is for women, all other services are no-gender specific.

There is work currently underway on a joint bid with Broken Rainbow, to appoint a Development Worker to improve the reporting rates.

The strategy document points out specific figures relating to women; Board members would like this to also show the specifics on domestic abuse towards men.

It was asked if the strategy document fits into the Pan Lancashire arrangements. This is to be discussed at the Strategy Management Board Meeting. There are currently 3 different models all trying to work towards the same aims. It was pointed out that even if all the procedures were uniform, different areas may place a different value of domestic violence, depending on how prevalent it is in their area.

An area assessment has been completed on the Blackpool area, and has been green tagged for the work carried out around domestic violence. Further work is being undertaken to convert the green tag to a green flag.

Headteacher, St John Vianney is on the working group. Head teachers are very grateful for the new reporting system, as they can now appropriately assist with the management of children living with domestic abuse.

7. Serious Case Review – Child F

A briefing paper was introduced by the Independent Chair of the current Serious Case Review Panel.

Currently, 72% of IMR's in the northwest are judged inadequate. Despite

running a 2 hour training session, and offering individual assistance, there are 2 main concerns with the IMR's being submitted.

1. Some IMR authors are not critically reviewing practice in their own agency; and
2. All the IMR's received have required revision, and are not being submitted in a timely fashion.

In view of this, an extension has been requested from GONW.

The IMR's are not referring to the Terms of Reference. This should form part of the QA process in each agency. Most agencies have a tendency to go further than the Terms of Reference, which is judged as bad by Ofsted.

Agencies must ensure that a senior manager quality assures the documents, prior to sign off and submission.

Designated Doctor, Child Protection sits on the Serious Case Review Panel. In his capacity as Designated Doctor, he gives medical advice to other agencies, and has given advice in this case. This is now a conflict of interest, and there is a risk that this may arise on a regular basis.

Certain areas are more used to the processes, as they are dealing with SCR's regularly. Blackpool is fortunate that very few cases result in an SCR; however, this does not assist agencies to become accustomed to the process. The guidance is not necessarily clear, and can conflict between GONW and Ofsted.

Some agencies may require internal procedures to be put in place to help clarify the process and ensure as little delay as possible. To assist, the process for feeding information into agencies is to be made clearer.

The revisions to Chapter 8 of Working Together cover health issues specifically in relation to IMR's. Agencies should read the latest guidance and devise the best way forward.

All agencies should ensure that the relevant people, with the correct access to information, are complete the IMR. They should critically analyse their agency, and state what has and what has not been done.

It would be beneficial for agencies to have exemplars to refer to. These have been requested from GONW by the Chair of this Review, but have not been received.

The Chair is requesting full commitment from each agency to complete and QA each IMR to the best of their ability.

8. Annual Development Day

Notes from the Annual Development Day were given to all. Part of the Business Development Manager job share is now in post, and the remaining part will be starting in September.

The Business Development Assistant has been appointed and will also be joining in September.

One of the key tasks for the LSCB Management Team is to review the

issues discussed at the Development Day, and any necessary work will be undertaken. This will be built into the Business Plan, with the possibility of setting up a Compact for the LSCB.

Information will be fed back to the Board on a regular basis.

9. Critical Case Review

Six agencies completed an IMR. The Temporary Business Development Manager completed the Overview Report, which has not yet been sent to the Board.

The case is now being reviewed by the Operational and Quality Assurance Sub Group. Each agency agreed to draw up an Action Plan to enable an LSCB Action Plan to be produced. There is 1 Action Plan outstanding. A draft of the LSCB Action Plan has been drawn up, but cannot be agreed until all others have been received.

LSCB Action Plan to be completed and brought to Board in November 2009.

Overview Report to be sent to all Board members.

10. Multi-Agency Audit Group

The Quality Assurance Service Manager presented a report that was written for the Operational & Quality Assurance Sub Group.

The tool was developed during the first three meetings, and has now been agreed. The earlier audits are not as thorough as those that are now being undertaken, as the earlier tools did not cover as much detail.

Police and health have provided new named professionals to attend this meeting. Adult Social Health are happy for a representative to attend. There is a possibility that a Probation representative may be requested.

The next meeting is due to be held at the end of September, and the group will report back to the Board after this meeting.

11. Communications Strategy

As discussed during the Budget update.

During discussions with The Gazette, the External Communications Manager asked if they had heard of the LSCB. As they had not, they asked if they could speak to key members of the Board, and take some photographs to run an article.

Chair requested volunteers to speak with paper, and suggested the most suitable time would be at the next Board meeting in September.

Chair, Senior Service Manager Operations, LSCB Training Coordinator, Designated Nurse Child Protection NHS Blackpool and Designated Doctor Child Protection Blackpool Hospitals Trust, are willing to speak to The Gazette.

A briefing paper will be produced, to include the Give Me Room To Breathe Campaign.

**Ops & QA Sub
Group**

LSCB Admin

12. Documentation for Board Meetings

The Business Development Manager has been reviewing the resources of the Board, and the high workload of the team supporting the Board.

The preparation of papers for the Board meetings takes up a considerable amount of time. Is it reasonable to request that Board members print the papers that are sent electronically?

It was agreed to do this for future meetings. Some members do have issues with mailbox size etc.

It was suggested that removing the logos from documents may assist as this takes up more space.

Certain members will still require hard copies to be provided.

It was requested that the agenda item be added to each document that is sent electronically, to assist when printing.

A calendar of meetings is to be produced in September. Although all meetings are now bi-monthly, they are concentrated in the same months. The Board was asked to agree to the meetings being spread equally over the months. All agreed.

It was requested that the MARAC meetings be borne in mind whilst planning the calendar for next year. These are held every fortnight on a Tuesday afternoon.

13. Give Me Room To Breathe

A task centred group has been set up to further develop the Give Me Room To Breathe Campaign. Terms of Reference have been drawn up and the first meeting held.

The group would like to change the terminology from 'overlay' to 'co-sleeping'. Overlay will only be used when specifically stated by the coroner. All agreed.

The Business Development Manager has spoken with Sara Barr-Frost, Lead Nurse Coordinator SUDC, who would be happy to present to the Board. This will be reviewed at the Agenda Setting meeting.

The group will advise of the Phase 2 timetable, launches etc, as and when information is available.

It was suggested that it would be useful for representatives to attend school open evenings, and for information to be put onto school information TV's, and also in shopping centres, Customer 1st etc.

14. Operational and Quality Assurance Sub Group

There are no specific updates from this sub group.

Blackpool was amongst the first to be unannounced inspected, which was completed very professionally. The overall result was very positive. Most areas reviewed were marked as satisfactory, and some were marked as good.

LSCB Admin

The inspectors were critical of the CAF process, i.e. having to call agencies to fully complete the forms, as there was missing information.

A serious concern was that unqualified staff are allowed to carry out initial assessments, although the inspectors saw very good practice during this process.

The LSCB were complemented, especially working together with other agencies.

A letter is to be published on 15th July, which will be distributed to all Board members.

Training Sub Group

The new training brochure is now available, and a copy was given to each member.

The electronic version is to be uploaded onto the website.

The Designated Nurse, Child Protection has been invited to sit on a training group re Fabricated and Induced Illness with others from different health organisations across Lancashire. The invitation was extended for her to join the group so that we can deliver the same training across Lancashire. The matter was brought to the LSCB for them to endorse this approach as the basis for our LSCB training on this issue. This will be based on Cumbria learning.

Policy & Procedures Sub Group

The Domestic Abuse procedure will be brought to the Board in September. Adult Mental health and Child Protection was sent out for consultation, with a response date of 27th July 2009.

The Senior Quality Assurance Officer Allegations is attending a meeting in September with regard to the E-Safety procedures.

Unaccompanied Asylum Seeking Children Procedure is still a work in progress.

At the development day, discussions were held around this sub group, and whether it would be more beneficial to set up task and finish groups for each new/amended procedure, as and when required. This will then ensure that the relevant people sit on the group. The task and finish group would then report into the Operational and Quality Assurance Sub Group.

If this is agreed, a central process must be developed to ensure that all Board members are made aware of any new procedures required, or amendments to be made to standing procedures, and that establishment of a working group is required.

All agreed.

Case Review Sub Group

The Quality Assurance Manager extended her thanks to the members of this group, for their preparedness to accommodate the numerous meetings

LSCB Admin

that have been required owing to the number of cases under review.

At the last meeting, 2 further child deaths were discussed, that involved co-sleeping. The recommendation made to the Chair of the Board is that a Serious Case Review is not required in either case.

The sub group are now involved in a review with Integrated Youth Services.

Chair is happy with the recommendations.

15. Any Other Business

Lancashire and Blackburn with Darwen now have a mental health representative sitting on the Board, should Blackpool also ask a representative to attend?

The Board agreed to invite a mental health representative.

Information is to be sent to the Board with regards to the new Child Protection Conference process. The QA team are working on a new layout for minutes etc.

16. Date and Time of Next Meeting

Tuesday 29th September 2009, 1.30 – 4.30pm, City Learning Centre

Actions Arising from meeting 14/07/09

Budget

Amended Communications Strategy to be sent to all Board members once received.

LSCB Admin

All representatives forward the name and contact details of HR representatives from their agency to LSCB Admin, **within 2 weeks**.

All Agencies

LSCB Admin to forward all HR representatives to Chair

LSCB Admin

CDOP Procedures

Clarification is required on the calculation of the proposed costings.

Bus Devel Mgr

Critical Case Review

LSCB Action Plan to be completed and brought to Board in November 2009.

Ops & QA Sub Group

Overview Report to be sent to all Board members.

LSCB Admin

Documentation for Board Meetings

All agenda items to have the relevant number applied to them before sending papers electronically.

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Training Sub Group

New Training Brochure to be uploaded onto the LSCB website.

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