



Meeting	Warwickshire Safeguarding Executive Board
Date	Wednesday 10th May 2022
Present	<p>Elaine Coleridge-Smith, ECS (Independent Chair, Warwickshire Safeguarding) Jackie Channell, JC (Coventry & Warwickshire Clinical Commissioning Group) Pete Hill, PH (Warwickshire Police) Jo Galloway, JG (Coventry and Warwickshire Clinical Commissioning Group) Nigel Minns (Warwickshire County Council)</p> <p><u>To present:</u> Lucy Young, LY (Independent Reviewer; CSPR James)</p> <p><u>In attendance:</u> Amrita Sharma, AS (Business Manager, Warwickshire Safeguarding) Kiran Mahal (Minute Taker, Warwickshire Safeguarding)</p>
Apologies	<i>No apologies.</i>

Item	Discussion	Action Required (if any)	Owner
1.	<p>Welcome, Introductions and Apologies</p> <p>ECS welcomed attendees and formal introductions were made.</p>		
2.	<p>Minutes from previous meeting</p> <p>The previous minutes were agreed as an accurate record of the meeting.</p> <p><u>Action update:</u> Safeguarding Reviews Panel Members training to be explored – AS advised that due to sickness absence, this has not been possible but is on the list of priorities. AS intends to put together a pre-recorded PowerPoint with voiceover for panel members and when coordinating joint reviews for consistency.</p> <p>PH to share examples of incidents – PH confirmed that he has shared the concerns with JG and JC. JG thanked PH for sharing and confirmed that she has shared these with CWPT and the Mental Health Commissioner for review. JG suggested this action is carried forward as they work to identify the gaps in service provision.</p> <p>Partnership funding – Agenda item</p> <p>Adult LLB to be progressed – Actioned, to be approved at the Safeguarding Reviews Subgroup 16.05.2022</p> <p>Ofsted report and action plan to be shared with partners - Actioned</p> <p>Add Ofsted & IICSA report findings to the forward plan for March – Item for discussion and consideration</p>	<p>Action: Add escalation to June agenda for update</p>	<p>WS Business Team</p>



3.	<p>Covid-19 Updates</p> <p><u>Coventry and Warwickshire Clinical Commissioning Group</u> JG shared that the overall situation is improving. The service currently has a number of staff vacancies and an average of 20% of staff off with Covid related sickness.</p> <p><u>Warwickshire Police</u> PH advised that the service is running business as usual. There has been a significant increase in crime across all categories, when comparing to 2021. There is a leave embargo between July-August to ensure that there is adequate policing for the Commonwealth Games.</p> <p><u>Warwickshire County Council</u> NM reported no disruptions to service and confirmed that the number of cases has considerably reduced. NM noted that schools are being impacted by covid outbreaks infrequently and this is not long term.</p>		
4.	<p>Child Safeguarding Practice Review (James)</p> <p>LY presented her report for Warwickshire's CSPR on James. She stated that the scope for the review was two years as the intentions were to keep the learning relevant and recent. LY acknowledged that services have changed over the years and there are circumstances beyond the two-year scope which have contributed to this case.</p> <p>One of the KLOE's in this case related to the child's voice and views being effectively captured and LY acknowledged that one of the biggest barriers was due to James not being in school and therefore he was not being seen regularly and subsequently contact with James was limited. LY added that Covid-19 also impacted on this as face to face contact was restricted. As a result of this, LY was not able to find any evidence of practitioners having captured what James's daily lived experiences were.</p> <p>LY shared that she met James some weeks ago. James is currently residing out of county as a long term inpatient. It was shared that he is not doing well and was not able to demonstrate insight. LY confirmed that James's views have been captured within the report.</p> <p>LY had hoped to meet with James' family in the early stages of the review process however contact with James' father did not take place until the end.</p> <p>LY stated that the review identified 6 findings, 12 multiagency recommendations as well as single agency recommendations.</p> <p>LY raised James' experience with education, and that he did not cope with secondary school and had an EHCP plan. LY stated that James did not attend school for almost</p>		



<p>5 years. LY added that he did attend part time alternative provision, however this was uncoordinated as it was unknown whether the local authority or school were responsible for this. LY reported that when she met with James, he had expressed that he felt isolated and wished that he could have attended school.</p> <p>LY felt that there was much confusion between who was responsible for James from local authority and school. It was felt by the school that they should have excluded James, however they decided against taking this action. NM felt that the James' allocated Social Worker should have escalated the failure to find James a school.</p> <p>LY stated that the school had a legal responsibility to James and did not act on this. LY felt that the relationship between schools and the local authority requires restorative work</p> <p>ECS shared that within Warwickshire, there is a small number of highly complex children who require safeguarding, protecting and educating. ECS highlighted that the National Panel have asked reviewers to consider the history in order to understand why these young people are getting into these situations.</p> <p>James' involvement with the police included 11 significant incidents. At that time, these incidents were dealt with in a fragmented way and the police have acknowledged that it would have been more effective to look at James a whole picture rather than individual incidents. It was shared that the police were dealing with the high-risk cases, however LY pointed out that if they had put together all their intelligence on James then he would be deemed a high risk.</p> <p>PH acknowledged LY's comments regarding Police and noted that on each occasion it would have been a different Officer who dealt with the situation as an isolated incident when they should have connected the dots. PH agreed there is work to be done in this area.</p> <p>AS highlighted that escalation remains a significant issue and there appears to be a lack of confidence both internally and externally.</p> <p>NM raised that the broader mental health issues are not being escalated because there is a sense that nothing will happen. This is because mental health within the UK is medicalised and unless the child/ young person has a diagnosable mental illness then CAMHS will not treat them. NM added that those children/young people who have a disruptive life, engage in drug and alcohol abuse or do not engage; will not be supported by CAMHS.</p> <p>NM shared that he has raised this issue on national forums, to say that there is a cohort of children with mental health needs that are too complex for social workers to deal with because they do not have the skills or expertise, but they hang on to these children, similarly to James in</p>		
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<p>this case because it is felt there is no one or nowhere else to support them,</p> <p>NM felt this should be included in the review. All agreed.</p> <p>JG felt it would be helpful for senior colleagues in Coventry & Warwickshire Partnership Trust (CWPT) to have sight of this report. JG added that there is a Trauma Informed Recovery and Support programme which takes a holistic approach and considers the child and the wider family rather than medicalising. JG confirmed that this is currently still a pilot but does present an opportunity for supporting children/ young people.</p> <p>JG raised that the voice of the child often comes up in reviews, however this appears to a national issue and JG felt we need to identify what good looks like and how to best achieve this.</p> <p>NM noted that the written statement of action for diagnosis is being reduced from 5 years to 13 weeks by May/June 2024.</p> <p>JG felt there needs to be an emphasis on treating the child in the wider context of the family and thinking about the whole journey from preconception to now. NM invited JG to spend some time in children's services and see the wider impact of the work they are doing.</p> <p>NM felt there needs to be a multiagency network both locally and nationally which will support children/young people with complex social, emotional and mental health needs. ECS asked who would lead on this and NM proposed the newly appointed subgroup of the Health & Wellbeing Board which will focus on children/young people. It was agreed that ECS would write to the chair of the Health & Wellbeing Board with the views from today.</p> <p>JG asked if voice of the child is going to be a future priority as she felt that we will not be able to do the right thing for the child if we don't understand their experiences. PH agreed with this and found that often Police are going into homes and taking down the names of children but not asking them how they are and recording their views. AS added to this and shared that the training proposal features the voice of the child as a learning area.</p> <p>ECS thanked LY for presenting her report.</p> <p><u>Next steps</u> LY will update the report according to the discussions held today and share the updated version with AS.</p> <p>AS advised that the Lessons Learned Briefing and 7 Minute Briefing were shared with the papers of this meeting.</p> <p>The plan for publication is for June 2022.</p>	<p>Action: Write to the chair of the Health & Wellbeing Board</p>	<p>Elaine Coleridge-Smith</p>
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	All agreed to sign off, report and supporting documents – subject to changes agreed.		
5.	<p>Warwickshire Safeguarding Training Proposal</p> <p>AS presented the training proposal requesting approval from Partners.</p> <p>AS advised that the attached document demonstrates an outline for bitesize training to cover the learning from case reviews.</p> <p>AS stated, there is a small budget which can be allocated to the training (£4k) and would be used to fund external speakers for those themes that require spotlight.</p> <p>PH felt the training is a good idea and recommended that Child Sexual Exploitation is an area of focus. AS agreed that this is an important area of focus and advised that there will be a Safeguarding Week later on in the year which will feature exploitation. PH reported that there is a budget for training in the Police which may compliment the proposed training.</p> <p>JG agreed that the training is something positive to offer to services and asked how they will be delivered. AS confirmed that these sessions will be delivered virtually and then the recordings and materials will be available via the Warwickshire Safeguarding website.</p> <p>JG asked for the 'Voice of the Child' title to be changed to 'Capturing the voice of the child/adult'.</p> <p>JG considered how children and adults can be involved in the training and AS advised that she will liaise with the school's council regarding this.</p> <p>The Executive Board endorsed the training proposal.</p>	<p>Action: Discuss financial input from Warwickshire Police</p> <p>Action: Amend title</p>	<p>Pete Hill/Amrita Sharma</p> <p>Caroline McCluskey/Kiran Mahal</p>
6.	<p>CiC Carers Information Pack</p> <p>PH advised that this has been produced by the Warwickshire Safeguarding Team.</p> <p>The purpose of the pack is to educate the community on what to look out for when they are looking after children in care. The pack signposts the Philomena protocol. PH stated that there are Children's Homes being opened in Nuneaton which are privately owned and he intends to visit the homes as part of a routine patrol, so that when both staff and the children come into contact with the Police, they have already built up rapport.</p> <p>ECS complimented the document and felt it will be a useful tool.</p> <p>AS advised that the team have been working closely with commissioners and the team intends to carry out a launch event for the pack. There is also a survey being conducted by a task and finish group.</p>		



	The Executive Board agreed to sign off the CiC Carers Information Pack.		
7.	<p>JTAI benchmarking and MASH assurance visit</p> <p>JG advised that this item stems from the recent JTAI in Solihull.</p> <p>JG pointed out that she has not personally visited the Front Door (MASH) for 2-3 years and suggested a walkthrough of this area of the service. JG did not wish to burden Partners but felt this is an important area to review.</p> <p>NM suggested a comparison of the Warwickshire Front Door against the Solihull JTAI findings. NM noted that the systems are different, however there are areas that can be compared and tested. NM added that elected members from the Council recently visited the Front Door to understand how safeguarding works. NM endorsed the Executive Board carrying out an assurance visit.</p> <p>AS asked for clarity on timescales and logistics and JG advised that 3 Partners (Police, Health & Social Care) would carry out a proportionate assurance visit, and this would not require all Partners.</p> <p>JC supported this proposal and agreed to coordinate the visit. JC asked Partners to share the nominees from each service.</p>	<p>Action: Coordinate the MASH assurance visit</p>	<p>Jackie Channell</p>
8.	<p>Safeguarding Reviews Overview</p> <p>JC provided a brief overview of ongoing reviews and decisions emerging from recent Rapid Reviews and actions subsequently taken.</p> <p>AS highlighted that there is a high volume of case review activity, which includes 13 live cases and 4 new reviews waiting to be commenced.</p> <p>AS advised that there is a national shortage of Independent Reviewers, and this is something that she is actively working on. As a result of this, AS shared that some cases are likely to fall outside of the 6-month timeline for reviews.</p>		
9.	<p>Practice Reviews – update from ADCS meeting</p> <p>NM advised that there was a discussion at the recent ADCS meeting regarding reviews.</p> <p>NM stated there are concerns around identification through case reviews and that perhaps they hold too much information about the child and their history. It was felt that there is too much detail in the reports which could make the individuals and practitioners identifiable.</p> <p>NM shared that the feedback from ADCS was that case reviews should be no longer than four pages and that</p>		



	<p>perhaps the reason why Independent Reviewers do not have capacity, is because they are writing such detailed reports.</p> <p>JC agreed that there is a lot of information in the reports, however cutting down the reports could mean losing the context and history. JC added that reducing the content could also impact on the findings and recommendations.</p> <p>AS shared that the National Panel have recently commissioned researchers to meet with Business Managers to discuss report context, formatting and sizing. It was found by the researchers that the reports which consisted of several pages were not deemed to be acceptable and instead succinct reports of around 20 pages should be the aim. NM felt it is about finding the right balance.</p> <p>JC highlighted that following the new arrangements, there is now flexibility around the style of review and perhaps the Partnership should consider utilising its own expertise to commission alternative learning style reviews. ECS supported this but noted that we need to consider Partners' capacity.</p>		
10.	<p>WS Resources</p> <p>AS shared that there is a shortfall in the fundings for the baseline budget for 2022/23 of approx. £21,649.</p> <p>AS stated that Warwickshire Safeguarding requires a budget of £321k, the majority of this is staffing related costs, as well as £35k for reviews (4-5 SAR/CSPR per year) and £5k for websites, commissioned projects and training.</p> <p>NM suggested that the three statutory partners collectively agree to underwrite this shortfall sum in principle. NM added that it is likely to cost up to £7k each. JG agreed to underwrite and split the costs. JG asked AS to share the financial contributions details in writing.</p> <p>AS highlighted that the business team are currently working on 13 live cases, which continues to increase. AS noted that this is beginning to have an impact on the team and creating capacity issues. AS advised that sickness will mean that case review work stops as there is limited capacity in the team already. AS intends to introduce clinical supervision to support staff with the impact of reviews and wanted to update the board of the current pressures on the team.</p> <p>PH asked what support the team currently receives, in particular around secondary trauma and exposure to detailed case notes. AS confirmed that currently there is no provision for this, and she is looking into the costs and logistics of clinical supervision. PH shared that his team receives support through occupational health and asked if the business team would like to access these sessions.</p>	<p>Action: Email the required contributions from Partners</p> <p>Action: Discuss WS Team accessing police supervision</p>	<p>Amrita Sharma</p> <p>Amrita Sharma/ Pete Hill</p>



	<p><u>JTAI</u> AS sought clarification from members of their expectations for the preparation and management of any future JTAI inspection. AS impressed, that the business team already has limited capacity and could not, within the current structure, manage this additional workload without additional resource within the Business Team.</p> <p>AS added that NM had previously funded a post to solely work on JTAI. NM advised that they would not be able to fund additional resource this time. NM felt that JTAI should be managed by the Partnership, but not necessarily the business team. ECS agreed and questioned whether other partnership groups can support. ECS pointed out that the JTAI work is challenging and time consuming.</p> <p>JG felt there needs to be a clear process for JTAI with an organised approach to where the resources and data are held. JC shared that there is capacity within the safeguarding admin team to support with the data.</p> <p>It was agreed that the responsibility for the preparation and management of any future JTAI will be the responsibility of all three statutory partners.</p>	<p>Action: Partners to consider resources within their service for JTAI</p>	<p>All</p>
11.	<p>Update on Complaints</p> <p>Members were provided an update on the progress of complaints received by the partnership and subsequent actions agreed.</p>		
12.	<p>Any Other Business</p> <p>ECS explored the possibility of restoring some face-to-face meetings. It was mutually felt that logistics/ travel time must be considered, and it was agreed to arrange the July meeting at Northgate, Warwickshire.</p> <p><u>Integrated Care Board</u> JG shared that her service is due to become the Integrated Care Board with effect from 1st July 2022. The new Chief Nurse has been appointed; her name is Tracy Pilcher and she will be joining the service some time in August.</p> <p>PH asked for some literature on the Integrated Care Board to share with Police colleagues in anticipation of these changes.</p>	<p>Action: Book meeting room for July meeting</p> <p>Action: Literature on the Integrated Care Board to be shared with the WSEB</p>	<p>WS Business Team</p> <p>Jo Galloway</p>
<p>Date of Next Meeting: 7th June 2022</p>			