

**Minutes of the Meeting of the Warwickshire Safeguarding Children
Board meeting held on 25 January 2016**

Present		
<p>David Peplow Rebecca Bartholomew</p> <p>Tony Begley Rachael Boswell Kevin Brookes Jenny Butlin-Moran Craig Dicken Keith Drinkwater DS Stephen Eccleston David Gardner</p> <p>Victoria Gould Sarah Harris Cornelia Heaney Paul Hooper DCI Dean Jones Helen King Helen Lancaster Rob Leahy Donald McGovern Nigel Minns Michelle Norton Adrian Over Minakshee Patel Simon Powell Peter Sidebotham Jamie Soden Lesley Tregear Jesbir Uppal Brenda Vincent Andy Wade</p> <p>Andrew Wallis Alison Walshe Glynis Washington</p>	<p>Independent Chair</p> <p>Director of Quality, Safety and Personalised Care, Warwickshire North CCG</p> <p>Interim Service Manager, Warwickshire Youth Justice</p> <p>Inter-agency Learning & Improvement Officer, WSCB Team</p> <p>On-Track Coordinator, Rugby Borough Council</p> <p>Service Manager, Child Protection PPG Business Unit</p> <p>Equality & Child Protection Officer, Nuneaton & Bedworth BC</p> <p>Lay Member</p> <p>West Mercia Police</p> <p>Policing Area Commander for South Warwickshire, Warwickshire Police</p> <p>Young People Legal Services Manager, WCC</p> <p>Principle Social Worker, WCC</p> <p>WSCB Development Manager, Safeguarding Team</p> <p>Group Manager, Community Safety & Substance Misuse WCC</p> <p>Warwickshire & West Mercia Police</p> <p>Deputy Director of Public Health, WCC</p> <p>Director of Nursing, South Warwickshire Foundation Trust</p> <p>Gypsy and Traveller Team Leader, WCC</p> <p>Head of Service for Warwickshire and West Mercia CRC</p> <p>Head of Education and Learning, WCC</p> <p>Director of Nursing, George Eliot Hospital</p> <p>Education Safeguarding Manager, Safeguarding</p> <p>Corporate Equality and Diversity Advisor, Rugby BC</p> <p>Assistant Director(Leisure & Community Development) NWBC</p> <p>Consultant Paediatrician Designated Doctor Child Protection</p> <p>Deputy Director of Nursing, CWP T</p> <p>Implementation Lead for MASH</p> <p>Interim support, Democratic Services WCC</p> <p>Service Manager, Safeguarding WCC</p> <p>Head of National Probation Service, Coventry, Solihull & Warwickshire</p> <p>Named GP</p> <p>Director of Quality & Performance, South Warwickshire CCG</p> <p>Lead for Quality & Clinical Governance, Coventry & Rugby CCG (for Jacqueline Barnes).</p>	
		ACTION
1.	Apologies for Absence	
	The following were noted: Jacqueline Barnes, Warwickshire North CCG Jackie Chanell, Designated Nurse, Safeguarding for Warwickshire	

	Jane Hill, Operational Deputy Director Patient Experience Bill Hunt, Deputy Chief Executive, Warwick District Council Sue Ingram, Domestic Abuse Manager, Community Safety Team Vic Jones, Warwickshire Children and Voluntary Youth Services Louise Mohacsi, Head of St Nicholas CE Primary School Beate Wagner, Head of Children and Families Service WCC Councillor Chris Williams, WCC	
2.	Declaration of Any Other Business	
	CQC Inspection- see <i>minute 14</i>	
3.	Minutes of the meeting held on 22 October 2015	
	The minutes were agreed as an accurate record.	
4.	Matters Arising	
	David Peplow informed the Board that the Supervision Group has not yet started (shown as 'amber' on the action matrix). An appeal was made for performance data from agencies to be sent to the Performance Chair promptly at the end of the quarter	All contributors to the WSCB data set
5.	Warwickshire and West Mercia Police FGM Action Plan	
	<p>Detective Chief Inspector Dean Jones gave a presentation on Police systems and processes in dealing with cases of female genital mutilation (FGM). FGM is practised in eight countries where it affects as at least 75% of women and there are children in the UK who are born to FGM practising mothers. Although not initially perceived as an issue for Warwickshire and West Mercia, education, information and national coverage has helped to create awareness that FGM is widely practiced. FGM is now recognised as a safeguarding issue locally and nationally.</p> <p>It was noted that there has not been a successful prosecution in relation to FGM to date. DCI Jones considered this could be due to lack of knowledge and awareness by all authorities since the subject matter is new to agencies, has been a taboo subject and one that has cultural sensibilities, with women from communities being reluctant to engage with or seek the support of agencies</p> <p>The first challenge is to create awareness amongst all Police staff and agencies and although a strong national alliance has been formed to tackle FGM, there is still scope for improvement and a need to further develop training at a national level. There is training of staff across the Alliance to identify the risk of FGM and it is now mandatory for staff to report cases once identified. The Police have</p>	Agencies may contact DCI Jones to arrange presentations.

identified local single points of contact ('SPOCs') who have a significant level of expertise. It is not possible to provide intensive training to all staff so the focus is on ensuring all Police Officers and call handlers are trained to identify the risks and are familiar with possible indicators of FGM. Training includes the need to recognise that FGM incidents must have crime related markers in place and be linked to the Police's intelligence system and allocated to the appropriate professional officer.

DCI Jones advised the Board that the Police Intranet has an intensive range of information and guidance for the Police and agencies, including guidance on sharing information. DCI circulated a Warwickshire and West Mercia Leaflet entitled 'Forced Marriage Honour Based Violence and Female Genital Mutilation.' There is information about prevention and regular briefings to officers, lists of contacts and specialist documents including Government guidance. The community page contains definitions and the support that is available and is promoted to all staff.

DCI Jones offered to deliver a presentation to any of the agencies and to share information and knowledge.

The following issues were noted:

- The introduction of the Serious Crime Act has extended powers to any person 'habitually resident' not just permanent residents. This covers students and those visiting the UK and parents travelling/visiting the UK with children under the age of 18.
- The Female Genital Mutilation Act 2003 (the 2003 Act) provides for an offence of FGM. Section 72 of the Serious Crime Act 2015 introduces a new offence of failing to protect a girl under the age of 16 from risk of FGM.
- There is a mandatory obligation for education authorities and the health service to report cases (by telephone initially) of those under the age of 18 to the Police. This will trigger the Police contacting and sharing with other agencies.
- The NHS is required to record information in relation to FGM cases that come to their knowledge during contact with individuals (although this is not mandatory in relation to those over the age of 18). Reporting of cases in relation to under 18s does not appear to be happening which may be because the child does not wish to have their parent put in danger of

	<p>being charged. An information sharing and reporting culture may be required to ensure better awareness that FGM is child abuse and a crime. Warwickshire does not have identifiable communities where FGM is practised so it is necessary to target individual families with advice.</p>	
6.	Prevent Action Plan 2015-18	
	<p>Paul Hooper presented the Prevent Action Plan and invited the Board to consider how they could strengthen the links between 'Prevent' activity and other children safeguarding arrangements in their own agencies.</p> <p>Members were reminded that the Counter Terrorism and Security Act 2015 introduced a new Prevent Duty for specified authorities which means they must have 'due regard to the need to prevent people from being drawn into terrorism' in the exercise of their functions. Home Office Guidance on the duty expects those in leadership positions to:</p> <ul style="list-style-type: none"> • Establish or use existing mechanisms for understanding the risk of radicalisation • Ensure staff understand the risk and build the capabilities to deal with it • Communicate and promote the importance of the duty • Ensure staff implement the duty effectively. <p>Paul emphasised that the term 'safeguard' is a more appropriate term than 'prevent' and is also more likely to encourage community cohesion. The Board noted the Plan's focus on prevention, learning and development and its links with other safeguarding activities, in particular its connections with the Police's Action Plans.</p>	
7	Election of Vice-Chair	
	<p>The Board considered the appointment of a Vice Chair. Detective Superintendent Stephen Eccleston was nominated and seconded. There were no other nominations and the Board agreed that Stephen Eccleston be Vice Chair.</p> <p>Resolved</p> <p>That DS Stephen Eccleston be elected Vice Chair of the Warwickshire Safeguarding Children Board.</p>	

<p>8.</p>	<p>Lay Members Question – ‘How do you obtain feedback on services from travellers and how does feedback influence service development?’</p>	
	<p>Rob Leahy, Gypsy and Traveller Team Leader, gave a presentation in response to this question about services for gypsy and travellers. The presentation outlined the process and results of a needs assessment undertaken by the Team and the recommendations that have come out of this.</p> <p>It was noted that there are between 3500 and 4200 gypsy and travellers within Warwickshire and around 700 families who transit through Warwickshire each year. Locally there has been anecdotal evidence that the health outcomes of gypsies and travellers is not as good as for the general population and the assessment focused on health and access to services. (There have also been accommodation needs assessments undertaken).</p> <p>The Team undertook the assessments through interviews (most of the interviewees were women as men were more reluctant to be interviewed). The key findings from the assessments were set out in the presentation and include that there is a higher level of mental health issues, and higher prevalence of smoking within the gypsy and traveller population than the general population. Also, whilst around 70% use GP services, only 54% felt comfortable with their doctor.</p> <p>The assessment has led to a number of recommendations, including recommendations for healthcare professionals (training on gypsy and traveller culture, communication strategy, GP registration and process to avoid missed appointments, with possibly off site visits). The recommendations also include awareness raising amongst gypsy and travellers on how to use health facilities, reducing the stigma of mental illness, encouraging vaccinations and ensuring schools and other agencies reinforce health messages.</p> <p>The Board were also provided with a paper outlining the work of the SWFT health visiting service who offer universal and enhanced services to the traveller community in line with the Healthy Child programme. Two Health Visitors regularly visit sites at Bulkington and Bedworth. One example of using feedback to tailor service development is in Stratford area where a specific Health Visitor clinic is being set up as some parents within the traveller community indicated that they felt uncomfortable when attending well baby clinics within children’s centres. This will be offered in conjunction</p>	

	<p>with a Traveller’s Support Worker who will be on site to offer advice.</p> <p>Response to the work had been very positive.</p> <p>Nigel Minns, Head of Education and Learning, confirmed that the children from gypsy and traveller communities receive the same education as other children and is provided according to their needs. Regular meetings are held with communities and with head teachers and feedback forms completed.</p> <p>The Chair welcomed the question and encouraged lay members to continue to raise questions and to challenge as this helps to ensure proper safeguarding measures are being taken and that there is support for vulnerable communities.</p>	
<p>9.</p>	<p>Learning from ‘CDOP+’ case review ; Request for review of Rugby GP Practice</p>	
	<p>Peter Sidebotham, Consultant Paediatrician Designated Doctor Child Protection, presented a paper that summarised the review and asked the Board to reflect on the learning from this case and the action plan arising from it and posed three questions:</p> <ol style="list-style-type: none"> 1. How can we more effectively assess the needs of vulnerable young people leaving home? 2. What more can be done to work with vulnerable young people to prevent them becoming homeless? 3. How can professionals more effectively identify and respond to young people who may be victims of extra-familial abuse? <p>Peter Sidebotham confirmed that most of the actions had been completed but there was an outstanding action in relation to housing/care support for young people, the protocol for which has been under review for some time. Cornelia Heaney advised that the protocol had been reviewed and was due to go to the next meeting of the Procedures Sub-Committee. (It was agreed Legal Services would review the protocol before consideration by the Sub-Committee).</p> <p>Resolved</p> <p>The Board resolved that the case review would be used as a study for the next meeting of the WSCB to examine how agencies would respond if a similar case presented itself.</p> <p>Peter Sidebotham updated the board that the request to NHSE for a review of a GP practice made 18 months earlier had still not been actioned despite further requests being made on behalf of Special Cases. It was noted that in the meantime the responsibility for</p>	<p>Cornelia Heaney</p>

	<p>carrying out reviews had been delegated to CCGs, and Alison Walshe suggested that at this stage WSCB should now seek the review directly from Coventry and Rugby CCG. This was agreed.</p> <p>Resolved</p> <p>Coventry and Rugby CCG will carry out the review originally requested of NHSE and report to Special Cases.</p>	Jacqueline Barnes
10.	Performance Data Quarter 3	
	<p>Nigel Minns, Head of Education and Learning, circulated the performance data for Quarter 3 and highlighted the performance relating to children and the ongoing trends. Nigel reminded partners that the agencies owned their data and would need to offer their own analysis of it.</p> <p>The Board agreed that agencies supply data promptly when requested for future meetings.</p>	All partners as required
11.	Progress Report Cranhill Safeguarding Review Task and Finish Group	
	<p>Helen King, Deputy Director of Public Health, presented a report that set out the actions taken to date against the five areas identified by the task and finish group in its investigation of the findings of the safeguarding review of this Children's Home:</p> <ol style="list-style-type: none"> 1. <u>Notifications and consultation in respect of children placed in distant placements</u> <p>There were a number of weaknesses in this area which is being addressed by social care and safeguarding colleagues and local procedures amended accordingly and a flow chart developed for use by Warwickshire Police. Approaches have also been made to the Regional ADCS about the variation in notification processes across the region (and nationally) and the need for a better practice and a common procedure.</p> <ol style="list-style-type: none"> 2. <u>Implementation of the new statutory regulations on Children's Homes</u> <p>The Group has considered options for partners to support children's homes to meet their new statutory regulations and are discussing these with social care, safeguarding and commissioning colleagues to see what is feasible. The Group are following up a number of outstanding issues including the</p>	

	<p>arrangements to challenge companies owning children’s homes should a location assessment indicate risk; and the process by which homes notify the local authority when a child is admitted or leaves a home.</p> <p>3. <u>Local Interagency protocols</u></p> <p>The Procedures Sub Committee are reviewing protocols and procedures. This takes account of recent legislation on modern slavery, trafficking and the prevent agenda. The Task Group has queried the compatibility of the different organisational information systems to align and to share information.</p> <p>4. <u>Preventative strategies and CSE</u></p> <p>The VAWG reviews concerns regularly.</p> <p>5. <u>Media and Publicity Strategy</u></p> <p>The focus is on proactive dissemination of lessons learnt to appropriate agencies and their staff.</p> <p>The Board noted the alignment of these areas with the developments for the Warwickshire MASH and the proposed actions to disseminate learning across agencies.</p> <p>Resolved</p> <p>(1) That the Board note the five areas being addressed by the Task Group and the alignment with developments for the MASH</p> <p>(2) That the Board support the strategy for disseminating the learning from the safeguarding review.</p>	
<p>12</p>	<p>Training Sub-Committee – Child Protection Awareness</p>	
	<p>Craig Dicken advised the Board that the Training Sub-Committee has identified the need for :</p> <ul style="list-style-type: none"> • a process to identify how organisations are going to meet training needs • a schedule for review and responsible persons • a method for review (e.g. attendance at sub-committee, 	

	<p>electronic communication)</p> <p>The Board was reminded that in agreeing the new training strategy, it had also agreed that universal child protection awareness would be delivered on a single agency basis with the WSCB training pool supporting a small number of sessions for smaller non-statutory agencies to access. The Training Sub-Committee agreed that there needed to be oversight of how organisations would meet their requirements.</p> <p>The Board agreed that the Sub-Committee look at how each organisation is going to meet the needs. This will be considered further at a meeting on 26 January.</p>	<p>Rachael Boswell and Craig Dicken.</p>
13	Reflections	
	<p>The Chair asked partners to share what they had gained from the meeting. The following points were noted:</p> <ul style="list-style-type: none"> • The lay member's question was very useful. • It is reassuring that Prevent is on the County agenda • The use of case studies was valuable in providing practical illustrations. • Members welcomed awareness of the work undertaken by the Police in respect of FGM. 	
14.	Other Business	
	<p><u>CQC Inspection</u></p> <p>The Coventry Health and Safeguarding Review had taken place in May 2015 and reported in December. This looked at a wide range of agencies and some aspects would be relevant to Warwickshire and members were encouraged to read the outcome of the review and the response to it.</p> <p>It was agreed that the report be considered at a future meeting</p>	
15.	The meeting closed at 16.40	
16.	Date of next meeting	
	<p>Thursday 5 May at 2pm, Northgate House Conference Centre, Warwick</p>	

