

**BRIGHTON & HOVE LOCAL SAFEGUARDING
CHILDREN BOARD**
Thursday 16 March 2016. 1.30pm-4pm
The Great Hall, Moulsecoomb North Hub

Attendees

Graham Bartlett	LSCB Independent Chair (Chair)
Andrea Saunders	Director of Public Protection, National Probation Service
Anna Gianfrancesco	Service Manager, YOS
Claire-Louise Mackay	LSCB Senior Administrator (Minutes)
Dan Chapman (Cllr)	Lead Member, Children's Services, Brighton & Hove City Council
Daryl Perilli	Performance Manager, Brighton & Hove City Council
David Feakes	Head of Safeguarding, Sussex Community NHS Foundation Trust
David Kemp	Head of Community Safety, ESFRS
Debi Fillery	Named Nurse, BSUH
Debbie Piggott	Head of Service for Assessment, Rehabilitation and IOM, KSS CRC
Elizabeth Cody	Brighton College
Gail Gray	Chair, Violence against Women & Girls Forum
Helen Gulvin	Assistant Director Children's Services: Safeguarding & Care
Helen O'Dell	Interim Chief Nurse, BSUH
Jamie Carter (Dr)	Designated Doctor for Child Protection, Brighton & Hove CCG
Jason Tingley	Sussex Police Lead
Jayne Bruce	Deputy Director of Nursing Standards and Safety, SPFT
Jo Tomlinson	Designated Nurse, Brighton & Hove CCG
Kerry Clarke	Public Health Strategic Commissioner Children's Services, BHCC
Mia Brown	LSCB Business Manager
Nahida Shaikh	Prevent Coordinator, Brighton & Hove City Council
Nigel Nash	Service Manager, CAFCASS
Peter Wilkinson (Dr)	Acting Director of Public Health
Ruth King	Blatchington Mill School
Sarah Songhurst	South East Coast Ambulance Service
Soline Jerram	Director of Clinical Quality & Primary Care, Brighton & Hove CCG
Tracy Bowers	Hertford Infant School
Tracy John	Head of Housing, Brighton & Hove City Council
Yvette Queffurus	Named Nurse, Sussex Community NHS Foundation Trust

Apologies Received

Deb Austin	Head of Safeguarding, Brighton & Hove City Council
Diane Hull	Sussex Partnership NHS Foundation Trust
Domenica Basini	NHS England
Ella Richardson	LSCB Lay Member

Jo Lyons	Assistant Director Children's Services: Education & Inclusion
Mary Flynn (Dr)	Named Doctor, Brighton & Hove CCG
Natasha Watson	Managing Principal Lawyer, Brighton & Hove City Council
Peter Castleton	Head of Community Safety, Brighton & Hove City Council
Pinaki Ghoshal	Executive Director of Children's Services, Brighton & Hove City Council
Richard Chamberlin	Roedean School
Signe Gosman	LSCB Lay Member
Stephen Terry	LSCB Lay Member
Terri Fletcher	Director, Safety Net. Community & Voluntary Sector Representative

1. Welcome and Introductions

- 1.1 Graham Bartlett welcomed the group, and introductions were made. Councillor Dan Chapman, Ruth King from Blatchington Mill Secondary School, and Sarah Songhurst from South East Coast Ambulance Service, were welcomed as new members.
- 1.2 Graham Bartlett reminded all members to declare any conflicts of interest should they arise.
- 1.3 Graham Bartlett explained that the format of today's meeting would be different as we will be dispensing with the table discussions. These were originally instigated to allow us to have fuller consideration of certain items, and to allow more opportunity for every member to be able to talk in these smaller discussions. We have returned to a more traditional style as the new format of the Management Information Report will be much easier to interrogate as a full Board, and we hope this will make better use of our time. Graham Bartlett said that the Board has matured since the table however, he encouraged members to feedback if they feel that we have lost something from the old format.

2. Minutes of Last Meeting

- 2.1 The Minutes of the last LSCB meeting on 6 December 2016 were agreed for accuracy.

3. Matters Arising

- 3.1 The LSCB considered the circulated update on matters arising from the last LSCB meeting on 6 December 2016.
- 3.2 (Item 7.8 – Safeguarding in Sport) A meeting will take place on 17 March 2017 for the three LSCB chairs across Sussex, and Jason Tingley from Sussex Police, to have a strategic discussion on the processes of investigation and safeguarding so that there is consistent practice and a unified approach from partners.
- 3.3 (Item 7.10 - Safeguarding in Sport) The Association of Independent LSCB Chairs have written to the Child Protection in Sport Unit (part of the NSPCC) and the FA, and are now holding discussions with these groups about how we might work together to ensure safe arrangements.
- 3.4 (Item 8.8 – emergency procedures in schools) Jo Lyons provided a written update to confirm that the guidance for schools around emergency planning has been looked at by the Resilience & Emergencies team and Prevent Co-ordinator. This revised guidance, Coping with a School Emergency in Brighton & Hove, and a planning tool has been circulated to schools. Jason Tingley has found this useful guidance: www.schools.norfolk.gov.uk/view/NCC173210 and said that if any individual schools want extra advice, or a site visit, his counter terrorism colleagues can do this. **Action: Jason Tingley to provide contact details so that Jo Lyons can let schools know that additional advice on emergency planning is available from Sussex Police**
- 3.5 (Item 11.4 – Primary Care & Safeguarding) The chair of CCG met with GB, Healthwatch, the Director of Children's Services and the Assistant Director of Adult Social Care last week to discuss concerns expressed by some members of both the LSCB and the SAB about Primary Care providers understanding and fulfilment of their safeguarding responsibilities. It was agreed not to re-issue a revised audit document,

considering the poor response to the existing one, but both boards will receive reports on the quality assurance visits that Jo Tomlinson and Candy Galignagh undertake at surgeries. These take a deeper look at safeguarding than the CQC inspections do, and will be presented to the Monitoring & Evaluation and Quality Assurance Subgroups for consideration. The Board agreed this approach.

4. Update from Leadership

- 4.1 The Leadership Group¹ last met on 8 February 2017 and the minutes have been circulated to the Board.
- 4.2 Following the Lay Member recruitment day at the end of January we are to be joined by two new members. The SAB has also recruited their first two Lay Members. They are currently subject to DBS and reference checks, and the first combined Lay Member Subcommittee will take place next week. Graham Bartlett said that there were some very strong applicants this year, including some that we could not interview due to conflicts of interest as they worked in partner agencies.
- 4.3 The issue of audit activity by the Police has been ongoing, but this will be discussed at the meeting with LSCB chairs on 17th March as a Pan-Sussex approach is needed
- 4.4 The Leadership Group were updated on the progress of SCRs.
- 4.5 Chairs updated on progress against workplans:
 - CPLG fed back that the new model for Child Protection Conferences has been well received by both professionals and families since it was introduced in January 2017.
 - Learning & Development reported that there are still some issues with the Learning Gateway. This includes a difficulty in reporting health partner's attendance by individual trust, and the problems some partners are experiencing with accessing the gateway due to their security settings. We also can no longer shortlist the candidates to ensure there is multi-agency attendance on all sessions. This is being progressed by Dave Hunt. The subcommittee have completed a Training Needs Analysis across the city for both the SAB & LSCB, to look for gaps and duplication, and this will be presented at our next meeting.
 - Monitoring & Evaluation have been working on a new format for the Management Information Report, which will be presented later today. The Leadership Group agreed a proposal for a multi-agency audit on Children with Disabilities. Graham Bartlett suggested this work be undertaken in collaboration with the SAB.
- 4.6 Gail Gray asked about paragraph 8.12, and how the contributions not spent on the Wise Project will be used to target unmet needs across the city, and whether this will be a specific intervention or post. The LSCB does not have a commissioning role, but Andrea Saunders spoke to Rachel Brett from the YMCA after the meeting and suggested that, as this quite a small amount of funding, she should talk with commissioners if they have a project that meets the needs of any gaps identified by the Vulnerable Children & CSE Subcommittee.

5. Early Help

- 5.1 Last year the Board agreed to oversee the Early Help arrangements in the city, and are in the process of setting up a Governance Group that will be chaired by Peter Wilkinson. Since then there has been an Early Help consultation regarding proposed changes in the council. Helen Gulvin briefed the Board on this consultation and explained that the consultation included some very difficult decisions around resourcing and capacity, although they did gain an unexpected additional £40,000 in the final council budget.
- 5.2 The CCG are commissioning a new Wellbeing Service that will also be a single door for adults and children into mental health services. This will give more clarity on whether a family can access a service, and to expedite this they are developing one assessment across agencies, i.e Health Visitors & School Nurses, to foster more joined up communication and help develop a common language.
- 5.3 Peter Wilkinson updated on the development of the Early Help Governance Group as he has met with Mia Brown to plan the proposed Terms of Reference and identify membership. As Early Help is vast. a thematic

¹ This group consists of the chairs of the LSCB Subcommittees and helps us co-ordinate the ongoing work to meet Business Plan objectives.

approach will be adopted to concentrate attention on key issues, i.e Substance Misuse, or Domestic Violence, to see how effective Early Help is to improve outcomes for children in these families.

6. Local Authority Budget & Safeguarding

- 6.1 Graham Bartlett reminded the Board that it is not our role to debate how partners spend their budgets, but it is our duty to identify any impact on services across the city and highlight these to commissioners and service providers.
- 6.2 Helen Gulvin explained that the funding situation for children's services was not as bad as originally anticipated. However there is still a gap, and Jo Lyons will be working closely with staff on the offer that is available and put out a consultation very soon.
- 6.3 Dan Chapman said that the council wanted to ensure that the equalities groups are supported, but as the tendering process was halted they have extended the current contracts by an additional six months to allow time for this process to be done properly.
- 6.4 Helen Gulvin said that there is pressure on the Safeguarding & Care budget, but the council have shown a commitment to easing this, and the pressure funding has been covered.

8. Brighton & Sussex University Hospitals Safeguarding Report

- 8.1 The hospital asked Jim Gamble, a safeguarding consultant, to conduct an internal safeguarding review in 2015, following two incidents involving hospital staff.
- 8.2 The review looked at all the internal procedures, and met with over 100 members of staff. The lengthy report concludes with 63 recommendations, although some of these are very broad in scope, and some are already part of the CQC improvement programme. There is an action plan in place that is regularly taken back to both the hospital's Quality Board, and their main Board, to monitor the progress. The report was completed in October 2016, but many of the actions had been progressed before then.
- 8.3 Graham Bartlett said there are challenges for the LSCB from this report around the Section 11 audits, and there is an expectation that the Board should be more operationally involved in the review of specific cases. Graham has met with Helen O'Dell to consider these recommendations and a further meeting is needed.
- 8.4 Debi Fillery said that the report is very detailed about these specific cases, but said that Jim Gamble was quite clear during the inspection that he was satisfied with the way the safeguarding was working "on the ground". There are broad recommendations about making the safeguarding policy more clear on the website, Board engagement, and training across all levels. Graham Bartlett agreed that when he met with Jim Gamble during the review he was complimentary about the named professionals, but more critical at a Board level.
- 8.5 Jayne Bruce said that she has carried out a concise review into safeguarding in SPFT, using similar methods including audit and interviews with staff and service users. She has 30 recommendations from this and is keen to see whether there are any connected themes with the two providers.
- 8.6 David Feakes asked about recommendation 33, as he could not remember being asked to check if this member of staff had ever worked on their bank, or at a minor injury unit. He said that if they had they may be able to identify other potential victims. Debi Fillery said that they took advice from the police. Andrea Saunders gave assurance that when they have served their sentences they will be on license to probation, so will not be able to return to work where they may pose a risk.
- 8.7 Helen O'Dell said that as these are such exceptional cases that providers should develop a checklist of the wider concerns to check. Jason Tingley said that the current procedure would be for the police, or other lead partner, to call a Strategic Management Group as soon as the incident is known about, and this would bring together key partners, including secondary and tertiary health providers, to look and what is known and plan next steps. This will help identify all risks, and stop a duplication of actions. If another police force is involved they would also be invited to these meetings, but this arrangement was not in place when the incident in question occurred. Graham Bartlett said that it is important that we ensure these arrangements are followed when required.

- 8.8 Recommendation 45 is to have a consistent approach to safer recruitment, and repeating DBS checks, in all agencies across Sussex. Graham Bartlett said that he can discuss this with East & West Sussex, but we can only make a recommendation that they should be renewed at specific intervals. There was a lack of clarity across the Board, and also that these type of incidents come to light through police alerts rather than renewed DBS checks.
- 8.9 Peter Wilkinson asked if the historical problems with records of the training at level 1, 2 and 3 are resolved. Debi Fillery said that she knows for relevant staff, but the central record is not so good. Debi said that the attendance at LSCB training is quite low, as they have difficulties releasing staff, but Dave Hunt is now using the hospital facilities to host the shorter briefing sessions which makes it easier for staff to attend.
- 8.10 Debi Fillery said that another deterrent for hospital staff in attending our training is the cancellation charges, and she is contesting a £50 charge for not attending an event in the Safeguarding Week. This was also discussed by the SAB this week, and the charging policy has come from the Local Authority rather than the Board. This is on the agenda for the Learning & Development Subgroup of the SAB. In the LSCB it has been agreed that staff from acute / emergency services who are unable to attend training must alert their manager. The LSCB Learning & Development Officer will in consultation with the manager review charges, weighing up the demand for capacity at the event and any venue/speaker costs.
- 8.11 Graham Bartlett thanked Helen O'Dell for presenting this review and asked that the action plan be tabled for a future meeting of the Monitoring & Evaluation Subcommittee so that we can assess the progress.

9. New Look Management Information Report

- 9.1 Daryl Perilli was welcomed to the meeting to present the new Management Information Report. He has worked with Tina James to compress our previous 42 page report into a more compact and digestible version, that will give Board members information on how well protected children are in Brighton & Hove. A lot of work has gone into this report, and the new dashboard was presented alongside two snapshot graphics to give context to these figures.
- 9.2 Daryl Perilli said that this is particularly useful as it shows the data in numbers, in words, and visually, and so can be easily understood by all members regardless of their preferred source of information. Graham Bartlett said that the brevity of the commentary is good, and gives us an immediate picture of the situation.
- 9.3 Jason Tingley said that it can be a challenge to produce three separate sets of data for the three localities, and asked Daryl Perilli if he had received all the information he required. Daryl said that it has been hard to acquire the commentary in the past, but that now they need less information from the providers this is less of an onerous task. **Action: Jason Tingley will share the first quarterly CSE report with Daryl Perilli**
- 9.4 The new method will mean that the Monitoring & Evaluation Subcommittee have more ownership of this data. They are tasked with scrutinising the information and identifying two or three performance indicators that warrant a deeper exploration before it is presented to Board.
- 9.5 The Monitoring & Evaluation Subcommittee wanted to explore the indicator on self-harm admissions to A&E. In future Daryl and Tina James will meet with the data leads from different agencies to discuss what information is available, but there was a shorter than normal timescale for this report so the discussion with Kate Gilchrest and Kerry Clarke was conducted by email. Kerry Clarke said that this was completed just before the Public Health Profiles were released, and said she will circulate an updated version using this data. Kerry will be attending M&E in May to present this information.
- 9.6 Around 1 in 10 young people self-harm, but only a small proportion will present at hospital. There were 115 A&E attendances for self-harm in 2015-16 in the 10-17 year age bracket, which is an increase from 97 the previous year. However, the admission rate has gone down, bringing it more in line with the national rate. Although it is too early to see if this is a result of the paediatric mental health liaison team based in the Children's A&E, funded by the CCG since November 2015, one of the aims of this service is to reduce unnecessary admissions and ensure people are swiftly followed up within the community.
- 9.7 11% of children who took part in the Safe & Well at School Survey in Key Stage 4 (14-16 year olds) said that they had hurt themselves on purpose. Children who had truanted, been excluded, been bullied, tried drugs or alcohol, or had sex, were more likely to have self-harmed. There is work to foster a culture in schools where children feel that they have an adult they can talk to about any problems. 53% of children

said that they could identify someone to speak to, and 23% said that they had spoken to someone. These figures are lower than expected so they will continue to work with schools to develop this.

- 9.8 The CCG has commissioned an all ages Community Wellbeing Service (to commence from 1 June 2017) to assess and treat children and young people and their families with mild to moderate mental health and wellbeing issues, including self-harm. This service will mirror the Schools Wellbeing Service that is being rolled out following the pilot of Primary Mental Health Workers in 3 secondary schools in 2016.
- 9.9 The next steps are:
- A Needs Assessment on self-harm following a request from the LSCB & Children's Services.
 - To roll out and embed the whole school approach to Emotional Health and Wellbeing across all secondary school by May 2017 and primary schools by July 2017. This will be known as the Schools Wellbeing Service, to mirror Community Wellbeing Service.
 - Gill Brooks is working on the implementation of the all ages Community Wellbeing Service from 1 June 2017. This seeks to provide quality, safe and sustainable models of care for children with mental health issues, and will be more connected to community services and outreach so support can be delivered closer to home.
 - To continue to challenge the stigma around mental health. The second phase of the #IAMWHOLE will begin in October 2017, and the FindGetGive website for children and young people will continue to be developed.
 - To improve crisis and out of hours support for young people through the redesign of specialist mental health services within the community as well as the fully embedded Mental Health Liaison Team in the hospital.
- 9.10 Sussex Partnership Foundation Trust were asked to comment on this report, and Jayne Bruce said that it would be interesting to make a comparison with their referral figures. They can also search these by key word and by source.
- 9.11 Kerry Clark said that the data suggests that the work underway with schools and the Mental Health Liaison Team is starting to have an impact, although it is early to tell for certain through the figures. Anecdotally schools are reporting increased confidence in dealing with self-harm and knowing how to respond, and their links with Tier 3 CHAMS have greatly improved these working relationships.
- 9.13 Debi Fillery asked if the data can be broken down as some is for 10-24 year olds. She would like assurance that young people aged 19 and over who present with self-harm are as well supported.
- 9.14 Jamie Carter said that it would be good to have more information on the longer term outcomes, and Kerry Clarke confirmed that there will be information submitted to the CCG Transformation Board. The outcomes are measured differently at the moment, but there are using IAP tools to make a more consistent standard.
- 9.15 Jamie Carter asked whether the mental health assessments cover safeguarding risks, such as sexual exploitation. Debi Fillery confirmed that the hospital liaison team do and share information with the MASH as appropriate. Jayne Bruce said that there are currently some gaps due to capacity and the demand to track this. The service is exploring ways to enable service users to be better supported in their self-management (although this is more geared to adults). The agency are looking at more creative ways for service users to make contact, including an app to answer questions. Jayne said this is in recognition that this may support young people to access and engage with mental health services.
- 9.15 Debi Fillery said how beneficial the Mental Health Liaison Team at the hospital are, and Kerry Clarke agreed that they have improved the communication a great deal. Ruth King said that there are still a lot of improvements to be made from a schools point of view, as they need to make sure that the professionals working with the child are aware of the plan they are discharged with. The Board discussed the best link for this information sharing, and whether this is the SENCO, the School Nurse, or the Tier 2 or 3 named lead for the school, which is introduced as part of the pilot. There were concerns about needing consent from the young person to share this information beyond health professionals, although Anna Gianfrancesco said that the clinical governance in place around the ruok? relationship may be adapted, as this will help the young person receive a better health outcome. Debi's preferred option was to share information health to health, but it was acknowledged that School Nurses are not in the schools everyday and this may not elicit a timely response. **Action: Kerry Clarke and Debi Fillery to discuss information sharing further to ensure that schools are properly equipped with the knowledge to support young people who are discharged from hospital after self-harming.**

Action: Jamie Carter will raise this at the Health Advisory Group and make sure that all pathways reflect and include the new resources in schools.

- 9.16 Elizabeth Cody asked how the hospital share information with Independent Schools. Debi Fillery confirmed that they will tell the School Nurse if they have one, but there are not mental Health Links in these schools.
- 9.17 Jason Tingley said that he finds the discussion and language used around seeking consent very interesting as the Police would feel that it is their duty to refer and share information if a child made a disclosure. Jamie Carter explained that as there is a broad spectrum of self-harm and it is up to the practitioner to make a risk assessment and use their professional judgement, before sharing information to keep the child safe or making a referral.
- 9.18 Graham Bartlett said that the Board must monitor the progress of the Schools Wellbeing Service. As this is long term work he does not expect a change in the figures immediately, but he will be interested in how this affects referrals to Sussex Partnership.

9.19 POST MEETING: Members may be interested to read the Government's progress report on their suicide prevention strategy published on 16 March:
www.parliament.uk/business/committees/committees-a-z/commons-select/health-committee/news-parliament-20151/suicide-prevention-report-published-16-171

10. LSCB Multi-agency Training Programme 2017-18

- 10.1 Jo Tomlinson presented the LSCB training programme for 2017-18. The core courses have been refreshed and updated to ensure include recommendations from national SCRs and local reviews/audits are included, and in response to the new model of child protection conferences.
- 10.2 There are some new additions. The Child's World: Reflections in Practice is about communicating with children & young people to better hear their voice and ensure it affects the delivery of services. We have commissioned an external trainer to deliver the first session, and one of the facilitators is a care leaver who will talk about their experience of being heard by professionals in the context of safeguarding.
- 10.3 The Dealing with Child Sexual Abuse course is also quite new, having run one session last year. This looks at the signs and recognition of sexual abuse, and focuses on the multi-agency response including the paediatric SARC.
- 10.4 There are also new sessions in development including a day on safeguarding adolescents, looking at digital risks and healthy relationships, and a session on online safety.
- 10.5 There will also be more of the two hour briefing sessions as and when required, such as the forthcoming Learning from Case Reviews: Neglect on 5 & 6 April. Where possible at least one of these will be run at the hospital to better facilitate attendance by health staff. The interpreting service and members of the judiciary have been invited onto these sessions, in light of learning from a local review.
- 10.6 There are fewer of the CSE sessions, run by The Wise Project, in this year's programme than previously, as the demand for these courses has declined due to more professional's being trained in this issue.
- 10.7 The Learning & Development Subcommittee have agreed to run another session of Train the Trainer to get more certified trainers to help deliver our sessions. This opportunity has been advertised through our networks, and the course will take place in the spring. Any interested parties should contact Dave Hunt.
- 10.8 Elizabeth Cody said that from a schools perspective the training programme has improved beyond recognition in the past few years, and it is good that this can then be cascaded through schools by the Safeguarding leads. **Action: the new training programme to be published on the Schools Bulletin**
- 10.9 Graham Bartlett said that he presented to members of the CVS sector at the Community Works Conference, and that many members were committing to making more use of our training.
- 10.10 The Board agreed the 2017-18 multi-agency training programme.

11. Neglect Strategy: Update on Progress

- 11.1 A short life, multi-agency working group, has been formed to develop a Neglect strategy for the Board, looking at the whole spectrum from Early Help to Social Work intervention. This will need to reflect our current systems and incorporate the learning from our recent case review and the Neglect Audit. The working group will be led by Emma Cockerell and Jo Tomlinson, and their first scoping meeting is next week.
- 11.2 Helen Gulvin said that it is important that the strategy covers adolescent neglect, as this was a theme discussed at the recent social work conference.
- 11.3 The next theme for the Joint Targeted Area Inspections will be Neglect. As this was identified in our Ofsted inspection two years ago we may be targeted for this inspection. Carolyn Bristow is organising multi-agency JTAI planning meetings, and all agencies need to be able to demonstrate how we work together. **Action: Jayne Bruce said that they were involved in a mock inspection in Hampshire, and she will share the documentation with the Board where appropriate.**

12. Any Other Business

- 12.1 National CSE Awareness Day is on Saturday 18 March, and the LSCB and Sussex Police will be promoting this over the weekend.
- 12.2 Jamie Carter said that the funding for the Child ISVA will cease soon, which will lead to a lack of consistency in the support available to child victims of sexual abuse across Sussex. This position was funded by the PCC, and Brighton & Hove is the only area not to have been granted this going forward. The Board asked whether any discussions were held with stakeholders before this decision was made, and Jamie is also concerned about the impact on the Clermont Unit. **Action: Mia Brown to ask James Rowlands for more information on the withdrawal of the CISVA and the rationale behind this.**

Future Meetings

- Wednesday 7 June 2017, 1.30-4.30pm, Moulsecoomb Great Hall
- Tuesday 12 September 2017, 1.30-4.30pm, Brighton Town Hall
- Thursday 7 December 2017, 1.30-4.30pm, Moulsecoomb Great Hall