**Torbay Safeguarding Children Board**

**Minutes**

**Chairperson: Ian Ansell**

**Date: 26th September 2019**

**Venue: Tor Hill House, 4th Floor South**

**Attendees:**

Ian Ansell (IA) Independent Chair, TSCB

Dani De Beaumont (DDB) Children’s Services Manager, Torbay Children’s Centres, Action for Children

Alison Botham (AB) Director of Children’s Services, Torbay Council

Clare Farquhar (CF) TSCB Business Manager

Alison Hitchings (AH) Contracts Manager, Careers South West

Nick Hollins (NH) Head of Business Support

Cathy Hooper (CH) Lead Designated Nurse for Safeguarding, NHS Devon CCG

Lindsay Jones (LJ) Principal Social Worker

Richard Kirkup (RKp) Manager, Checkpoint, The Children’s Society

Cordelia Law (CL) Cabinet Member for Children’s Services

Jacquie Phare (JP) System Director of Nursing and Professional Practice (Torbay)

Lucie Saunders (LS) TSCB Coordinator (Minutes)

James Stock (JS) Detective Inspector, Devon and Cornwall Police

Chrissie Slaney (CS) Lay Member

Michelle Thornbury (MT) Head of Safeguarding, NHS Devon CCG

**Apologies:**

Karen Dale (KD) Head of Service, Safeguarding and Quality Assurance

Laraine Dibble (LD) Designated Doctor for Child Protection, South Devon & Torbay CCG

Caroline Dimond (CD) Director of Public Health

Jo Hall (JH) Detective Superintendent, Head of Public Protection, Devon and Cornwall Police

Pauline Newell (PN) CAFCASS

Anne Osborne (AO) Assistant Director, Children’s Safeguarding, Torbay Council

Steve Parrock (SP) Chief Executive, Torbay Council

Nikki Prentice (NP) Head Teacher, St Marychurch Primary School

Anne Proctor (AP) Assistant Chief Probation Officer, Devon Dorset and Cornwall Community Rehabilitation Company

Penny Rogers (PR) Managing Partner, Safeguarding, Devon Partnership Trust

Jane Viner (JV) Director of Professional Practice, Nursing and Peoples Experience, Torbay & South Devon NHS Foundation Trust

**Non-attendees:**

Matt Caunter (MC) Head Teacher, Brunel Academy, Paignton

Mandy Davies (MD) Devon & Somerset Fire and Rescue Service

Steven Hulme, (SH) Head Teacher, Burton Academy

Russell Knight (RKt) Principal Improvement and Performance Manager, Torbay Children’s Services

Liz Lawrence (LL) Assistant Principal and Safeguarding Lead, South Devon College

David Moffitt (DM) National Probation Service (Representing Anne Proctor)

Elizabeth Record Criminal justice, Partnership and Commissioning officer, OPCC (papers only)

Chris Rogers (CR) South West Ambulance NHS Trust

Sarah Tomkinson (ST) Headteacher, White Rock Primary School

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| **Agenda Item 1 – Minutes and actions of the previous TSCB Meeting** |

* 1. IA welcomed Board Members to the final meeting under the TSCB arrangements and introductions were made.
  2. Board Members agreed the previous minutes of 13th June 2019 are a true and accurate record. Page 5 references Carli Peplow as the Torbay LADO, this has since changed to Ivan Sullivan.
  3. ***Previous Minutes******2018-12-13 4.12*** *NHs will make enquiries to the TDAS coordinator on their current service provision. NHs will follow this up and send direct to Board Members. June 2019.* This itemwill be picked up through the November 2019 MACA in relation to peer on peer domestic abuse. Action closed
  4. NH and IA will meet next month to ensure all TSCB business is formally closed and audited for a clear transition to the new partnership arrangements. Any outstanding actions will be handed over to the appropriate area.
  5. ***Actions******2019-06-13 1.6*** *JH to bring back clarification on how many of the completed forms were ViST, DASH or Encompass. JH will query what the Police process is and if one of the forms is missed, are children being identified for safeguarding. September 2019.* To be discussed today under Agenda item 2. Action to close
  6. ***Previous Minutes; CSP Update and Turning Corners******2019-03-21 2.25*** *Threshold tool conversations in relation to adolescents to be held at the MET Subgroup. TSCB Coordinator / MET Subgroup April 2019.* As a Torbay specific area this will become part of a Task and Finish Group. NH and IA will ensure this is moved across to the appropriate group in the new partnership. Action to close.
  7. ***Previous Minutes; CSP Update and Turning Corners******2019-03-21 2.30*** *A response to Alex Stuckey’s view to reduce threshold in Turning Corners will be formulated to seek assurance. Nick Hollins September 2019.* Action to be picked up under the Children and Young People Strategic Partnership group. This will also move into part of the Early Help work being undertaken. Action to close.
  8. ***Previous Minutes; CSP Update and Turning Corners******2019-03-21 2.31*** *AS to provide case studies for testing within the MET and QA Subgroups. 13th June 2019. Alex Stuckey. NHs has received Case Studies which will be shared with Board Members****.*** *Nick Hollins / Lucie Saunders September 2019.* As above, Action to close.
  9. ***LADO Role 2019-06-13 2.11*** *LS will coordinate contact details from Board Members for CP to link in with as LADO****.*** *Lucie Saunders June 2019.* Action complete
  10. ***Working Together 2018 Update 2019-06-13 3.3*** *NH will email to the Board the Final Report including responses from consultations. Nick Hollins June 2019.* To be discussed today under Agenda item 3. Action to close.
  11. ***Future Training Arrangements 2019-06-13 5.16*** *NH asked for an Action to bring together a group for Health and Social Care to discuss identifying neglect and the referral processes for this. Nick Hollins June 2019.* NH will report further on this under Agenda item 3. Action to close.
  12. ***Dartington Research Survey 2019-06-13 6.21*** *CH will request clarification on whether the data within the Dartington Research Survey and Good Childhood Index can be used and shared wider. Cathy Hooper June 2019.* CH updated she has emailed the owner of the information but has had no response. CH will follow up and let CF know the outcome. **Action to close once CH has contacted CF with the response.**
  13. ***Graded Care Profile / Neglect Tool 2019-06-13 8.13*** *NH will take the responses to the MASH Steering Group with examples of where partners have felt the evidence supplied in the Graded Care Profile was enough. Nick Hollins MASH Steering Group meeting.* NH updated the Steering Group has not been meeting in its current form. Once this is running again NH will progress with this Action. A new head of service for MASH is due to start on Monday and will take this forward as part of their responsibilities. Action to close.

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| **Action:** | **By whom:** | **Deadline** |
| ***Dartington Research Survey 2019-06-13 6.21*** *CH will request clarification on whether the data within the Dartington Research Survey and Good Childhood Index can be used and shared wider. Cathy Hooper June 2019.* CH updated she has emailed the owner of the information but has had no response. CH will follow up and let CF know the outcome. Action to close once CH has contacted CF with the response. | Cathy Hooper | September 2019 |

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| **Agenda Item 2 – Update on Peer on Peer DA data and usage of forms** |

* 1. JH provided a report of the statistics as shared with Board members prior to today’s meeting and attached within the Actions below. JS has attended to discuss the data and take questions.
  2. IA queried if there was an impending issue for Torbay in relation to the young age of victims at the time of the offence.
  3. CL joined the meeting.
  4. JS explained the trend is as children get older they are more likely to be victims of violence as they grow into adolescence.
  5. IA raised the data relating to the age of the suspect/offender at the time of the offence where the suspect was 2yrs and the victim was a baby. JS will request further clarity from the analyst. **Action**
  6. The Board agreed the data supplied is as was requested. IA acknowledged the discussions this raises, in particular around peer on peer violence. IA suggested the harassment and bullying information would be of interest to schools.
  7. IA advised the new structure will need a view on where this data is to be shared whilst acknowledging Plymouth have a more established data set.
  8. CH advised the data will be a useful resource for the peer on peer abuse MACA which is looking into the courses available to victims and perpetrators. This will include discussions with the young people affected and their evaluation of the courses. The wider partnership in the new arrangements will be required to make the decision of where this data will sit.
  9. JS reported there aren’t any areas specific to Torbay which stand out against Plymouth or Cornwall comparatively which would require addressing immediately.
  10. AB suggested caution in comparing Torbay with other authorities from one set of data, recognising there are similarities between Plymouth and Torbay. In the new arrangements this will be an area for exploration but will be looked at as a whole, with year on year changes.
  11. AB advised the results are as expected due to the similar levels of deprivation between Plymouth and Torbay.
  12. JP acknowledged the data provided is number of offences, as opposed to individuals. JS confirmed this is the common caveat to the data supplied. However, where data relates to children, it would not be usual for the child being a victim on multiple occasions. If this was the case, intervention would be provided in early stages. For adults, it would not be unusual to see the same victim numerous times.
  13. IA asked JS to thank JH for the data.
  14. JS explained in South Devon, an increase has been seen in cases of child neglect. The data set has been produced from the 1st January – 23rd September 2019 for each year. 32 crimes have been recorded for child neglect offences; 26 recorded in 2018; 13 recorded in 2017; 20 recorded in 2016 and 7 recorded in 2015.
  15. The commentary from the QA Subgroup and Police Performance Meetings is in relation to work undertaken in South Devon to better record child neglect offences at origin. Previously recordings were made under ‘enquiries’ rather than ‘crime records’. The preference now is to crime the incident as a criminal act until the initial enquiry decides this does not meet criminal neglect threshold.
  16. LJ joined the meeting.
  17. Police, partners in MASH and other services have been requested to record as criminal neglect so an initial investigation can be undertaken establishing threshold in the first instance. The increase in child neglect reflected in the data is due to the change in recording.
  18. AB raised the issue of chronic neglect not recognised in social care or across the system within Torbay and the impact of that is being seen now. JS agreed it is a reflection of better identification and early recording as opposed to an increase in incidents.
  19. JS asked Board members to direct any questions following to the meeting to him.

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| **Action:** | **By whom:** | **Deadline** |
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| 2.6IA raised the data relating to the age of the suspect/offender at the time of the offence where the suspect was 2 and the victim was a baby. JS will request further clarity from the analyst. | James Stock | September 2019 |

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| **Agenda Item 3 – Working Together 2018 Update** |

1. NH shared a presentation of the new arrangements for the Torbay and Plymouth Partnership which has been previously shared with Subgroup chairs.
2. The presentation will be forwarded to Board Members following today’s meeting.
3. AB shared the new Partnership logo was chosen by children and young people across Plymouth and Torbay.
4. NH explained work will move quickly across the groups in the new arrangements. For example, learning and action plans agreed as a result of reviews will move to the QA process to oversee and be responsible for ensuring it is embedded and actioned across the Partnership. Similarly, training needs identified within a learning review will move to the Workforce Development group to ensure training is in place.
5. The Independent Quality Assurer will be responsible in ensuring the links are continuing and are in place.
6. The job profile for the Independent Quality Assurer has been agreed and the role will be advertised in due course. The role is envisaged to be in place before the end of 2019.
7. NH advised other local authorities have taken the same approach as Torbay and Plymouth.
8. An overarching website is in the process of being created which will have direct links into Plymouth and Torbay for unique bespoke areas which will remain in both areas.
9. The constitutions of the Terms of Reference are being created. A meeting is booked for 11th October 2019 where Strategic Partners will discuss funding arrangements post April 2020. Agreements have already been made that budgets would remain for the 2019 financial year. The view is for one local authority to host the funding arrangements therefore simplifying the process whilst securing best value where possible.
10. Work is being undertaken to align policies, procedures and QA frameworks and was discussed within the Subgroup chairs meeting held in September 2019. Some separation will remain due to the different thresholds for Torbay and Plymouth but alignment will be in place where possible.
11. In terms of the Section 11 Audit, one audit will be undertaken across Plymouth and Torbay. Plymouth have sent their audit and Torbay’s will be shared next week. Police and Health colleagues will have one audit to complete, Plymouth and Torbay will additionally have individual areas to complete.
12. Workforce Development across Plymouth and Torbay has begun. Both Board training groups have considered the training offer and how best value can be secured post April 2020. This will include what commissioning arrangements will be required to secure the training offer for both Plymouth and Torbay.
13. The training groups have identified standards are to be developed into a coherent form meeting the standards of Plymouth and Torbay.
14. NH presented the Memberships of the partnership. Alison Botham will be representing Plymouth and Torbay as Director of Children’s Services. NHS Devon CCG representative is Lorraine Webber. Devon and Cornwall Police are represented by Keith Perkin.
15. The Independent Quality Assurer will sit at the Board at strategic partner level to provide the link as and when needed.
16. NH presented the three joint Boards of Workforce Development, CDPP and Learning Review and Quality Assurance. NH advised these have been created as a starting point and there is flexibility around these.
17. Further clarity is required in relation to the education group and how membership will be represented. Both TASH and TAPS have been contacted for their view on how this can be achieved.
18. The joint Subgroup Chairs meeting held on 17th September 2019 raised discussions and clarified decisions on who was to represent the Boards and timeliness of meetings. Agreements were made in relation to work plans and work being carried over into the new Boards.
19. A recommendation was made for Contextual Safeguarding to be held at a peninsula level, in particular in relation to exploitation. Torbay currently have a MET Subgroup and Plymouth have similar, however as exploitation has evolved beyond sexual exploitation into criminal exploitation, this will require exploration from a peninsula view.
20. NH shared the proposed meetings schedule. Dates were agreed as a Devon-wide group of managers to ensure meetings aren’t clashing across Devon, Plymouth and Torbay and dates will be shared once clarified.
21. The original plans have remained for Education and Young People’s Subgroups to be held separately in Plymouth and Torbay. All other business will be undertaken within local Task and Finish Groups with a defined purpose over a limited period of time to ensure no drift or delay.
22. A request from Subgroup Chairs was in relation to the membership of Subgroups and Task and Finish Groups as it was acknowledged the same members were attending multiple subgroups. Suggested was the development of a job profile and job description for membership of a subgroups. This will outline clear roles, responsibilities and expectations, with a view to maintaining consistency and continuity of membership.
23. IA asked if Board Members had any questions in relation to the presentation.
24. AB shared the meeting on the 11th October 2019 will be treated as the inaugural meeting of the strategic partnership. On a Devon-wide basis there will be two meetings a year where Chief Executives from Plymouth, Torbay and Devon will meet with the Designated Chief Officer from Police and CCG to hold to account the Strategic Partnership for the work in relation to safeguarding in each authority. AB explained this is where the level of ownership and oversight is demonstrated for Torbay.
25. DDB queried how the voluntary sector will be represented under the new arrangements.
26. NH advised the current arrangements have been created based on Working Together with a view to development and growth of other areas being brought in overtime which would include the voluntary and community sector. AB confirmed the Children and Young People Strategic Partnership have been working on this area.
27. CH assured DDB the Subgroup Chairs Development day identified that significant gap and raised it as an issue.
28. IA acknowledged the continued strong focus on safeguarding within the new arrangements. IA asked for focus on who owns which areas to ensure no gaps appear across the two partnerships.
29. IA spoke of his concerns on how progress on continuous improvement has not been made and despite much auditing and reviewing taking place, the same themes arise. A challenge for the new structure is to make a difference in continuous improvement to ensure the same issues are not returning.
30. NH advised the role of the Independent Quality Assurer will be in holding the partnerships to account on local and wider levels. The vision is for the IQA role to include discussions in the strategic level groups on what work is to be undertaken within organisations to embed the learning.
31. NH shared two papers with Board Members outlining the current Serious Case Reviews with updates on how they will continue under the new arrangements.
32. A new SCR was referred this week and is currently within the rapid review process. This will be considered on 9th October 2019 at a National Rapid Review meeting.
33. One of the SCRs is likely to transfer beyond December 2019, all others will be closed and signed off at the Strategic Partnership Meeting in December 2019.
34. The National Panel have been contacted to seek a view on why two of the SCR’s should not be published. The National Panel have stated all reports should be written in such a way they can be published from the offset and do not require redaction.
35. MT challenged the language used in one of the SCR’s which NH will update.
36. NH shared a document in relation to transitional arrangements. NH has attached the proposals on page 4 of the report where a statement from the Plymouth and Torbay outgoing Independent Board Chairs will be added.
37. The report includes a proposal in relation to Section 11 audits. Embedded in the report is a full copy of the Section 11 and guidance notes to providers to enable them to complete the audit.
38. The report also includes information around the transfer of personal data.
39. A Communication Statement is being approved stating that Board Members are in agreement with the arrangements. The DfE have requested confirmation that transition arrangements are in place.

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| **Agenda Item 4 – Child Protection Medicals MACA Draft Report** |

* 1. CH explained the Child Protection Medicals MACA was undertaken at the request of the Post Ofsted Improvement Board. The Ofsted inspection had identified children who had disclosed physical abuse were not all in receipt of a child protection medical.
  2. The recommendation was where a child had disclosed physical abuse leading to a Section 47 investigation, a CP medical should be considered. As part of this recommendation, a protocol was developed last year in collaboration with children social care, police and health. The recovery plan identified an audit needed to be undertaken by April 2019.
  3. The protocol was approved and embedded at the end of 2018 and the audit undertaken in April 2019 which CH acknowledged was too early for the protocol to be fully embedded and the results reflected this.
  4. CH gave apologies for the lateness of the draft report which was shared with Board members prior to today’s meeting.
  5. CH identified the audit themes and the methodology outlines key questions raised. Page 6 and 7 give an overview of the findings giving a sense of practice across the service. CH advised 10 cases across 15 children, including sibling groups, were audited.
  6. CH confirmed the Strategy Discussion recording should state why or why not a Child Protection Medical has been agreed.
  7. Protocol states a paediatrician should be involved in the Strategy Discussion. The audit found this took place in one of the ten cases. Recommendation 1 is to understand the reasons for this.
  8. Considerations were made in relation to the protocol being embedded and whether the Chairs of the Strategy Meetings were aware of the protocol. The audit group were curious as to how the protocol had been shared across the partnership. The availability of the paediatrician was also considered and verified as outlined in the report.
  9. CH confirmed there wasn’t evidence of prior consultation with a paediatrician and therefore assumed this had not taken place.
  10. Recommendation 2; where there wasn’t consideration for a Child Protection Medical, this wasn’t reflected in the recordings. A proforma will be developed for Strategy Meetings to include the questions; ‘should a CP medical be considered’ and ‘if not, why not’.
  11. Recommendation 3; 4 out of 10 cases (equating to 5 out of 15 children) did receive a CP Medical. Therefore consideration to relaunch the protocol is required so partners understand their responsibilities. Further guidance has been developed in health to help professionals further identify and escalate child protection issues more effectively.
  12. Recommendation 4; Neglect isn’t being effectively identified. It is recommended the Neglect Strategy review should consider whether the detection of any one sign of neglect would lead to a proactive multi-disciplinary information gathering process to search for other suggestions of neglect held by other agencies. Currently where there is a suspicion of neglect the child is referred for a CP medical. However, this will not identify long standing neglect without further information from other professionals and agencies who may be involved. A process to involve this is recommended to bring in other partners for discussion.
  13. IA queried where those discussions would be held. CH agreed this should be part of the reviewed Neglect Strategy and how neglect is addressed as a partnership.
  14. MT suggested the discussions could sit where II Strategy Meetings are held whereby a meeting is held, professionals seek information and then return to a decision.
  15. AB agreed the Neglect Strategy needs to address this issue but is concerned unnecessary Strategy Meetings would be held and a cumbersome intrusive process created for families which could have been dealt with under Child in Need.
  16. RKp suggested making Recommendation 1 more robust in stating a consultation with a paediatrician should happen.
  17. Recommendation 5; This table has been sourced from the paediatricians at Torbay Hospital reflecting the number of Child Protection Medicals requested by Torbay and Devon Children’s Services. This highlights three times as many Child Protection Medicals being undertaken in Torbay than in South Devon. The recommendation is to undertake a bench mark audit as to why this is the case.
  18. CH sought agreement from Board Members for the report and the creation of a corresponding Action Plan. Agreement is required as to where the action plan will be held in the new arrangements.
  19. IA advised the Action Plan will sit with the new Independent Quality Assurer. IA requested CH to devise the Action Plan ready to go into the new arrangements. This will then be circulated to members to agree/disagree on actions allocated. **Action**
  20. IA thanked CH for undertaking the audit and acknowledged the discussions he and CH had in relation to the timing of the audit. The request had come from an Ofsted recommendation and therefore undertaken quickly. IA suggested using the outcomes as a benchmark to be used to improve from. Feedback will be given to practitioners and query as to why paediatricians were not more involved in the process.
  21. JP suggested Recommendation 4 is reworded to make an achievable Action.
  22. CH confirmed the audit will be revisited and the responsibility on how this will be undertaken will sit with the partnership.

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| **Action:** | **By whom:** | **Deadline** |
| 4.19 IA advised the Action Plan will sit with the new Independent Quality Assurer. IA requested CH to devise the Action Plan ready to go into the new arrangements. This will then be circulated to members to agree/disagree on actions allocated. | Cathy Hooper | September 2019 |

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| **Agenda Item 5 – Repeat Child Protection Plans MACA Draft Report** |

* 1. CH explained a MACA was undertaken exploring repeat Child Protection Plans, in particular where a child has been returned to a plan soon after the plan ending.
  2. Karen Dale and her team are also undertaking analysis and recommendations around repeat plans and therefore these will be held in collaboration to ensure the action plan and recommendations are the same.
  3. CF advised the MACA was directed by the Post Ofsted Improvement Board and will be reported back to them.
  4. CH is looking to have a draft report completed by mid November 2019. IA suggested along with the report being shared with the Post Ofsted Improvement Board, this also goes to the new Independent Quality Assurer to ensure tracking within the new arrangements.
  5. Board Members confirmed they agree with the arrangements.

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| **Agenda Item 6 – Section 157/175 Update** |

* 1. CH shared as part of the wider Quality Assurance Subgroup work, education representative Donna Frost has been leading on the Section 157/175 audits for schools.
  2. The group of auditors was widened to include education representatives and although this was a helpful addition, it did create inconsistency in the process. CH advised a key team of auditors for consistency will be looked at for the next Section 157/175 audits.
  3. All audits have been returned to the schools with a deadline for them to submit their Action Plans by October half term. An update to that Action Plan will be requested in the Spring 2020 for progress monitoring.
  4. The audits received a 100% return rate and this time included Language Schools and the Alternative Providers.
  5. Eight schools were identified as exemplars, and seven require a visit due to concerns, five of which were visited last time.
  6. Areas identified for development include the DSL for safeguarding and training for looked after children leads, governance arrangements proved to be a challenge for independent providers who didn’t have a governance structure or independent challenge.
  7. CS shared the Training Subgroup had been looking at LADO and DSL roles being considered within training. CS will link in with the Safeguarding in Education Subgroup to share this information.
  8. Donna Frost is looking to complete the report by the end of today, outlining the findings of the audit.
  9. IA acknowledged the improved relationship of the Board and education colleagues in raising safeguarding awareness.

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| **Agenda Item 7 – C56 Management Review Draft Report** |

* 1. CH advised this review was commissioned in 2017 with drift and delay occurring for various reasons.
  2. Due to the delay, it was agreed for progress to be reviewed against the original agreed methodology. Section 3 RAG rates what was able to be achieved or not.
  3. Focus groups across three different areas were held to gain understanding from practitioners on what their experiences of working with children and young people who had disclosed sexual abuse were, what training had they received to equip them to respond to such allegations and what they understood about services available to support the children and young people.
  4. The focus groups were held within health and education including engagement from one of the special schools. Social care representatives within Children’s Services were also included which LJ and CH have discussed.
  5. Along with analysis of the focus groups was an analysis of the policies made available from partners which are listed in Section 8.
  6. Recommendations were created considering where practice is now as opposed to in 2017. The JTAI criteria for child sexual abuse was used as the benchmark for the practice to be considered against.
  7. Appendix 4 provides analysis against that criteria and where practice is now in relation to the information made available. This informed the recommendations set out in Section 9.
  8. A copy of the Action Plan in relation to the recommendations was shared with Board Members. CH sought approval around the areas of work and agreement of timescales where possible.
  9. CH acknowledged the overlap with work being undertaken with C67. CH has spoken with Paul Northcott, C67’s independent reviewer, and agreed to undertake a joint event once C67 has been completed. Although actions will be specific to this review, joint work will be undertaken to take forward.
  10. The action plan will be monitored by the Independent Quality Assurer within the new arrangements.
  11. IA asked Board Members to consider the Action Plan away from today’s meeting and provide any feedback, including timescales, to CF within the next two weeks, particularly where individuals are assigned as lead. **Action**
  12. IA acknowledged C76’s report is due by early December 2019 and can be a consolidated action plan.

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| **Action:** | **By whom:** | **Deadline** |
| 7.12 IA asked Board Members consider the Action Plan away from today’s meeting and provide any feedback, including timescales, to CF within the next two weeks, particularly where individuals are assigned as lead. | Board Members | September 2019 |

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| **Agenda Item 8 – Performance Report (standing Agenda item)** |

* 1. A report was received from RKt and shared with Board Members prior to today’s meeting.
  2. IA referred to Section 3 ‘Highlighted Issues’. This raises issues around balancing Child Protection and Child in Need plans and the number of children subjected to repeat Child Protection Plans.
  3. IA acknowledged as this is the final Board Meeting performance issues cannot be addressed but will be moved into the new arrangements.
  4. Board Members had no issues to raise on the report.

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| **Agenda Item 9 – TSCB Business Plan** |

* 1. IA advised a report was to be finalised for today however due to heavy work commitments NH has not been able to complete this. IA and NH will meet in early October 2019 to finalise the business plan.
  2. Once completed and signed, this will be circulated to Board Members as part of the closure of TSCB business. Board Members agreed with this.

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| **Agenda Item 10 – C66 Action Plan** |

* 1. The C66 Action Plan was circulated to Board Members prior to today’s meeting.
  2. JP queried Action 8 and felt it difficult to understand the ‘ask’ from the action. CF will discuss this further for clarification and context. **Action**

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| **Action:** | **By whom:** | **Deadline** |
| 10.2 JP queried Action 8 and felt it difficult to understand the ‘ask’ from the action. CF will discuss this further for clarification and context. | Clare Farquhar | September 2019 |

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| **Agenda Item 11 – Any Other Business** |

* 1. MT shared that she and CH attended a National NHS England Conference where CPIS was discussed which Torbay has not implemented. MT asked if this was able to move forward.
  2. MT explained CPIS is for local authority data to go to health and inform urgent care settings when a child is subject to a Child Protection Plan or Looked After. There are discussions for this to include secondary care, outpatient’s appointments and primary care. This will assist health staff in contact with children to clearly identify those who are Looked After or subject to a Child Protection Plan regardless of where they live in the UK and therefore identify vulnerable children. This in turn notifies the social worker the child has accessed an urgent care setting.
  3. AB confirmed she is happy to discuss this further. However, Torbay are currently in the process of upgrading the case management system and would not invest whilst the current system is in place. AB has had discussions with MT’s colleagues and will pass the information on to Nancy Meehan, Deputy Director, for further discussions. AB’s previous conversations with Sue have provided assurance the current information sharing process is functioning well although the national aspect is missing.
  4. IA thanked Board Members for attending and acknowledged the commitment shown from members has assisted in the improvements made so far.

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| **Chairs Signature** |

As Chair of this Torbay Safeguarding Children Board, I agree that these minutes are an accurate representation of the discussion and decisions that took place at this meeting.

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| Signature  F:\childrens services\Restricted\LSCB & SUB GROUPS\Signatures\Ian Ansell signature.jpg | Date  10th October 2019 |
| **Ian Ansell** |

**Torbay Safeguarding Children Board Actions**

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| **Agenda Item** | **Minutes No** | **Action** | **Action Owner** | **Deadline** |
| Previous Minutes | ***Dartington Research Survey 2019-06-13 6.21*** | *CH will request clarification on whether the data within the Dartington Research Survey and Good Childhood Index can be used and shared wider. Cathy Hooper June 2019.* CH updated she has emailed the owner of the information but has had no response. CH will follow up and let CF know the outcome. Action to close once CH has contacted CF with the response. | Cathy Hooper | September 2019 |
| Update on Peer on Peer DA data and usage of forms | **2019-10-04; 2.6** | IA raised the data relating to the age of the suspect/offender at the time of the offence where the suspect was 2 and the victim was a baby. JS will request further clarity from the analyst. | James Stock | September 2019 |
| Child Protection Medicals MACA Draft Report | **2019-10-04; 4.19** | IA advised the Action Plan will sit with the new Independent Quality Assurer. IA requested CH to devise the Action Plan ready to go into the new arrangements. This will then be circulated to members to agree/disagree on actions allocated. | Cathy Hooper | September 2019 |
| C56 Management Review – Draft Report | **2019-10-04; 7.12** | IA asked Board Members consider the Action Plan away from today’s meeting and provide any feedback, including timescales, to CF within the next two weeks, particularly where individuals are assigned as lead. | Board Members | September 2019 |
| C66 Action Plan | **2019-10-04; 10.2** | JP queried Action 8 and felt it difficult to understand the ‘ask’ from the action. CF will discuss this further for clarification and context. | Clare Farquhar | September 2019 |