

1. Attendance, Apologies & Governance.

SLSCB Members	Title	Representing	Other Interests: Stockton-on-Tees or Tees Valley Partnerships, Boards, Group etc. (Ch. denotes Chair, VCh Vice-Chair)	✓ ✕
Colin Morris (CM)	LSCB Independent Chair	SLSCB		✓
Pauline Beall (PB)	Business Manager		MALAP (Multi Agency Looked After Partnership)	✓
Lesley Cooke (LC)	Lay Member		Eastern Ravens Trust	Apol
Jo Thornhill (JT)	Lay Member		Middlesbrough College Lecturer Teesside University Lecturer	Apol
Jane Humphreys (JH)	Corporate Director of Children, Education & Social Care (CESC)	Local Authority	CCG Stockton Locality Board Member Stockton Local Executive Group Adult Safeguarding (Ch.) Hartlepool & Stockton CCG Board Member Health and Well Being Board (HWB) HWB Adult Partnership HWB Children's Partnership SMB – Public Protection Tees Adult Safeguarding Board TSVG Strategic Group Safer Stockton Partnership	✓
Lynda Brown (LB)	Head of Education, Early Years & Complex Needs			Apol
Eric Jewitt (EJ)	SBC CESC Children's Workforce Manager / Chair Children's Workforce Sub Group			✓
Peter Kelly (PK)	Director of Public Health			Apol
Liz Hanley (LH)	Adult Services Lead		Health and Well Being Commissioning Group. Learning Disabilities Partnership (Ch.) Stockton Local Executive Group Adult Safeguarding;	Apol
Shaun McLurg (SMcL)	Head of Children & Young People's Services. Chair of VEMT Sub Group & Tees LSCBs Procedures Group.		CAF Board (Ch.) Children & Young People Health Wellbeing Commissioning Group Youth Offending Service Management Board	✓
Julie Nixon (JN)	Head of Housing & Community Protection		Domestic violence Strategy Group, Health and Wellbeing Partnership Safer Stockton Partnership, SBC Adult Social Care Board, Welfare Reform Board	✓
Simon Willson (SW)	SBC CESC Head of Business Support & Improvement / Chair Performance Sub Group			✓
Cllr Ann McCoy (AMc)	Lead Cabinet Member - Children and Young People (Participating Observer)			✓
Janice Deakin (JDe)	Service Manager	CAFCASS	✓	

SLSCB Members	Title	Representing	Other Interests: Stockton-on-Tees or Tees Valley Partnerships, Boards, Group etc. (Ch. denotes Chair, VCh Vice-Chair)	✓ x
Rob Donaghy (RD)	Detective Superintendent	Cleveland Police		✓
Alex Taylor (AT)	Head Teacher Independent Schools	Education Establishments		✓
Claire Humble (CH)	Head Teacher Secondary Schools			Apol
Kerry Coe (KC)	Head Teacher Primary Schools			Apol
Joanna Bailey (JB)	Principal S'ton 6 th Form College		14-19 Partnership, Campus Stockton CPD Group Campus Stockton R&D Group Secondary Heads Group,	✓
Diane McConnell (DMc)	SBC Chief Advisor School Effectiveness			✓
Jean Freund (JF)	Executive Nurse	Hartlepool & Stockton Clinical Commissioning Group (CCG)		Apol
Karen Hedgley (KH)	Senior Manager, Children's Safeguarding and Looked After Children (Designated Nurse). <i>Advisor to the Board</i>			✓
Kailash Agrawal (KAg)	Designated Doctor <i>Advisor to the Board</i>			✓
Bev Walker (BW)	Deputy Director of Nursing, Quality and Safety	NHS England (Durham, Darlington & Tees Area Team)		Apol
Linda Watson (LW)	Clinical Director Community Services (SLSCB Vice Chair)	North Tees & Hartlepool NHS Foundation Trust	Better Care Fund Steering Group Hartlepool LSCB Hartlepool LSCB Training & Development Group (Ch.) North of Tees Partnership Group	✓
Julie Allan (JA)	Director of Offender Services -Durham & Tees Valley	Probation Services		Apol
Barbara Gill (BG)	Head of Offender Services - Community Rehabilitation Company			✓
Lesley Mawson (LM)	Associate Director of Nursing and Compliance	Tees, Esk & Wear Valley NHS Foundation Trust		✓
Julie McNaughton (JM)	Accommodation Contracts Manager	Thirteen / Housing Provider		✓
Steve Rose (SR)	Chief Executive Officer Catalyst	Voluntary Sector	Safer Stockton Partnership, Stockton 14-19 Partnership, Stockton Carers Implementation Group, Stockton Health & Wellbeing Partnership Stockton VCSE Senior Leaders Forum, Stockton Voice, Stockton Youth Offenders Service Board, Tees Dementia Collaborative, Tees Valley Local Development Agencies Forum, Tees Valley Unlimited European Social Inclusion Task & Finish Group	Apol

Minute Taker & Guests:	Nigel Hart-SBC Democratic Services-SLSCB Administrator		
David Charlesworth-NHS England (substituting for Bev Walker)	James Hadman-Catalyst (substituting for Steve Rose)	Karen Blackburn-Probation Services (substituting for Julie Allen)	

Meeting Quorate:	Yes
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Declarations of Interest	There were no Declarations of Interest
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Ref No. 1	Welcome and Introductions
<i>Discussion</i>	CM welcomed Nigel Hart (SBC –Democratic Services) to his first SLSCB meeting. Democratic Services are now providing Administration support for all meetings of the SLSCB.
<i>Agreement / Outcome</i>	Noted.

Ref No. 2	SLSCB Action Log
<i>Discussion</i>	PB advised that the SLSCB Action Log had been circulated for information. It was noted that any actions attributed to the responsibility of all would be deemed to have now been completed. Any remaining actions still outstanding, or issues identified by the Chair for action, would be addressed by the Business Manager with the relevant individuals.
<i>Agreement / Outcome</i>	Noted content of Action Log.

Ref No. 3	Staff Engagement 2014/15-Proposal			
<i>Discussion</i>	<p>The Board noted the outline proposal submitted by the Task & Finish Group who had been asked to identify an appropriate method for SLSCB Staff Engagement Event 2014/15.</p> <p>The brief of the Group was to identify an alternative model from those used previously and it was proposed that with the help of a Young Persons Theatre Group a performance would be acted out in respect of a child / young person and their family, the theme of which would be relevant to SLSCB such as domestic violence, neglect or CSE. This would be followed by Board Members holding a mock ICPC around the issues raised during the performance, followed by a Q&A session.</p> <p>It was suggested that the event be held on 3 separate occasions over 2 or 3 days between Jan-March 2015 in an appropriate location such as the ARC, North Shore or similar local venue. Board members were encouraged to participate by either volunteering to take part in the ICPC sessions or by attending in the audience and were encouraged to promote attendance by members of their own staff. JB and KH indicated that they would be willing to assist the Sub Group in preparing for the event.</p> <p>Board Members supported the proposal and requested the T&F Group to continue planning the event.</p>			
<i>Agreement / Outcome</i>	The methodology for the proposed SLSCB Staff Engagement Event for 2014/15 was approved.			
<i>Log Ref</i>	<i>Mtg Date</i>	<i>Action Required</i>	<i>Person Responsible</i>	<i>Due Date</i>
45/10/1415	16.10.14	Staff Engagement T&F Group to reconvene.	PB	20.11.14
46/10/1415	16.10.14	An appropriate Performing Arts Students Group, such as at SRC, be invited to deliver the theatre production element of the SLSCB Staff Engagement Event	SM	TBC linked to 45/10/14 15
47/10/1415	16.10.14	Dates for the event for some time during Jan-March 2015 to be agreed in an appropriate location such as the Arc or North Shore.	PK	TBC linked to 45/10/14 15
48/10/1415	16.10.14	The dates of the events be confirmed with Board	PK	TBC

	Members and they be encouraged to attend wherever possible and promote attendance by their own staff.		linked to 45/10/14 15
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Ref No. 4	Continuum of Need and Services
<i>Discussion</i>	<p>SMcL presented the second and latest draft version of the Board's Continuum of Need and Services, which had been circulated amongst the Board members with comments requested by 10th October 2014.</p> <p>The document represented the overarching framework for all agencies and services working with children and families in Stockton on Tees and the latest version contained significant additions arising from the SCR-Gavin case, most notably to the Common Assessment Process and the inclusion of information around the role of the Family Support Teams.</p> <p>RD referred to the fact that the Police were not included within the framework alongside the many other agencies involved. CM suggested that should they wish to, the Police are invited to contribute wording to the document that adequately described their role in working with children and families.</p> <p>Members discussed possible further changes to the document in relation to the indicative examples of needs and circumstances at Level 4. CM urged caution in attempting to draft further changes in such a way and suggested that all Board members be given a final further opportunity to comment on the draft outside of this meeting and that those with any further comments/suggestions on its content be requested to submit those comments by e-mail at the earliest opportunity. All members were requested to provide a response to the document either in support of its content or suggesting further amendment by the required deadline.</p>
<i>Agreement / Outcome</i>	The draft Continuum of Need and Services be recirculated for further consideration to all Board Members with a request that each member either confirms its content, or suggests further amendment, with a view to a final draft of the document being reported to the next Board meeting for endorsement.

<i>Log Ref</i>	<i>Mtg Date</i>	<i>Action Required</i>	<i>Person Responsible</i>	<i>Due Date</i>
49/10/1415	16.10.14	A copy of the draft Continuum of Need and Services be circulated to all Board Members with a request that each member either confirms its content, or suggests further amendment by no later than the 24 th October 2014 in order that a final draft can be presented to the Board at its next meeting on the 20 th November 2014.	PB	24.10.14
50/10/1415	16.10.14	The Police be invited to consider whether they wished to contribute wording to the document that adequately described their role in working with children and families.	RD	24.10.14

Ref No. 5	Reports stemming from HMIC Child Abuse, CSE and Missing Persons Inspection
<i>Discussion</i>	RD advised the Board that in anticipation of an HMIC inspection of these elements following the recent Rotherham case, it was intended for the Board to receive a report at its next meeting detailing a composite Action Plan of best practice learning following the Rotherham CSE, internal benchmarking against inspection templates and work streams dedicated to looking at CSE processes, and the inclusion of expected information in relation to missing persons.

	CM referred to the need for the SLSCB to be adequately briefed by the Police about the extent to which Police operations on CSE were currently ongoing within the Borough. It was noted that the manner by which this should be reported should be determined by the Police themselves, and need not include personal details, but rather a summary of the main activities, locations and numbers involved.			
<i>Agreement / Outcome</i>	That the Board receive a report at its next meeting detailing a composite Action Plan of best practice learning following the Rotherham CSE, internal benchmarking against HMIC inspection templates and work streams dedicated to looking at CSE processes, and the inclusion of expected information in relation to missing persons.			
<i>Log Ref</i>	<i>Mtg Date</i>	<i>Action Required</i>	<i>Person Responsible</i>	<i>Due Date</i>
51/10/1415	16.10.14	Report to be prepared for consideration by the SLSCB at their meeting on the 20 th November 2014.	RD	10.11.14

Ref No. 6	SLSCB Business Plan Progress 2014-2017			
<i>Discussion</i>	<p>Consideration was given to progress made against the SLSCB Business Plan 2014-2017.</p> <p>a) 4 – Improve early identification of and response to neglect. CM referred to the lack of progress made against Objective 4a/b (Care Planning and Management of Neglect cases), and in particular the need to appoint from within the SLSCB Chairs to lead the Multi-Agency Task & Finish Groups. CM assured members that appropriate support would be provided to them should they willing to take on such a role and both he and the Business Manager would be happy to discuss any required need outside of this meeting.</p> <p>LW advised that she was scheduled to Chair a Task & Finish Group for Hartlepool LSCB considering issues similar to those identified in Objective 4b) consisting of representatives from Health, Social Care and the Police and suggested that the Group may be willing to share its work with Stockton, or facilitate their joint involvement in some way. A meeting of the HLSCB's Executive was scheduled for the 20th October 2014 at which such a request could be considered. Two representatives from CESC should be identified to join the group plus PB to support in the process from Stockton.</p> <p>b) 2 – Improve the response to children at risk of harm as a result of domestic abuse RD advised that the Police had reviewed their risk assessment arrangements in respect of domestic violence incidents (Objective 2b) and indicated that he would be in a position to bring a report to the Board in November for approval. SMcL asked if this would include the review of the previous protocol that was put in place following consultation by Jason Dickson his predecessor. CM confirmed the revised protocol would be required from the Police.</p> <p>c) Strengthen the QA and Performance Management Framework PB advised that actions in respect of Objective 6a) remained on track for January 2015 and whilst progress against Objective 6e) had slipped, an appropriate audit tool had been identified and would be considered by both CM and her at a demonstration arranged for 17.10.14.</p>			
<i>Agreement / Outcome</i>	Noted and endorsed content of progress made against the SLSCB Business Plan 2014-2017.			
<i>Log Ref</i>	<i>Mtg Date</i>	<i>Action Required</i>	<i>Person Responsible</i>	<i>Due Date</i>
52/10/1415	16.10.14	LW to ask the Hartlepool SCB Executive whether it would be prepared to share its findings with Stockton; or facilitate their involvement in some way.	LW	20.10.14

53/10/1415	16.10.14	Identify 2 representatives from CSEC to join the Graded Care Profile Task & Finish Group	SMcL	24.10.14
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Ref No. 7	SLSCB Multi Agency Training:-			
<i>Discussion</i>	<p>a & b) Attendance at LSCB Multi Agency Training April-September & LSCB Multi Agency Training Evaluation Report April-September EJ advised that it had not been possible to produce full evaluation reports in time for this meeting and requested that the agenda item be deferred until the next Board meeting.</p> <p>c) Charging Policy CM requested consideration be given to the concerns previously raised by SR in respect of charging the Voluntary Sector to attend SLSCB courses. EJ advised that discussions around a possible joint Stockton/Hartlepool training arrangement were on-going with further discussions planned for tomorrow. Until such time as there was any agreement regarding any change in arrangements, each authority would maintain their own charging policy and that should a revised joint charging policy be proposed, it would need to be considered and approved by both Hartlepool and Stockton LSCB by March 2015.</p> <p>CM requested consideration be given by EJ Chair as Chair of the Children's Workforce Development Sub Group to the request on an interim basis and include this report in the suite of Training reports to be presented at the November Board meeting.</p>			
<i>Agreement / Outcome</i>	Consideration of the SLSCB Multi Agency Training update be deferred.			
<i>Log Ref</i>	<i>Mtg Date</i>	<i>Action Required</i>	<i>Person Responsible</i>	<i>Due Date</i>
54/10/1415	16.10.14	SLSCB Multi Agency Training reports deferred to the next meeting of the Board (Reports to cover April – September Attendance & Evaluation and Charging).	EJ	20.11.14

Ref No. 8 37/09/1415	<p>a) CSE Arrangements post Rotherham b) DC&LG letter received 24th September 2014</p>			
<i>Discussion</i>	<p>a) CSE Arrangements post Rotherham</p> <p>i) Members of the Board were invited to discuss in groups the specific questions extracted from the Governments instruction to Ofsted to carry out a statutory CSE themed inspection in Rotherham in order to measure and evaluate Stockton's own position and determine whether it was in a strong position and able to provide a clue to the evidence trail that supported that conclusion; and if not, what further action was needed to remedy this position.</p> <p>Some key and core questions had been brought together from the Ofsted CSE themed inspection Appendix A, linked with the Eric Pickles MP letter and the Jay Report (Rotherham) which were being tested out in order to give a firm steer into the assurance profile we as the LSCB, need to have in place.</p> <p>Details of the specific questions and responses provided are detailed in Appendix 1.</p> <p>ii) The Board noted excerpts from the report referred to Cabinet on the 9th October 2014 regarding mechanisms that were in place locally to monitor the safety and wellbeing of all children deemed to be at risk of CSE through our vulnerable, missing, exploited and trafficked (VEMT) arrangements.</p>			

	<p>Within these arrangements, the VEMT Practitioners Group was responsible for monitoring any children who were considered to be at risk. In 2013/14, the work of the VPG could be summarised as follows:-</p> <ul style="list-style-type: none"> ▪ 61 children considered ▪ 46 female, 15 male ▪ 59 under 18, 2 care leavers 18+ ▪ 42 considered to be at risk of CSE although no confirmed cases or prosecutions ▪ Monthly average 24 ▪ Average length of time being considered 2 months <p>PB referred to the information circulated by Barnardo's regarding their work across CSE services and with local authorities to ensure that children, whatever their background, behaviour or situation, lived free from sexual exploitation. This information would be maintained alongside any other available CSE guidance as a suite of documents against which Stockton could measure its own response to tackling CSE.</p>			
	<p>b) DC&LG letter received 24th September 2014</p> <p>The Board noted the joint letter received by all Principal Councils in England on behalf of both the Secretary of State for the Department for Communities and Local Government and the Secretary of State for the Department for Education regarding Safeguarding vulnerable children in the light of the Rotherham CSE case.</p> <p>JH suggested that a joint letter on behalf of the Leader of the Council and the Chair of the SLSCB be prepared in response.</p>			
<i>Agreement / Outcome</i>	Noted the content of the correspondence received in respect of CSE, together with the Workshop discussion based around key questions identified within the Ofsted Thematic Inspection identified at Appendix 1, Eric Pickles MP letter and the Jay Report.			
<i>Log Ref</i>	<i>Mtg Date</i>	<i>Action Required</i>	<i>Person Responsible</i>	<i>Due Date</i>
55/10/1415	16.10.14	A joint response on behalf of the Leader of the Council and the Chair of the SLSCB be prepared for submission to the DC&LG.	JH/CM	?

Ref No. 9	FGM (Female Genital Mutilation) & EFM (Early Forced Marriage) letter from Office of the Chief Social Worker dated 22nd September 2014			
<i>Discussion</i>	<p>The Board noted the content of the letter from the Office of the Chief Social Worker regarding efforts to ensure that statutory social services played their part in tackling FGM & EFM nationwide.</p> <p>It was noted that neither were a significant issue in Stockton at present and therefore the proposed arrangements for addressing them be noted. CCP are requested to ask GP's, A&E and other Health Professionals to be vigilant in recognising and responding to the signs of FGM.</p> <p>PB advised that Stockton did have a quality assured FGM course which had been targeted towards professionals working in a specific area in Stockton due to an influx of people migrating to the area from other countries. DM reported that both issues were also included on the school curriculum following suggestion by Ofsted.</p>			
<i>Agreement / Outcome</i>	Noted content of letter from the Office of the Chief Social Worker regarding efforts to ensure that statutory social services played their part in tackling FGM & EFM nationwide.			

Ref No. 10	Partners Operational Safeguarding Issues
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<i>Discussion</i>	<p>a) <u>Police</u>:- RD advised that:-</p> <ol style="list-style-type: none"> 1. Domestic abuse had now been included within the Police's overall Business Plan; which was seen as a positive step in terms of both its profile and attempts to address the problem. 2. The Video Conferencing arrangements which the Board have previously been made aware of, which aim to help facilitate Police input to Strategy meetings is imminent. RD will notify JH when it is in place. <p>b) <u>CESC</u>:- JH shared current strategic issues for CESC:-</p> <ol style="list-style-type: none"> 1. Any impact arising from both the Chief Executive's Shaping a Brighter Future programme and the Corporate Director's Review of Children Services would be fed into the Board in the New Year. Succession planning within the senior structures of CESC and ensuring sufficient capacity for service delivery were likely to be key elements considered by each. 2. The HWB Children and Young People's Partnership had now met following its formation with the brief of providing strategic leadership and support to ensure healthy, happy and safe children and young people were able to maximise their potential and were protected from harm. They had identified CSE as an issue for their Forward Plan. CSE would also be the subject of file audits this month, with 10 cases identified for review. 3. Cabinet, at its meeting held on 9th October 2014, had received an update on continued workload pressures and associated activity in the children's social care system and noted the mechanisms in place to monitor the safety and well-being of children deemed to be at risk of child sexual exploitation. Cabinet also requested that a Children and Young People Select Committee Task and Finish Group review how robust the Council and its Multi-Agency Partners' procedures are with regard to children deemed to be at risk of child sexual exploitation and for such a review to include all partner agencies. JH would meet with relevant partners in the next week to discuss the scope of the review. 4. A number of CESC Staff Development sessions had been held during September with over 430 members of CESC staff attending, but no staff from partner agencies were present. <p>c) Children's Social Care - SMcL</p> <ol style="list-style-type: none"> 1. The number of referrals to Children's Social Care had now exceeded 300, increasing the pressure already being placed on the system. 2. The number of CP Plans was now approximately 313. The reasons behind these numbers would be the subject of further discussion with the Police and other colleagues. <p>d) <u>6th Form and FE Colleges</u> - JB</p> <ol style="list-style-type: none"> 1. JB advised of a referral made to the First Contact Team in respect of an incident that occurred within SRC. A very helpful response and support was received from First Contact for the student. The College were not aware until afterwards that the student already had an active social worker assigned to them and the procedure in this regard was queried. The student had previously attended a school outside of this Borough. DM advised that she would investigate the circumstances behind this incident and provide an update to the next meeting regarding notification and referral to social workers assigned to Post 16 students. 			
<i>Agreement / Outcome</i>	Safeguarding issues noted.			
<i>Log Ref</i>	<i>Mtg Date</i>	<i>Action Required</i>	<i>Person Responsible</i>	<i>Due Date</i>
56/10/1415	16.10.14	Review and report on the procedures regarding notification and referral to social workers assigned to Post 16 students.	DM	20.11.14

Ref No. 11	Finance Report-April-September 2014
<i>Discussion</i>	<p>PB presented an update in respect of the current income and expenditure position of the SLSCB accounts against the projected budget.</p> <p>It was noted that income was still awaited from NHS England and the H&S CCG who had been invoiced for the contributions they said they would make towards the Core Budget. Discussions were taking place regarding these payments as non-payment would have severe implications for the Board.</p> <p>Updated reports on the Board's financial position would be presented throughout the year.</p>
<i>Agreement / Outcome</i>	Noted the current income and expenditure position of the SLSCB accounts against the projected budget.

Ref No. 12	SLSCB Funding Discussion for 2015/16			
<i>Discussion</i>	<p>CM had requested that partner organisations confirm their funding allocation for the SLSCB for 2015/16.</p> <p>Both CAFCASS and Probation have confirmed that their allocations remained the same as the current year; however the position with regard to NHS England's allocation was unclear at present.</p> <p>JH confirmed that SBC's allocation remained the same as this year but referred to the possible additional funding requirements for partners as a consequence of the establishment of the Tees Adult Safeguarding Board.</p> <p>CM requested again that partners confirm their SLSCB funding allocation for next year in advance of the next meeting as it was important that the Board had an indicative view of the funding it will have for 2015 / 2016.</p>			
<i>Agreement / Outcome</i>	Noted that partner organisations confirm their SLSCB funding allocation for 2015/16 to PB.			
<i>Log Ref</i>	<i>Mtg Date</i>	<i>Action Required</i>	<i>Person Responsible</i>	<i>Due Date</i>
57/10/1415	16.10.14	Board Members to confirm their SLSCB funding allocation for 2015/16	All	19.11.14

Ref No. 13	Board Minutes for Accuracy 18.09.14			
<i>Discussion</i>	<p>SW referred to <i>Ref No. 7</i> and the collated answers from the group work as provided at Appendix 1 which examined the reasons behind the high numbers of CIN/CP/LAC; and what the Board had done to impact on these levels. He advised he would undertake further work to use this information to help with ease of understanding and using future safeguarding performance data.</p> <p>Discussion took place as to whether the findings of the group work were required within the minutes. Agreed to redact the minutes to remove App 1 when it is circulated to non Board Members.</p> <p>Subject to the above, the Minutes of the Board meeting held on 18.09.14 were agreed as a correct record.</p>			
<i>Agreement / Outcome</i>	Subject to the redaction of Appendix 1, the Minutes of the Board meeting held on 18.09.14 be recorded as ratified.			
<i>Log Ref</i>	<i>Mtg Date</i>	<i>Action Required</i>	<i>Person Responsible</i>	<i>Due Date</i>
58/10/1415	16.10.14	The collated answers provided at Appendix 1 examining the reasons behind the high numbers of	SW	10.11.14

		CIN/CP/LAC; and what the Board had done to impact on these levels; be used to inform and understand future performance data presentations		
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Ref No. 14	Tees LSCBs VEMT Strategic Group
<i>Discussion</i>	RD advised that he had attended as recently as yesterday (15.10.14) a conference examining Human Trafficking and its association with CSE. A DVD raising awareness of the problem of Human Trafficking was available and could be used by the LSCBs. Reference was made to finalisation of the Tees LSCBs Running or Missing from Home or Care Protocol which had been circulated to Boards for considered.
<i>Agreement / Outcome</i>	Noted: Update from the Tees LSCBs VEMT Strategic Group

Ref No. 15	SLSCB VEMT Sub Group
<i>Discussion</i>	SMcL advised that relevant statistical data re VEMT young people would be reported on a regular basis to SLSCB as this was now being monitored by the VEMT Practitioners Group and reported into the Stockton and Strategic Group. This allows for the sharing of local intelligence and support being made available to those young people who are at risk.
<i>Agreement / Outcome</i>	Noted: Update on Young People currently on the VEMT list

Ref No. 16	SLSCB LIPSG
<i>Discussion</i>	<p>RB advised that key learning arising from 2 Learning Reviews would be considered at the next meeting. Key learning points will be shared with the Board in due course. Further work is also taking place to benchmark Stockton against the issues raised in the 'Pelka SCR (Birmingham)' using a benchmarking tool that will enable comparison across the Tees LSCBs to take place.</p> <p>The Group also believe there is a need for an SLSCB Protocol to be agreed for notifying parents when a SCR is to be carried out. Concerns had been raised by LIPSG Members of the process recently used whereby notification had been initiated by the SCR Independent Chair contacting the parents by letter.</p> <p>The Group felt this was not the best method and personal contact should be made. LIPSG recommended that arrangements for notifying parents should be considered on a case by case basis taking into account factors such as any known Police involvement with the family; but subject to this, notification should be conducted in person by the Business Manager via a home visit so that she could personally inform and advise the parents. In all such visits however, the Business Manager should be accompanied by an appropriate person.</p> <p>SM advised that this recommendation be considered by the Board but suggested that under no circumstances should notification of a SCR be conducted by letter unless there were exceptional circumstances such as the parent / carer being in prison or there were major personal safety concerns.</p> <p>KH asked that the Board also consider a request from TEWV NHS FT for them to be represented on the SLSCB LIPSG.</p>
<i>Agreement / Outcome</i>	<p>Noted: Update from the SLSCB LIPSG and the following recommendations be endorsed:-</p> <ul style="list-style-type: none"> - that under no circumstances should notification of a SCR be conducted by letter and instead arrangements be considered by LIPSG on a case by case basis to ensure personal safety, and the notification of parents be conducted in person by the Business Manager via a home visit and that during all such visits, the Business Manager be ac-

	<p>companied by an appropriate person, including a representative from the Police if considered necessary.</p> <p>- the request from TEWV NHS FT to be represented on the SLSCB LIPSG by KA is endorsed.</p>			
<i>Log Ref</i>	<i>Mtg Date</i>	<i>Action Required</i>	<i>Person Responsible</i>	<i>Due Date</i>
59/10/1415	16.10.14	SCR Policy regarding personal notification to parents of a SCR is produced.	PB	08.12.14
60/10/1415	16.10.14	Advise TEWV NHS FT that Board approved KA as their representative on SLSCB LIPSG.	PB	21.10.14

<i>Ref No. 17</i>	Tees LSCBs Procedures			
<i>Discussion</i>	<p>Update on progress being made by Tees LSCBs Procedures group was provided. A work programme is now in place and being monitored. Noted that the majority of Tees Procedures will come to Board via the TPG however where other Tees LSCB Groups are leading on issues they will take the lead and the Procedures Group will just note the outcome and upload to the website if required.</p> <p>An example is the Tees LSCBs Running, Missing from Home or Care (RMHC) Protocol which has been developed by Tees Strategic VEMT.</p> <p>Comments received in respect of the Protocol have been in favour of adoption, which the Board agreed to endorse.</p>			
<i>Agreement / Outcome</i>	Noted: Update from Tees LSCBs and endorsement of Tees RMHC Protocol			
<i>Log Ref</i>	<i>Mtg Date</i>	<i>Action Required</i>	<i>Person Responsible</i>	<i>Due Date</i>
61/10/1415	16.10.14	Tees Strategic VEMT and Tees PG are advised SLSCB endorsed the Running, Missing from Home or Care Protocol.	PB	18.10.14

<i>Ref No. 18</i>	CDOP			
<i>Discussion</i>	<p>KH advised that a briefing paper on the future role of the Neo Natal Sub Group would be prepared for the December meeting of the Board.</p> <p>Clarification was sought as to whether there had been any recent changes to arrangements for the notification of child deaths. KH advised that she would enquire and report back to the next meeting if it was not included in the revised Terms of Reference that were due to be presented to Board.</p>			
<i>Agreement / Outcome</i>	Noted: Update from Tees LSCBs CDOP.			
<i>Log Ref</i>	<i>Mtg Date</i>	<i>Action Required</i>	<i>Person Responsible</i>	<i>Due Date</i>
62/10/1415	16.10.14	Clarification is sought as to whether there had been any recent changes to arrangements for the notification of child deaths.	KH	20.11.14

<i>Ref No. 19</i>	Any Other Business			
<i>Discussion</i>	<p>a) SBC CM presented a letter sent from the SBC Chief Executive advising that the SLSCB Chairs appraisal had been carried out and that he, the Chief Executive would be in attendance at the next Board meeting to report on the content.</p> <p>b) Cleveland Police RD referred to recent media coverage in Middlesbrough regarding a Middlesbrough scruti-</p>			

	<p>ny of review CSE which had attracted a lot of media attention. The issue would be considered in detail at the next VEMT Strategic Group.</p> <p>The next meeting of the MASH Steering Group was scheduled for 3rd November. The Group would consider an appropriate procedure / process to alert schools to any incidents of domestic violence affecting their pupils. The PCC had secured funding for the project and would pilot the process in Hartlepool firstly engaging an appropriate member of staff, before rolling the project out to Stockton. AT requested that non LA schools be also included within the project when rolled out in Stockton.</p> <p>c) TEWV NHS Trust LM advised that this would be her last meeting as she was retiring. Chris Stanbury will be the new TEWV representative on the Board. CM thanked LM for her contribution to the Board and safeguarding work and wished her well for the future.</p>
<i>Agreement / Outcome</i>	Issues raised under Any Other Business noted.

Appendix 1 (Notes received from Group Work Tables)

Table 1

Q1 How effective is the Local Authority and its partners in identifying and disrupting the activities of those perpetrators engaged in Child Sexual Exploitation and in taking legal action against them?

- Tees Strategic VEHMT, each area has its own and at the Local VEHMT- perpetrators and victims are discussed
- Disruption is more than just the Police, can also include licencing, housing, trading standards playing a role
- Unsure how much legal action has been authorised at our level.
- Information sharing on possible perpetrators- schools/colleges etc.
- Serious organised crime strategy links to this work
- Putting a jigsaw together
- Relying on victims coming forward
- Systems in place but how do we as a Board know how effective they are?
- What comes first? Victims or perpetrator
- Tees VEMT campaigns such as Say something if you see something in pubs, hotels etc. – excellent initiative but how do we know if it has been effective? How do we measure effectiveness of campaigns?
- Work with schools- awareness raising
- What do we need by ‘disruption?’
- Keep coming back to jigsaw
- Information sharing at a grass roots level
- Operational level- Police
- Is the board comfortable that these systems and information flow are working?
- Disclosure happens elsewhere, health sources, and drug and alcohol services
- Lots of emphasis on victims- VCS, colleges, schools. Not always the same with perpetrators
- Cultural understanding- issue here particularly around racist fears. “Gang related”
- Is it still CSE if it is a child abusing a younger child?

Q2 What is the extent and effectiveness of local CSE work?

- This had been discussed earlier, the biggest challenge is measuring true effectiveness
- Training/Awareness raising- schools, colleges, partner agencies, campaigns
Barnados/a Way Out/Sexual Health Services
- Safeguarding policies at schools- more attendance/ safeguarding leads at schools- Safeguarding Forums
- VCS- Child protection policies for grass roots organisations

- Some promotional work on signs and symptoms of possible perpetrators could be needed – this is a difficult issue to consider, but would raise awareness of what to look out for.
- Enhanced CAF team is a positive development
- Could we do more but where? Lots of work out there but more on may be needed on identifying perpetrators/possible perpetrators.

Table 2

- Q3 Is there effective strategic leadership of the multi-agency response to CSE that identifies prevalence, trends, themes and patterns and secures improved outcomes for children and young people?
- Varied knowledge amongst the table in terms of being able to respond effectively to the above
 - Assured around Strategic VEMT Structure and local arrangements-standard agenda item
 - Induction for new members to understand arrangements, including strategic arrangements
 - Board Member chairs Strategic & local VEMT
 - Developed standardised Tees wide strategies and risk assessment tools
 - Significant amount of training undertaken across agencies, as well as awareness campaigns, and presentation/discussion held at last Board meeting
 - Multi-agency audits carried out-not certain of improved outcomes?-needs developing
- Q4 Is practice robustly quality assured and is there evidence that this leads to better services for children and young people?
- Peer Review conducted of our VEMT process, chaired by independent person from outside the local authority area
 - Strategic VEMT-asked Chairs to give presentations of cases from each of the authority areas-sharing of information
 - Review by Sergeant –Findings to be discussed at future meetings
 - Where is the voice of the child? -Is there a potential disconnect between mainstream social care/VEMT procedures?
 - Work underway on perpetrators-Police reviewing structures and how they respond to CSE.

Table 3

- Q5 How effective is the local authority and its partners in ensuring that all children and young people at risk of CSE are identified at the earliest opportunity?
- Differing levels of knowledge around the table regards the structured response to CSE, the work of the Strategic VEMT in Stockton, work being undertaken on education re CSE, and the extent of each partners response to CSE.
 - Lack of evidence demonstrating the impact the Strategic VEMT and VPG have had
 - Partnership Information Sharing Form (Operation Shield)-lack of awareness amongst all partners
 - Threshold into VPG different from referral into social care-use of Safer Referral tool/Risk Assessment Tool
 - Strategic VEMT-Task & Finish Group Communication Streams:-
 - CYP
 - Professionals
 - General Public/parents

Q6 Are commissioning arrangements effectively meeting the wide range of needs of children and young people affected by CSE?

-Unsure whether the existing commissioning arrangements meet the needs of young people/families who are victims of CSE

-Lack of clarity regards pathways into the available services-needs mapping out by Strategic VEMT

-Key Council documents such as the Boroughs JSNA and Community Strategy currently made no reference to our response to CSE

-It was unclear whether there were any gaps or duplication amongst the current commissioned arrangements; and it was suggested that was another issue to be considered by the Strategic VEMT.

Table 4

Q7 Are children and young people, including looked after children, who are at risk of, or who have been, sexually exploited effectively safeguarded, protected and supported?

-Difficult to work with children who do not believe they are being exploited

-VEMT Group consider:-

-victims-risk assessment

-perpetrators-information fed back to Police across the 4 Tees wide VEMT Groups

-places-shared intelligence across VEMT Practitioners Group

-Thematic Case File Audit agreed for October to focus on CSE cases

-Corporate Parenting responsibility for Looked After Children-Care leavers monitored beyond statutory age up until 21 years old

-Social Worker Teams consisting of most experienced professionals, were working with most vulnerable groups

Q8 How effective is the local authority and its partners in ensuring that all children and young people at risk of CSE are identified at the earliest opportunity/

-Safeguarding Forum for Head Teachers or designated Safeguarding leads are provided with regular updates on three occasions per year

-Net spread wider than those children known to be at risk-wide range of professionals contributing, including Virgin Care (sexual health provider)

-VEMT Group provides strategic viewpoint

-Awareness raising undertaken with Chairs of Governors, Head Teachers, DVD's shown in school-Chelsea's choice-could be expanded upon?

-The Police had written to all Tees LSCB's re schools accessing COP Training Package-suggested that subject to further discussion by DM & HT's re appropriate teaching skills and timescale for implementation, an invitation be sent out via CESC, to all Secondary? Schools including post 16

-Lack of knowledge around how/whether GP's are adequately trained to identify cases of CSE?

-Support available from organisations such as Barnardo's

-Social Media Communications campaign could be considered at Strategic VEMT?