












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)	  Apols
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	
Jo Thornhill (JT)	Lay Member		Middlesbrough College Lecturer Teesside University Lecturer	
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 and SBC / Spark of Genius Joint Venture: King Edwin School			Apols
Eric Jewitt (EJ)	SBC CESC Children's Workforce Manager / Chair Children's Workforce Sub-Group			
Peter Kelly (PK)	Director of Public Health			
Liz Hanley (LH)	Adult Services Lead		Health and Well Being Commissioning Group. Learning Disabilities Partnership (Ch.) Stockton Local Executive Group Adult Safeguarding;	
Shaun McLurg (SM)	Head of Children & Young People's Services / Chair Tees LSCB's Procedures Group / Chair SLSCB VEMT Sub-Group		CAF Board (Ch.) Children & Young People Health Wellbeing Commissioning Group Youth Offending Team Management Board Spark of Genius Children's Homes	Apols
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	Apols
Simon Willson (SW)	SBC CESC Head of Business Support & Improvement / Chair Performance Sub-Group		MALAP (Multi Agency Looked After Partnership) (Ch.)	

SLSCB Members	Title	Representing	Other Interests: Stockton-on-Tees or Tees Valley Partnerships, Boards, Group etc. (Ch. denotes Chair, VCh Vice-Chair)	  Apols
Cllr Ann McCoy (AM)	Lead Cabinet Member - Children and Young People (Participating Observer)			
Janice Deakin (JD)	Service Manager	CAFCASS		Apols
Rob Donaghy (RD)	Detective Superintendent / Chair LIPSG	Cleveland Police		
Alex Taylor (AT)	Head Teacher Independent Schools	Education Establishments		Apols
Claire Humble (CH)	Head Teacher Secondary Schools			
Kerry Coe (KC)	Head Teacher Primary Schools			
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,	Apols
Diane McConnell (DM)	SBC Chief Advisor School Effectiveness			Apols
Jean Freund (JF)	Executive Nurse	Hartlepool & Stockton Clinical Commissioning Group (CCG)		
Kailash Agrawal (KA)	Designated Doctor <i>Advisor to the Board</i>			
Bev Walker (BW)	Deputy Director of Nursing, Quality and Safety	NHS England (Cumbria & North East)		
Lindsey Robertson (LR)	Professional Lead Nurse, Out of Hospital Care	North Tees & Hartlepool NHS Foundation Trust		
Chris Stanbury (CS)	Executive Director of Nursing and Governance	Tees, Esk & Wear Valley NHS Foundation Trust		
Julie Allan (JA)	Director of Offender Services -Durham & Tees Valley	Probation Services		Apols
Barbara Gill (BG)	Head of Offender Services - Community Rehabilitation Company			
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	

Minute Taker/Guests:	Gary Woods - SLSCB Business Support Officer	Daniel Childs - Governance Officer
Alison Ferguson (AF): Hartlepool & Stockton Clinical Commissioning Group (CCG) (sub for Karen Hedgley)	Jill Anderson (JAn): Stockton-on-Tees Borough Council – Service Manager, First Response (item 8)	Jane Harvey (JHa): Stockton-on-Tees Borough Council – Early Years & Complex Needs Manager (item 9)
Dan Maddison (DMA): Cleveland Police - Inspector (item 12)	Reuben Kench (RK): Stockton-on-Tees Borough Council – Head of Culture & Leisure (item 13)	

Meeting Quorate:	Yes
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Declarations of Interest:	None
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Ref No. 1	Attendance, Apologies & Quoracy
<i>Discussion</i>	AF (Senior Safeguarding Children Officer – NECS) was welcomed to the Board as a representative for Hartlepool & Stockton Clinical Commissioning Group following the departure of Karen Hedgley (Senior Manager, Children’s Safeguarding and Looked After Children (Designated Nurse) – CCG, and Advisor to the Board) in January 2015.
<i>Agreement/ Outcome</i>	Noted.

Ref No. 2	Action Log
<i>Discussion</i>	<p>CM advised that the SLSCB Action Log had been circulated for information, and requested updates to outstanding actions.</p> <p>6/7/1415: ‘<i>Early Help Strategy</i>’ (JH) – JH informed Board of a Strategic Lead now in place, and an operational group beneath with multi-agency involvement. A revised implementation plan will come back to Board for comment.</p> <p>28/8/1415: ‘<i>Progress Update from Performance Group on Impact of Learning</i>’ (SW) – SW to liaise with CM and will feed back progress to Board.</p> <p>32/8/1415: ‘<i>Tees-wide Perpetrator Management Report</i>’ (RD) – RD had sent updates on the CSE review to PB. Review has been completed and will be taken forward to a further review looking at vulnerability – due to report in March 2015 regarding CSE and perpetrator management.</p> <p>46/10/1415: ‘<i>An appropriate Performing Arts Students Group, such as at SRC, be invited to deliver the theatre production element of the SLSCB Staff Engagement Event</i>’ (SM) – PK reported engagement with a young people’s group in relation to performing a safeguarding scenario, with some Board members then participating in a case conference.</p> <p>47/10/1415: ‘<i>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</i>’ (PK) – the revised dates for the Staff Engagement Event were the 28th April 2015 (2 sessions) and the 5th May 2015 (evening session) at the Arc – PB to email Board members for availability on these days. Information regarding these events to go out as widely as possible – a flyer is ready for agencies to distribute.</p> <p>51/10/1415: ‘<i>Report 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 to be prepared for consideration by the SLSCB at their meeting on the 20th November 2014</i>’ (RD) – RD advised that a Strategic VEMT Development Day took place on the 27th January 2015 and this issue was discussed in detail – more detail of the outcomes from the development session will need to be provided to a future meeting of SLSCB. SM currently conducting a benchmarking exercise, and once completed, this will come to Board.</p>

	<p>57/10/1415: 'Board Members to confirm their SLSCB funding allocation for 2015/16' (ALL) – CM spoke to Bev Reilly (NHS England) who confirmed that although there was no money available to contribute to the SLSCB, there may be potential access to non-recurring funding, which might include assistance around specific LSCB development events.</p> <p>85/12/1415: 'SLSCB February Agenda item: LIPSG Chairs report on Objectives 5d and 6d of the SLSCB Business Plan' (RD) – RD had sent an email update to PB, and noted that a new MACFA tool now checks evidence of child involvement in a case.</p> <p>88/12/1415: 'Tees LSCB's be requested to consider their future strategy regards FGM/HBV & Forced Marriage' (RD) – RD reported that discussions had taken place with Redcar LSCB, with a scoping exercise to determine at-risk children's groups to follow, as well as establishing what training schools have had around this issue. A health group (Central Health Teesside) had been identified and it was proposed that this group took the lead with regards FGM to ensure a tees-wide approach. There was a need to understand the numbers of at-risk girls locally, a process which could be linked to the Joint Strategic Needs Assessment day which aims to identify a whole strand of vulnerable groups – PK to collate information.</p>
Agreement/ Outcome	Noted content of Action Log, as amended.

Ref No. 3	SLSCB Officer Vacancies & Impact: SLSCB Vice-Chair, LIPSG Chair & Vice-Chair, H&S LSCBs Joint Training Group Chair			
Discussion	<p>CM had written to all agencies regarding the above Officer vacancies stressing that this was essential business for the Board. Only a few responses had been received and all were negative, citing a lack of time and/or experience to take on these roles. There was a danger that this situation could undermine the whole function of the Board.</p> <p><u>SLSCB Vice-Chair</u> – it was proposed that this role should remain independent, as per the Chair arrangements. LC agreed to become Vice-Chair for 6 months, after which time the position would be reviewed in order to determine the appropriateness of their agency commitment to this arrangement.</p> <p><u>LIPSG Chair & Vice-Chair</u> – discussion ensued acknowledging that this was an enormously important post for the SLSCB, and highlighting the fundamental function of this group (SCRs, issues in the media, etc.) to the Board's business. Agreement that the Chair should not come from Social Care, and suggestions of an independent Chair (are there suitable and available candidates, and what about cost implications?), combined Tees LIPSGs (difficult due to cases being location-specific) and sharing other Tees LIPSG Chairs. BW and LR agreed to cover the Chair and Vice-Chair roles between them for 6 months, after which time these arrangements would be reviewed. CM thanked both for their willingness and commitment in this respect.</p> <p><u>H&S LSCBs Joint Training Group Chair</u> – agreement that the Chair ideally needed to be a member of both Hartlepool and Stockton LSCBs. Maureen McEnaney was acting as interim Chair following Linda Watson's (Clinical Director, Community Services – NTHFT) departure, and though LR was not opposed to Chairing this group, she is new to her role and preferred to settle in first – will consider the Chair position in the coming weeks.</p>			
Agreement/ Outcome	Arrangements for covering SLSCB Officer vacancies noted. PB to forward BW and LR the next 6 months LIPSG meeting schedules and ongoing workload.			
Log Ref	Mtg Date	Action Required	Person Responsible	Due Date
97/02/1415	19.02.15	Forward the next 6 months LIPSG meeting schedules and ongoing workload to BW and LR .	PB ✓	27.02.15

Ref No. 4	Hartlepool & Stockton LSCB's Joint Training SLA (SLSCB Action 91/01/1415)			
<i>Discussion</i>	<p>EJ referred to his circulated report titled 'Joint Training and Development arrangements between HSCB and SLSCB', and the accompanying Service Level Agreement (SLA) - these papers were the culmination of various documents that had been to both Boards. Work was ongoing in relation to the 2015-2016 joint training programme, and it was noted that some training would remain unique to each authority. Also noted was the uncertainty within some areas of Hartlepool as to how e-learning would be used.</p> <p>All members supported and approved the Service Level Agreement, and CM thanked everyone involved in these arrangements for the speed of progress.</p>			
<i>Agreement/ Outcome</i>	Approved and authorised the Chair to sign the Service Level Agreement, and noted the ongoing work currently being undertaken.			
<i>Log Ref</i>	<i>Mtg Date</i>	<i>Action Required</i>	<i>Person Responsible</i>	<i>Due Date</i>
98/02/1415	19.02.15	SLSCB Chair to sign the HSCB and SLSCB Joint Training and Development Group and delivery of the Joint Training Strategy Service Level Agreement.	CM ✓	19.03.15

Ref No. 5	Graded Care Profile Tool – SLSCB Business Plan Objective 4b			
<i>Discussion</i>	<p>LR referred to her circulated report on the Graded Care Profile Tool, and gave background to this piece of work. The tool supported objective 4b of the SLSCB Business Plan which identifies the need to 'improve early identification of, and response to, neglect', the success of which is that 'a more structured framework for the management of neglect cases will be in place'.</p> <p>Two options were presented in terms of rolling out training on the use of this tool – option 1 was for a training schedule to be agreed and rolled out across the 2014-2016 training calendar with all identified staff to attend; option 2 proposed to pilot the training and use of the tool in identified localities defined by both Local Authority and Health locality team boundaries. Following discussion, it was agreed that option 2 would be the preferred choice, and that on successful completion of the pilot, subsequent localities would be identified for the cascade training.</p> <p>CS expressed concern over the lack of involvement of TEWV, and commented that they already have a comprehensive risk assessment framework in place. There was also no TEWV representation on the Graded Care Profile Task and Finish Group. PB noted that volunteers from all agencies were invited to join this group at a previous Board meeting, and it was not too late to add a TEWV representative.</p>			
<i>Agreement/ Outcome</i>	Graded Care Profile report noted and endorsement of associated Project Initiation Document supported. Preferred option for training roll-out agreed.			
<i>Log Ref</i>	<i>Mtg Date</i>	<i>Action Required</i>	<i>Person Responsible</i>	<i>Due Date</i>
99/02/1415	19.02.15	Forward details of the next Graded Care Profile Task and Finish Group meeting to CS .	PB ✓	27.02.15

Ref No. 6	SLSCB Harry			
<i>Discussion</i>	<p>PB commented that the SCR Harry report will be shared with Board members shortly, and the next phases to be discussed included media strategy, meeting the parents and publication consideration. The author had provided some dates for sharing the report – agreement reached that a Special SCR Harry Board Meeting would be scheduled for the 16th April 2015, replacing the intended SLSCB Board Meeting on this date (the April Board Meeting would move to the 27th April 2015).</p> <p>CM gave an update on SCR Gavin – had been approached by the Coroner as someone must go to the inquest to answer questions on either the 16th or 23rd April 2015. The re-</p>			

	port author would normally be the most appropriate person, but he lives in France now, so is not an option. Agreement reached that someone from the LIPSG attends, who is aware of the action plan and can take people through the report, demonstrating that what happened could not be foreseen – members felt that SM was best placed. JH would speak to SM next week, and CS offered support following inquest experience.			
Agreement/ Outcome	Special SCR Harry Board Meeting to be scheduled for the 16 th April 2015 to share the report with the author. SM to attend Gavin inquest to answer questions on either the 16 th or 23 rd April 2015 (date to be confirmed).			
Log Ref	Mtg Date	Action Required	Person Responsible	Due Date
100/02/1415	19.02.15	Schedule the Special SCR Harry Board Meeting for the 16 th April 2015, and move the intended SLSCB Board Meeting for this date to the 27 th April 2015.	Business Unit ✓	27.02.15

Ref No. 7	Performance Data Report Q3 October – December 2014			
Discussion	<p>SW presented his circulated SLSCB Performance Date Update for Q3 2014-15 report, and highlighted the following...</p> <ul style="list-style-type: none"> • <u>CAFs</u> - analysis of the 1,654 referrals to Children’s Social Care which proceeded to Single Assessment during the Q3 period indicates that only 191 (11.5%) of these had an active CAF in place at the point of referral – this remains well below expectations, given that all referrals to social care are expected to have evidence of CAF involvement, other than in cases where there is an immediate safeguarding concern. • <u>Referral reasons</u> – difficult to provide detail as the categorisation is very broad. New data collection now in place, and first round of data collected during 2013-2014 for SBC and for England overall. Also agreed regional benchmarking, and will bring this data back to Board. • <u>Strategy meetings/Section 47 Enquiries/ICPCs</u> – recent analysis of the ‘conversion rate’ for children becoming subject to a CP plan indicates an average rate of 12% in Stockton, 11% for the North East region, and 8% for England – noted that this may reflect a difference in attitudes to ‘risk’ in Stockton. Regarding ICPCs, concern expressed over video conferencing issues and whether this was working properly – RD confirmed video conferencing is working but problems remain within the Police and Social Care over the desire to use this resource. The proportion of children not made the subject of a CP plan following an ICPC over the 2013-14 period was discussed – Stockton proportion was high compared to regional and national averages which may suggest not enough multi-agency scrutiny/challenge. If this continues, a thematic audit may be required. JH was meeting Redcar compatriots to see what they are doing, as they buck the trend locally. • <u>Attendance/participation at ICPCs/RCPCs</u> – more work needed to ensure correct GPs are identified/invited as no further forward since last year. Also need to know more about why correctly identified GPs were not responding. • <u>Workforce information</u> – still awaiting data relating to the NTHFT workforce (two quarters now missing) – LR has picked up this issue and will be addressing. <p>CAF statistics widely acknowledged as disappointing in light of the commitment from partner agencies, reinforcing the challenge around early intervention and identification.</p>			
Agreement/ Outcome	Report noted.			

Ref No. 8	CAF			
Discussion	<p>JAn gave an overview of the circulated Common Assessment Framework Update report. Attention was drawn to the following...</p> <ul style="list-style-type: none"> • Briefing sessions to support the introduction of the new process and documentation 			

	<p>were attended by over 500 staff (both specific and multi-agency sessions). Also, recent briefing to over 25 GP Practice Managers – led to 2 sessions with GPs/Nurses.</p> <ul style="list-style-type: none"> • Change in the way schools are initiating CAFs – hoping to work in detail with Head Teachers. • Integration of CAF with RAISE (Children’s Social Care IT system) has thrown up some anomalies – large amount of data cleansing required. • The Early Help Strategy has now been agreed and CAF features heavily within this as the assessment tool to establish need and deliver services. A working group has been established by JH to update the action plan and further develop the strategy. • Dramatic decrease in CAF activity by Health Visitors and Midwives within NTFHT - feedback indicates that CAF is not seen as a priority in their overall workload. Also continuing concern regarding low numbers of CAF completed by Children’s Centres. • Core CAF activity has decreased since the implementation of the CAF Team. <p>Following a query on how many professionals would be in a potential list for training, JAn confirmed there are 1326 professionals registered on the CAF database (of which approximately 500 have been updated in two types of sessions).</p> <ul style="list-style-type: none"> • Type 1 – Multi-agency session – initially 6 sessions with a maximum of 40 attendees at each one. It soon became apparent these had filled up, so a further 4 sessions were added. In total over 320 professionals attended • Type 2 – single agency session – these have been delivered to a single agency by a CAF Support Officer (e.g. Alliance, Housing Options) within their own offices. Sessions have been well attended with over 200 professionals targeted. • Also visited almost every school in Stockton and spoke with key people that are not counted in the above figures. <p>JF noted the use of ‘Health – North Tees PCT’ in the report. This was registered against a Health Visitor that had used this agency description in a previous registration in 2013. Therefore when registering a subsequent one in 2014 it has defaulted to this agency – this needs to be reallocated to the HV numbers.</p> <p>Discussion around CAF1s which were used for sharing information – previously received a steady referral of CAF1s but this is no longer the case and needs addressing. SAFER referral tool has replaced the old CAF1 document, but there are indications that professionals are reluctant to use this process as this is seen as a referral to Children’s Social Care.</p> <p>Funding for the CAF Team (currently Council funded) needs evaluating and is part of the ongoing Children’s Review.</p> <p>Agreement that there was a need to ensure people have the right approach to CAFs so that agencies are mindful of their responsibilities, and do not assume that others are initiating them. Current situation has been escalated to the Stockton-on-Tees Chief Executive.</p>			
<i>Agreement/ Outcome</i>	Noted progress to date and impact of the enhanced CAF Team. CAF activity from Health Visitors, Midwives and Children’s Centres to be monitored and updated in May 2015.			
<i>Log Ref</i>	<i>Mtg Date</i>	<i>Action Required</i>	<i>Person Responsible</i>	<i>Due Date</i>
101/02/1415	19.02.15	Update regarding CAF activity from Health Visitors, Midwives and Children’s Centres, as well as use of SAFER referral tool, to be given at SLSCB meeting in May 2015.	JAn	21.05.15

Ref No. 9	<i>Mental Capacity Act Deprivation of Liberty Safeguards – implications for young people with disabilities aged 16-18</i>
Discussion	<p>JHa referred to her circulated paper titled 'Mental Capacity Act Deprivation of Liberty Safeguards – implications for young people with disabilities aged 16-18'.</p> <ul style="list-style-type: none"> • A report to SBC Cabinet on the 9th October 2014 detailed the implications of the Supreme Court judgement relating to MCA/DoLS. Clients falling within the scope of the safeguards require assessments for mental capacity as the first stage of the process. • Assessments would be required for those 16 and 17 year-olds receiving short-break services provided by the Council at Hartburn Lodge and OASIS, or through a direct payment where care is provided at home. • 47 young people with disabilities are open to the Complex Needs Social Work Team, of which the initial indication is that 15 have the mental capacity to consent to the relevant care and support arrangements, 28 do not, and it is unclear for the remaining 4. • At an estimate of £400 per case, the cost for assessments is likely to be a minimum of £12,800 in this financial year. <p>LH advised that an update went to SBC Cabinet two weeks ago, and that by October 2015 there will be a better idea of the figures involved.</p> <p>CS noted the lack of quality information for young people regarding DoLS, and was looking into some local work on this for children and parents.</p>
Agreement/Outcome	Implications of Mental Capacity Act Deprivation of Liberty Safeguards for young people with disabilities aged 16-18 noted, including financial implications.

Ref No. 10	<i>Partners Operational Safeguarding Issues</i>
Discussion	<p><u>Voluntary Sector</u> Safeguarding network meeting arranged for the 17th March 2015 where the voluntary sector can raise issues – SR thanked EJ and PB for their support with this. Also highlighted an 8 week delay for a key staff member to receive their DBS clearance.</p> <p><u>CCG</u> Appreciation of Karen Hedgley's work and contribution, supported by AF, was noted by JF. Looking at the whole quality and safeguarding functions, with 2 Designated Nurse posts going to advert shortly.</p> <p><u>CESC</u> JH advised that the Children's Review would be brought to the SLSCB meeting in March 2015 following a paper that would be presented to SBC Cabinet later today – consultation period would be the 2nd March – 2nd April 2015. MASH going well, with a small project team in place, and a development session taking place next week – hoping to have MASH fully operational from the 1st April 2016, though challenges regarding accommodation remain. LGA sector-led improvement – locality and Tees-focus – asking LGA to pull together a team (Health lead). LSP meeting – Fire Service keen to be part of SLSCB (PB had written to them but had received no response).</p> <p><u>Police</u> Domestic abuse in schools project – live in Hartlepool in April 2015, then roll-out across Tees to follow. Replacement for RD, Alastair Simpson, starts on the 23rd February 2015. Protection of Vulnerable Persons review due to report in March 2015.</p> <p><u>NHS England</u> Draft revised accountability framework noted – consultation highlighted a lack of clarity over representation on Boards. PB advised this is included in the email briefing going out to members tomorrow – partners encouraged to read and respond. Named GPs group – funding available, and going to advert for named GP across Tees.</p>

	<p><u>TEWV</u> New named Doctor started on the 1st February 2015 – new named Nurse is Jo Gamble. CS highlighted a self-harm issue after Tees took 3 out of the top 5 positions in a national survey regarding numbers of young people who present at A&E due to self-harm – Crisis Team recruited, with data to be collected for 6 months and included in Annual Report. Also noted a good video on You Tube made by children in relation to self-harm.</p>
Agreement/ Outcome	Updates noted.

Ref No. 11	Signs of Safety Progress (SLSCB Action 83/12/1415)
Discussion	<p>JH advised that training sessions for staff were ongoing, and positive feedback had been received following attendance at these sessions. Practice Educators course in April/May 2015. LR added that feedback from staff included whether or not they have to use the tool – general feeling that this should be mandatory, but required partners agreement.</p>
Agreement/ Outcome	Updates noted.

Ref No. 12	Care Establishment Action to Safeguard			
Discussion	<p>DMA presented his circulated 'Care Establishment Incident – Referral Process' document (first draft), which attempted to formalise the way safeguarding issues are being reported in care establishments. Attention was drawn to the thresholds proposed and the involvement of LSCBs.</p> <ul style="list-style-type: none"> • JH felt these proposals need to be considered at the Tees LSCBs Procedures Group, followed by the equivalent Adults Procedures Group, then come back to LSCBs. • BW thought a wider discussion was needed as there was a potential impact on Police calls received. Debate ensued over what constituted 'care' and an 'establishment'. • CS expressed concern over the Police waiting for 5 incidents/crimes in a month before any action is taken – action may be required after the first incident/crime, depending on its severity. 			
Agreement/ Outcome	The Care Establishment Incident – Referral Process proposals to be taken to the Tees LSCBs Procedures Group for discussion.			
Log Ref	Mtg Date	Action Required	Person Responsible	Due Date
102/02/1415	19.02.15	The Care Establishment Incident – Referral Process proposals to be taken to the Tees LSCBs Procedures Group for discussion.	Police	10.04.15

Ref No. 13	Offenders in Public Buildings (SLSCB Action 90/01/1415)			
Discussion	<p>RK referred to the circulated letter proposal regarding Disclosures to Library Services. This followed the extensive debate at the SLSCB meeting in January 2015, and attempted to gain intelligence from other agencies/Boards, raise awareness of this issue, and find out what efforts have been made to address this elsewhere. Discussion over whether this letter was appropriate, and who it should be sent to, followed.</p> <ul style="list-style-type: none"> • SR agreed to this approach from a libraries perspective, but still had reservations regarding the impact on other voluntary settings. Felt it was important to highlight the existing working relationships between libraries and the Probation Service. • CS noted that some areas were taking a hard line on this, making specific elements contained within recovery programmes extremely difficult. • RK added that there is a presumption that action will follow a disclosure, but staff currently have no power to act. <p>Agreement that letter was appropriate, and should be sent to LGA, ADASS, ADCS, National Association of Independent Chairs, Local Authority Chief Executives – North East,</p>			

	North East Independent Chairs (Adults and Children's), Police Chiefs, Department for Education, Ofsted, Home Secretary, NPS, NSPCC, CRCs and Forensic Services.			
<i>Agreement/ Outcome</i>	Proposal to send out letter supported, with identified recipients agreed.			
<i>Log Ref</i>	<i>Mtg Date</i>	<i>Action Required</i>	<i>Person Responsible</i>	<i>Due Date</i>
103/02/1415	19.02.15	Send Disclosures to Library Services letter, signed by CM on behalf of the SLSCB, as soon as national contact details have been sent to PB .	CM	03.04.15

<i>Ref No. 14</i>	15.01.15 Board Minutes for Accuracy			
<i>Discussion</i>	Minutes of the Board meeting held on the 15 th January 2015 were agreed as a true record, with one requested amendment. <ul style="list-style-type: none"> Ref No. 3 (Offenders in Public Buildings) – amend Log Ref. 90/01/1415 (Action Required) from 'A further report' to 'A letter'. 			
<i>Agreement/ Outcome</i>	The minutes of the Board meeting held on the 15 th January 2015 be recorded as ratified, subject to the minor amendment being made.			
<i>Log Ref</i>	<i>Mtg Date</i>	<i>Action Required</i>	<i>Person Responsible</i>	<i>Due Date</i>
104/02/1415	19.02.15	Ref No. 3 (Offenders in Public Buildings) – amend Log Ref. 90/01/1415 Action Required from 'A further report' to 'A letter'.	Business Unit ✓	19.03.15

<i>Ref No. 15</i>	Tees LSCB's VEMT Strategic Group			
<i>Discussion</i>	<p>RD reported that the Strategic Group held its Development Day on the 27th January 2015. This was well attended, and issues addressed included...</p> <ul style="list-style-type: none"> Updated CSE strategy in draft form. Action Plan being refreshed – gap analysis on NWG guidance. QA performance framework agreed – not the finished article, but a good foundation. Will be on the next Board agenda. 'In the Wrong Hands' communications strategy – produced a number of handouts/posters for young people, and would be launched in line with the NWG awareness day on the 18th March 2015. Written to Chair of Directors of Children's Services regarding who would be prepared to present on this – Mark Braithwaite identified and happy to undertake. Noted that Redcar were producing enough leaflets to give to all secondary school children, funded by the Council – JH to discuss Stockton's approach with compatriots across Tees and copy responses back to SLSCB. <p>RD advised that his replacement, Alastair Simpson, had agreed in principle to take on the role of Chair of this group.</p>			
<i>Agreement/ Outcome</i>	Updates noted, and 'In the Wrong Hands' leaflet strategy to be established (Stockton-only approach or Tees-wide), and funding confirmed.			
<i>Log Ref</i>	<i>Mtg Date</i>	<i>Action Required</i>	<i>Person Responsible</i>	<i>Due Date</i>
105/02/1415	19.02.15	JH to liaise with DCS colleagues regarding funding of 'In the Wrong Hands'.	JH	02.03.15

<i>Ref No. 16</i>	SLSCB VEMT Sub-Group			
<i>Discussion</i>	<p>PB referred to the circulated VEMT Sub-Group Chairs Update Report for SLSCB, completed by SM. This highlighted continued good attendance and contributions from all agencies, and gave operational updates from the VEMT Practitioners Group.</p> <p>Other issues discussed included the Strategic VEMT Group Development Day, Tees QA</p>			

	Framework, Return Interviews, benchmarking against recommendations arising from the Jay Report (Rotherham) and Ofsted Thematic Inspection, and Children's Homes Location Risk Assessments.
<i>Agreement/ Outcome</i>	Report noted, and any queries to be emailed to PB who will liaise with SM .

Ref No. 17	Tees CDOP
<i>Discussion</i>	<p>KA provided an update on the circulated Tees LSCBs CDOP 2014/2015 Case Summary Recommendations and Action, noting the new GPs proforma which was proving helpful. Also, highlighted the Rapid Response process, and reported that the procedure was not able to go live until administration detail has been agreed.</p> <p>KA referred to the circulated letter to Tees LSCBs Independent Chairs from the CDOP Chair, Toks Sangowawa, requesting support for a Tees-wide safe sleeping campaign. Agreement to support such a campaign, and PK to be the lead contact for this in order to arrange for a Stockton representative to attend an initial meeting.</p> <p>JF responded to the circulated Tees CDOP letter regarding the Rapid Response Process, and the request for the CCG to consider how an additional four hours of administration support can be provided to enable the statutory function of the Rapid Response Procedure to be undertaken by Tees CDOP. JF felt there was a perception that the CCG had been slow to respond on this matter, but explained that she had been awaiting a formal request which had now been received (letter dated 11th February 2015) – has spoken to Redcar LSCB Chair and the Tees CDOP Chair, and would be giving a response to this request by the end of this week.</p>
<i>Agreement/ Outcome</i>	Updates noted.

Ref No. 18	SLSCB LIPSG – Proposed future arrangements and responsibility for MACFA and associated costs (SLSCB Action 56/12/1415)			
<i>Discussion</i>	The circulated options paper for a future MACFA group produced by Trina Holcroft (Named Nurse, NTHFT) on behalf of the LIPSG Chair was noted, and it was agreed to defer this to the next SLSCB meeting so members could digest the proposals outlined, alongside an additional report from the external facilitator.			
<i>Agreement/ Outcome</i>	Deferred to the next SLSCB meeting in March 2015.			
<i>Log Ref</i>	<i>Mtg Date</i>	<i>Action Required</i>	<i>Person Responsible</i>	<i>Due Date</i>
106/02/1415	19.02.15	Deferred to next SLSCB meeting in March 2015.	ALL ✓	19.03.15

Ref No. 19	Tees LSCB's Procedures Group
<i>Discussion</i>	No report available as TPG has not met since last update presented. Next meeting scheduled for the 27 th February 2015.
<i>Agreement/ Outcome</i>	Noted.

Ref No. 20	Any Other Business
<i>Discussion</i>	Hartlepool Safeguarding Children Board letter dated the 13 th February 2015 was noted, which responded to the Children's Minister letter of the 23 rd December 2014 inviting LSCBs to bring forward proposals for greater impact on how we achieve our joint aim of keeping Children and Young People safe. The proposal is to create a Tees-wide multi-agency performance management framework to improve decision making, increase learning and have greater effectiveness resulting in better outcomes for communities.

	<p>Section 11 Audit Tool – SR to be asked to present an annual safeguarding report for faith organisations and the voluntary sector, noting that it was not feasible for a S11 audit to be completed.</p> <p>Neglect Strategy – required urgently. Numerous models in use by other LSCBs – PB will lead on this and draft one for comment.</p> <p>CM thanked RD for his considerable efforts within SLSCB, and wished him well for his forthcoming retirement.</p>			
<i>Agreement/ Outcome</i>	All updates and developments noted.			
<i>Log Ref</i>	<i>Mtg Date</i>	<i>Action Required</i>	<i>Person Responsible</i>	<i>Due Date</i>
107/02/1415	19.02.15	Section 11 Audit Tool annual report of faith organisations and the voluntary sector.	SR	08.05.15
108/02/1415	19.02.15	PB to produce a draft Neglect Strategy for comment.	PB	08.05.15