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	LSCB and SSAB Chair Sunderland LSCB Chair Newcastle	✓
Pauline Beall (PB)	Business Manager		MALAP (Multi Agency Looked After Partnership) Stockton VCSE Safeguarding Forum	✓
Leanne Bain (LB)	Lay Member			√
Lesley Cooke (LC)	Lay Member		Eastern Ravens TrustCatalyst	√
Deborah Wray (DW)	Lay Member			✓
Jane Humphreys (JH)	Corporate Director of Children, Education & Social Care (CESC)	Local Authority	 CCG Stockton Locality Board Member Hartlepool & Stockton CCG Board Member Health and Wellbeing Board (HWB) HWB Adult Partnership HWB Children's Partnership SMB – Public Protection Tees Adult Safeguarding Board Safer Stockton Partnership 	√
Peter Kelly (PK)	Director of Public Health		 Health and Wellbeing Board (HWB) HWB Adult Partnership HWB Children's Partnership Adult's Joint HWB Commissioning Group Children's Joint HWB Commissioning Group Tees Adult Safeguarding Board Safer Stockton Partnership Tees VEMT Strategic Group 	Apols
Martin Gray (MG)	Head of Early Help, Partnership and Plan- ning			✓
Liz Hanley (LH)	Adult Services Lead		 Health and Wellbeing Commissioning Group Learning Disabilities Partnership (Ch.) Stockton Local Executive Group Adult Safeguarding 	√
Diane McConnell (DM)	Head of Schools and SEN		CAF Board Convener of the Safeguarding Forum for Education Settings	√
Shaun McLurg (SM)	Head of Safeguarding and Looked After Chil- dren / Chair Tees LSCB's Procedures Group / Chair SLSCB VEMT Sub-Group		 Children & Young People Health and Wellbeing Commissioning Group Spark of Genius Children's Homes 	√
Julie Nixon (JN)	Head of Housing & Community Protection		 HWB Adult Partnership HWB Children's Partnership Tees Adult Safeguarding Board Safer Stockton Partnership SBC Adult Social Care Programme Board 	√
Simon Willson (SW)	SBC CESC Head of Business Support & Improvement / Chair Performance Sub- Group		MALAP (Multi Agency Looked After Part- nership) (Ch.) (pending new Chair to be de- termined as part of implementation of CESC Children's Review)	✓
Cllr Ann McCoy (AM)	Lead Cabinet Member - Children and Young People (Participating Observer)		Governor Tees, Esk & Wear Valley NHS FT	√
Neil Schneider (NS)	Chief Executive (Participating Observer)			Apols

SLSCB	Title	Representing	Other Interests:	1
Members	Title	Representing	Stockton-on-Tees or Tees Valley Partnerships,	×
			Boards, Group etc. (Ch. denotes Chair, VCh Vice-Chair)	Apols
Elisa Arnold	Service Manager	CAFCASS	Redcar and Cleveland LSCB	1
(EA)	Corvido Managor	0711 07100	Local Family Justice Board	Ť
,			Able to feed in national changes within the	
			Family Justice Service	
Alastair	Detective Superinten-	Cleveland	Redcar SCB (Full board, Exec and LIPSG)	✓
Simpson	dent / Chair LIPSG	Police	Middlesbrough SCB (Full board and LIPSG) Hartlepool SCB (Full board, Exec and	
(AS)			LIPSG)	
			Teeswide Safeguarding Adults Board	
			Tees LSCBs Strategic VEMT Group	
			MAPPA SMB	
			MASH Strategic Management Board (N Tage)	
			Tees) • CDOP	
Alex Taylor	Head Teacher	Education	0001	✓
(AT)	Independent Schools	Establishments		
Clare Humble	Head Teacher		No other interests	×
(CH)	Secondary Schools	<u> </u> -	Al distance	
Kerry Coe (KC)	Head Teacher Primary Schools		No other interests	✓
Joanna Bailey	Principal Stockton	-	Governor at Thornaby Academy	✓
(JB)	Sixth Form College		Governor at The Grangefield Academy	•
(02)			Campus Stockton Teaching Alliance	
			14-19 Partnership,	
			Campus Stockton CPD Group	
			Campus Stockton R&D Group Secondary Heads Crown	
Vacancy	SBC Chief Advisor	-	Secondary Heads Group	
Vacancy	School			
	Effectiveness			
Jean Golightly	Executive Nurse	Hartlepool &	South Tees CCG (Exec Nurse)	Apols
(JG)		Stockton Clinical	Teeswide Safeguarding Adults Board	
		Commissioning	Member of NHSE Quality Surveillance Croup mosting	
Trina Holcroft	Designated Nurse,	Group (CCG)	Group meeting	✓
(TH)	Safeguarding Children			•
()	& LAC			
Kailash Agrawal	Designated Doctor		Middlesbrough LSCB	✓
(KA)	Advisor to the Board		Redcar and Cleveland LSCB	
			NT&HFT Safeguarding Steering Group	
			Teesside Designated Doctors Group (Ch.)	
TBC	Deputy Director of	NHS England	Tees Strategic VEMT Group	Apols
	Nursing, Quality and	(Cumbria & North	Middlesbrough LSCB	
	Safety	East)	Redcar and Cleveland LSCB	
			Hartlepool LSCB	
			Durham LSCB Darlington LSCB	
			Darlington LSCB Teeswide Safeguarding Adults Board	
			Durham Safeguarding Adults Board	
			Darlington Safeguarding Adults Board	
			NHS England CSE Sub-Group	
Lindasy	Drofossional Land	North Topo 9	NHS England Regional Safeguarding Forum	./
Lindsey Robertson	Professional Lead Nurse, Out of Hospital	North Tees & Hartlepool NHS		•
(LR)	Care	Foundation Trust		
\· -/		(NTHFT)		
			•	

SLSCB Members	Title	Representing	Other Interests: Stockton-on-Tees or Tees Valley Partnerships, Boards, Group etc. (Ch. denotes Chair, VCh Vice-Chair)	× Apols
Elizabeth Moody (EM)	Executive Director of Nursing and Govern- ance	Tees, Esk & Wear Valley NHS Foundation Trust (TEWV)	 Teeswide Adult Safeguarding Board North Yorkshire Adult Safeguarding Board North Yorkshire Children's Safeguarding Board (Member of other safeguarding boards but send deputies on regular basis) 	Apols
Julie Allan (JA)	Head of Cleveland Area – National Proba- tion Service (NE)	Probation Services	Middlesbrough LSCB Redcar and Cleveland LSCB Hartlepool LSCB South Tees YOS Stockton YOS Hartlepool YOS YOS Management Board LCJB Local Public Service Board Teeswide Safeguarding Adults Board Tees Adult Health and Wellbeing Board Strategic DV and Abuse Strategic Group Contest Gold Stockton Scanning and Challenge ETE/OSE Board Tees Strategic VEMT Group	
Barbara Gill (BG)	Head of Offender Services - Community Rehabilitation Company		- 1000 Gradiogio VEIII Group	Apols
Julie McNaughton (JM)	Accommodation Contracts Manager	Thirteen / Housing Provider	 Tees Valley Choice Based Lettings Steering Group My Sisters Place – Board North East Homelessness Group 	Apols
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 	Apols

Guests:		
Ian Coxon (IC)	SBC - Head of Transactional Services	Participating Observer
Rhona Bollands (RB)	SBC - Service Manager, Assessment & Fieldwork	For item 6 (a) & (b)
Steven Hume (SH)	SBC - Community Safety & Security Manager	For item 3
Jo Moore (JMo)	SBC - Resource Manager, Children and Families	For item 5
Fiona Ranson (FR)	SBC - Education Development Advisor, Inclusion	For item 4
Joanne Gamble (JGa)	TEWV - Named Nurse for Safeguarding Children	Sub for Elizabeth Moody
David Egglestone (DE)	Probation – CRC Lead Manager	Sub for Barbara Gill

Minute-Taker:	Gary Woods - SLSCB Business Support Officer
Meeting Quorate:	Yes
Declarations of Interest:	None

Ref No. 1	Attendance, Apologies & Quoracy
Discussion	JGa was in attendance as the substitute for EM . MG was welcomed as a new Board member for SBC in his role as Head of Early Help, Partnership and Planning.
Agreement/ Outcome	Noted.

Ref No. 2	Action Log
Discussion	CM advised that, due to PB having a recent period of sickness absence, the Action Log had not been updated since the last Board meeting. The Action Log will be updated to reflect any developments discussed at this meeting, and would be available for the next Board meeting in December 2015.
Agreement/ Outcome	Noted, with an updated Action Log to be ready for the next Board meeting in December 2015.

Ref No. 3 Prevent / Channel Panels Overview Discussion SH gave a presentation to Board members on Prevent (PowerPoint slides to be emailed to Board members following this meeting), with reference also made to a circulated Prevent Duty briefing paper. Recent referrals around Prevent have been submitted to the Partnership in Stockton and were progressed through the Channel Panel process. Although no further action was required in these cases, it was viewed to be a positive step that referrals were being made in the first place as this demonstrates increasing awareness around this issue. The Channel Panels involve key individuals who have worked with the young person or adult, with Gordon Bache (Channel Practitioner (North East Counter Terrorism Unit (NECTU)), Cleveland Police) also present. The key message around Prevent was about the need for agencies to communicate together, and to confirm that a Tees-wide Prevent information sharing protocol and referral process is currently being finalised to raise awareness of procedures and relevant contacts. In addition, a WRAP (Workshop to Raise Awareness of Prevent) 3 Training session took place on the 10th November 2015, £10,000 has been allocated to support implementation of the duty in Local Authorities, and a programme for working in schools is well established in Stockton. It was also noted that there has been a strong commitment across Tees to this issue over a number of years, and not just in light of recent national incidents involving radicalisation. **AM** reported that a discussion had taken place at a Governing Body meeting on the 18th November 2015 around the issue of 'Britishness'/values, and queried if the Prevent agenda was relevant to all school children as recent events could have a large impact on how they feel about the world – it was felt it should not just target certain groups, but instead be mindful of ALL children. SH added that the biggest issue in question here is around community cohesion and how groups are perceived by others – the challenge was to put things in place to aid cohesion. AS furthered that Prevent was targeted at extremist views, not specific groups, and AT echoed this approach in light of the Channel training he had recently completed. LC queried if the Prevent information is available to teachers within early year's provision, and **JB** advised that post-16 education establishments were unaware of these Prevent processes – SH gave assurance that this would be addressed, with these providers to be linked into future awareness-raising. KA urged the need to liaise appropriately with families, and felt this needed to be an open, supported programme as some people may be concerned about the ramifications if they report suspicious behaviour. TH added that NHS England have sent out a competency framework regarding WRAP training, and would con-

	tact SH in relation to this.			
	CM thanked SH for an informative presentation that had provoked good discussion around Prevent. Board members were also reminded of the Channel e-learning package (previously advertised via a SLSCB Email Bulletin in September 2015), and encouraged to complete it themselves, and disseminate the website link to other relevant staff.			
Agreement/ Outcome		nd future developments around Prevent noted, with furt ration sharing identified.	her awareness	-raising
Log Ref	Mtg Date	Action Required	Person Responsible	Due Date
72/11/1516	19.11.15	Email the Prevent presentation PowerPoint slides to Board members following this meeting.	Business Unit	20.11.15
73/11/1516	19.11.15	Contact SH regarding the NHS England competency framework in relation to WRAP training.	TH	30.11.15

Ref No. **4**Discussion

Provision in Stockton Schools for the PREVENT DUTY

FR gave a presentation around Prevent (PowerPoint slides to be emailed to Board members following this meeting) in order to demonstrate how schools are being supported to address this issue. This was supplemented by a circulated report describing the work to support provision in Stockton schools for the Prevent Duty.

The Prevent Duty became statutory for schools and local authorities in July 2015, and the Local Authority has a statutory duty to demonstrate 'due regard' aligned to Prevent Duty 2015 (monitoring in relation to demonstrating 'due regard' will be by the Home Office and Ofsted). Guidance identifies the following relevant areas:

- Partnership Work
- Risk Assessment
- Action Plan
- Staff Training
- Collaboration between areas

Guidance from the DfE for schools (monitoring in relation to demonstrating 'due regard' will be by Ofsted) identifies the following areas for development:

- Risk Assessment
- Working in Partnership
- Staff Training
- IT Policies
- Building children's resilience to radicalisation
- Safeguarding

In terms of staff training, a WRAP for Education Train-the-Trainer programme has been developed, and the WRAP 3 training has been amended to include additional information for schools (this has been delivered to more than a third of primary and secondary schools in Stockton). A resource for primary school teachers which promotes digital literacy in relation to Prevent, similar to that of the secondary school resource, is also proposed. Teaching challenging/controversial issues CPD will be offered to primary and secondary schools during Autumn 2015 and Spring Term 2016 – this will support teachers to develop strategies and approaches, which will allow them to explore controversial issues like extremism.

A protocol for referrals to the Channel Panel is currently being worked on via the Tees LSCBs Procedures Group (TPG), and would be presented to LSCBs for approval once agreed. Involvement with the voluntary sector will also be looked at, with the aim to give confidence to young people to discuss these issues. In the meantime, the Home Office e-

	AS suggest guarding at The need they are do CM thanks within Stood	ourse can be made available through SR . Sted that a theme evident within this presentation, which areas, is the need to be aware of what children are look for parents to have conversations with their children and oing should be emphasised fully. Find FR for a very informative presentation showcasing the ckton schools. SH added that the committed and pro-a in Stockton towards the Prevent Duty had also been high News.	ing at on the intended take an intered and intered are work around ctive approach	ernet. est in what Prevent by Educa-		
Agreement/ Outcome	Provision for the Prevent Duty in Stockton schools noted, along with future proposals to continue to demonstrate 'due regard'.					
Log Ref	Mtg Date					
74/11/1516	19.11.15	Email the Prevent (provision in Stockton schools) presentation PowerPoint slides to Board members following this meeting.	Business Unit	20.11.15		

Ref No. 5 Residential Children's Homes in Stockton Discussion With reference to the circulated External Providers of Residential Children's Homes in Stockton report, **JMo** gave an overview of information regarding such homes that are not operated and managed by Stockton-on-Tees Borough Council, the judgements made by Ofsted from the inspection period 2014/15 to date (links to Ofsted reports included within the report), and the monitoring arrangements in place for these homes from external placing authorities. Currently there are two external providers of Children's Homes in Stockton which makes in total three Children's Homes. Two of those homes are managed by 'Spark of Genius' and are part of a joint venture with Stockton Council. The third Children's Home is Huntercombe House, which is owned and managed by Atlas Healthcare Ltd. Fairview House (Spark of Genius) – Currently there are five young people residing at Fairview aged between 12 and 15 years. One of the young people is placed from outside of Stockton. Ofsted Full Inspection for 2015/16 was 'good' (date of inspection to be added to the report). Red Plains House (Spark of Genius) - Currently there are three young people aged between 16 and 18 residing at Red Plains. There are no children placed at Red Plains from outside of Stockton. Ofsted Full Inspection for 2015/16 was 'requires improvement' (9th June 2015). Had an interim inspection yesterday (18th November 2015) with an outcome of 'improved effectiveness' (to be added to the 'Provider' table of report). Huntercombe House (Atlas Healthcare Ltd) – Currently nine young people access the service at Huntercombe House and are aged between 5 and 17 years. Four are placed from outside of Stockton. Ofsted Full Inspection for 2015/16 was 'inadequate' (18th August 2015), and then 'requires improvement' (14th October 2015). The initial 'inadequate' outcome reflected a lack of management and leadership, as well as issues around recruitment. With regards to Red Plains House, AM noted that the Ofsted outcome gave assurance that children were being kept safe, and that issues regarding the number of contacts with the Police in relation to this home should not be seen as a negative, but instead is a reflection of the Police making the safeguarding of children a priority – this should be commended. AS added that monthly information sharing (non-personalised) now takes place between the Police and Children's Homes – Board members agreed that it would be useful for this information to also come to future Board meetings, though it would need to be checked

	and verified first prior to being shared. JMo also noted the ongoing work with the Police regarding responses from Children's Homes which could also be shared at this Board.			
	JH advised that a number of children are placed in foster care from outside of the borough; monitoring of these placements is via their Social Worker/IRO and Link Worker.			
		ed JMo for this report, and reminded Board members of information relating to young people within Stockton when the stockton with the st		
Agreement/ Outcome	Report not	ted.		
Log Ref	Mtg Date	Action Required	Person Responsible	Due Date
75/11/1516	19.11.15	External Providers of Residential Children's Homes in Stockton report to be updated to reflect recent Ofsted inspections at Fairview House and Red Plains House.	JMo	20.11.15
76/11/1516	19.11.15	Circulate the updated External Providers of Residential Children's Homes in Stockton report to Board	Business Unit	20.11.15

members.

Ref No. 6	Children's Social Care Audits
Discussion	
Discussion	a) Children's Social Care Audits RB gave an overview of the circulated Children's Social Care Case File Audit – Quarter 1 Monitoring Report, providing an overview and analysis of the findings from the Children's Social Care case file audits completed in April – June 2015. Social Work Teams (Assessment Team (North and South), Fieldwork Teams (North and South), Permanence Teams 1 and 2, Complex Needs Social Work Team, Sensory Loss Team), Leaving Care Team, Family Support Teams, and Review Unit have case files audited as part of this process.
	Of the 19 completed audits (11 of which were CiN cases, 5 were LAC, 2 were Leaving Care, and 1 was Family Support Team), 12 had an overall grading of 'Good' – 63%, 6 had an overall grading of 'Requires Improvement' – 32%, and 1 had an overall grading of 'Inadequate' – 5%. One of the 'Requires Improvement' audits was initially graded as 'inadequate' – the grading was changed by the auditors following the manager's right to reply. Analysis of the completed audits demonstrated that:
	 The basic tasks required on a case are generally taking place (e.g. children are being seen – often alone), case recording is being completed, chronologies are present and supervision is taking place. Those cases that required immediate follow-up were those with a lack of evidence that these basic tasks were taking place. The introduction of the management trackers (child seen, chronology, supervision) may have helped with this. Quality of tasks may need to be the focus of future improvements in the service (e.g. recording and supervision could be more reflective and challenging). Before this can
	 be achieved, the workforce needs to have a clear view as to what reflection and challenge 'looks like' so that it can be consistently incorporated into practice and audited. Some audits highlighted that case notes and/or supervision were reflective and challenging, so the skills to do this exist within the department.
	The Children and Young People's Management Team (CYPMT) has accepted recommendations for implementation, including good practice examples incorporating case notes and

supervisions to be identified by Service Managers and added to the Good Practice folder, and the audit template to be amended to incorporate a section for the auditors to highlight any specific examples of good practice (e.g. assessment documents, care plans that can

be anonymised and added to the Good Practice folder). Further audits for the remainder of 2015 have also been agreed, including a December 2015 CSE themed audit.

LC asked if report writing training was available for staff, and whether the sharing of good practice was monitored/recorded. **JH** felt that staff, as professionally qualified people, needed to take responsibility for their own development. In addition, a recent team check showed evidence of good practice being shared, with a healthy element of competition now being seen across Social Care teams. Regarding the outcomes of the audits, caution was expressed as to whether those cases judged 'good' would be Ofsted 'good'. **JB** noted the specific lack of evidence of the child's wishes/feelings within some audits – this was particularly acknowledged as being unacceptable, and should therefore be addressed directly through staff supervisions.

b) Children's Social Care CSE Audits

RB presented the circulated Themed Child Sexual Exploitation (CSE) Audit – April 2015, providing the findings of a second themed CSE case file audit, and comparing this data with the information which was previously provided following an earlier themed CSE case file audit completed in October 2014 (presented to the SLSCB at the May 2015 meeting).

A total of 8 randomly selected cases were audited – this equated to 32% of the total number of children featured on the Vulnerable Exploited Missing Trafficked (VEMT) list at that time (7 of the 8 children were active cases to CSC, with the remaining child being active to the Family Support Team following a 'step down' from the Assessment Teams). Of the 8 completed audits, 4 had an overall grading of 'Good', and 4 had an overall grading of 'Requires Improvement' – each young person was being safeguarded. Analysis of the completed audits demonstrated that:

- The results from the CSE audits undertaken in April 2015 do evidence an improvement in practice, with no child deemed to be unsafe.
- A number of the recommendations from the previous CSE audit report dated May 2015 were still to be implemented at the time that the second set of themed audits were undertaken (these have since all been implemented).
- In respect of the 4 audits that 'Require Improvement', common themes could be identified. Supervisions were not held consistently within timescales, case recording indicated that children were not always seen in line with procedures, and there was a lack of evidence that Multi-Agency Planning Meetings were held regularly.
- The significant difference between those audits deemed as 'Good' and those that 'Require Improvement' was the standard of recording on the RAISE system. In the 'Good' audits, there was clear and focused recording in respect of Risk Assessments, Risk Management Plans and Return Interviews. There were up-to-date chronologies and some reflective supervisions with evidence of 1:1 work with the child.
- In comparison to the CSE audits undertaken in October 2014, there appears to be a
 better understanding in terms of the VEMT procedures generally. The Risk Assessment tool now held electronically was consistently used, with evidence of a greater understanding for the need for a Risk Management Plan to be completed.
- In terms of the Missing from Home procedure, there does remain a recording issue with an urgent need to record consistently when a young person has been offered and/or refused a Return Interview.
- There was no evidence to indicate that young people had been made subject to VEMT inappropriately.
- There was evidence to indicate that staff are more confident in engaging children and young people in talking about risk-taking behaviours.
- The audits provided evidence that, although there was more robust scrutiny and management oversight of those children subject of VEMT, there did remain a lack of consistency across all teams.

Action/recommendations to enhance the sharing of good practice from audits, SCRs, in-

	formation t	from the VEMT Practitioners Group (VPG), and the reg	ular scrutiny of	vouna
	people who are subject of VEMT, was also noted.			
	With reference to the Social Care audits presented at this meeting, JH questioned why other agencies were not submitting similar reports so Board members can consider quality of practice across all partners. Were other agencies carrying out such audits, and if so, why are they not being presented to Board? A rolling programme around the reporting of quality of practice to Board was put together in the past, and following recent TEWV audits that were considered at the Board meeting in July 2015, agencies were asked to bring their reports too, particularly those that are submitted to their governance. CM asked Board members to give this issue some consideration – PB to create a reporting schedule. CM thanked RB for this and the previous audit report.			
Agreement/	Children's Social Care audit reports noted. A reporting schedule to be created identifying			
Outcome	when all partner agencies needed to submit quality of practice audits.			
Log Ref	Mtg Date	Action Required	Person	Due Date
			Responsible	
77/11/1516	19.11.15	Create a reporting schedule for the submission of	PB	17.12.15
		quality of practice audits by all partner agencies to		
		the SLSCB.		

Ref No. 7	Performance Data Q2 (July – September)
Discussion	SW provided an overview of the circulated performance data for Q2 (July – September 2015), noting the different format to the report to this quarter following the discussion and group work at the last Board meeting regarding prioritisation of key risk indicators and development of a 'dashboard' for summarising presentation of the data set. The usual analysis/commentary of the data was supplemented by a number of appendices including:
	 a high level Risk Indicator Summary, indicating 'at a glance' those areas where performance is indicating the greater risks to effective safeguarding practice. a list of all the data set items with Direction of Travel indicators and a RAG rating, based on performance against an agreed target or other benchmark (where available). a commentary on key issues arising from analysis of the full data set (this element is similar to the quarterly reports previously presented to Board). the data set itself, showing the position at Q2, along with the 2014-15 outturn position for Stockton-on-Tees, and reference to benchmark data for England and the NE Region for 2013-14 (with some reference to the recently published 2014-15 data). Results from the group work at the last Board meeting in October 2015 were also included, and Board members were advised that appendices 1) and 2) above were being presented on a trial basis at this stage to test out whether this approach is helpful to the Board and should be incorporated as part of the agreed performance reporting for the future.
	 CAFs - The overall pattern of agency participation remains the same. There was a noticeable increase from Children's Centres in September. Health participation has not increased. Lot of activity regarding Early Help – can expect to see the level of involvement increasing here. Referral Activity - As was noted also in the Q1 report to Board, the number of referrals proceeding to single assessment is down slightly from last year (931 at end of Q2, compared to 1082 last year). This is reflected in the high proportion of referrals resulting in NFA (No Further Action) decisions. This high rate of NFAs continues to raise questions regarding understanding and application of thresholds, and has led to further work within SBC Social Care to look at how these NFA cases are picked up through

- Early Help arrangements, and diverted from the count of referrals to Social Care.
- <u>Timeliness of decision making</u> Performance continues to be positive in the timeliness of processes for the management of cases (i.e. timescales for assessments; ICPCs; and reviews), meeting targets.
- <u>Strategy meetings / Section 47 Enquiries / ICPCs (Initial Child Protection Conferences)</u>
 A reduction in activity leading to child protection cases was reported at Q1, and this trend has continued during Q2. The recent reducing trend is a positive direction of travel, but rates still remain relatively high.
- Workforce information Q2 data indicates some shift in the Council's Social Care workforce, with a slight increase in vacancy and turnover rates. Sickness absence remains stable and within the Council's overall target rate. Social Worker caseloads have been maintained at an average of 22, in line with recent quarters. Also, workforce data for NTHFT suggests some increase in turnover rates for Health Visitors and School Nurses. Midwife caseloads for CIN and CP cases appear to have increased.
- Rate of A&E attendance due to injuries to children The Public Health team are continuing their work on childhood safety, including analysis of this A&E data alongside other sources of information. A local action plan is to be developed based on their analysis of key themes for Stockton-on-Tees Council; the Board may wish to discuss their final report and action plan when it is available.
- Overall rate of children in need (CIN) The trend seen during Q1 has continued during Q2, with the rate of all children in need (including those on CP plans and those who are LAC) at the same level at the end of Q2 as at the end of Q1. Within that overall number though, the rate of children subject to a CP plan has continued to reduce slightly (285 CP plans, a rate of 67.4 per 10,000, at the end of September the lowest for some time). The rate of Looked After Children (LAC) has continued to be stable, as it has for the past year, at 89 per 10,000 (376 LAC at the end of Q2).
- Child Protection Plans second or subsequent plans; and duration of plans Although
 there has been some improvement during the Q2 period, the rate of CP plans lasting
 over two years remains higher than last year and well outside target. The proportion of
 second or subsequent plans within two years has moved closer to target, with there being no such cases occurring during the Q2 period, but is not improving yet on last
 year's performance.

In light of the Q2 analysis, **SW** advised that partner agencies needed to consider whether they should ask whether the Board were doing enough to support/develop Early Help, and were confident that thresholds were clear and consistently applied, and understood why the rate of CP plans was reducing. **JH** and **KA** added that work around NFA (after assessment) was essential, particularly as this issue has a large impact upon resources.

Discussion followed around the format of the performance data, and the form that this should be presented at future Board meetings. Board members acknowledged the merits of the 'at-a-glance' summary, but also felt that one of the strengths of this Board was the narrative behind the headline statistics. **JN** and **MG** emphasised the need for all agencies to understand the information and identify key issues, regardless of how it was presented – this would enhance the Board's ability to make a difference and articulate its effectiveness.

In addition, any consideration of the data and the way it is presented needed to be mindful of the ongoing developments around the proposed Tees Performance Management Framework. Although questions still remain regarding how this framework will be resourced and who will lead on it (who will collect the data; who will interpret the data), the intention is to have this in place by the 1st April 2016. **AS** advised that good work was coming out of the Tees discussions, with priority indicators also being identified which this Board could take on and tweak if necessary, though **CM** urged caution around the tight timeline, and felt it was important that robust performance processes are maintained in Stockton if the Tees framework is not in place by the intended date. **SW** agreed to liaise with **MG** regarding developments around the Tees framework and how this links in with Stockton performance.

Agreement/ Outcome		Performance data for Q2, and the presentation of this, noted and discussed. Ongoing developments around the Tees Performance Management Framework also noted.		
Log Ref	Mtg Date	Action Required	Person Responsible	Due Date
78/11/1516	19.11.15	Discuss future Stockton performance priorities and presentation of data with MG , mindful of the ongoing developments of the Tees Performance Management Framework.	MG	17.12.15

Ref No. 8	Too Doubermans Management Example of Discot
Discussion	Tees Performance Management Framework Project With reference to the circulated draft set of proposals for the new Tees Performance Management Framework from Mike Batty (Consultant commissioned to develop the proposed framework), CM reminded partner agencies of how this concept arose, the extensive work undertaken to put these proposed arrangements together, and that the ultimate intention was to have a Tees framework in place by the 1 st April 2016. Board members were therefore actively encouraged to provide feedback on these proposals directly to Mike Batty by the requested deadline (30 th November 2015).
	The intention is for the Tees framework proposals to go to the LSCB Chairs/DCS meeting in January 2016 for ultimate determination (as it is likely that a combination of the LA and CCG are going to be the final underwriters). JH felt that should any issues around the funding of this framework be raised at next week's DCS meeting, partners should be invited to the LSCB Chairs/DCS meeting in January 2016 to address how the framework is resourced.
	SW noted the impressive scope of the Tees proposals, but felt this may prove a hindrance. One potential future arrangement would be a Tees-wide analysis of an agreed data-set, with subsequent work undertaken by a Stockton practice group, thereby ensuring that performance is linked with practice.
Agreement/ Outcome	Draft proposals for the new Tees Performance Management Framework noted, with Board members encouraged to provide feedback to Mike Batty by the 30 th November 2015.

Ref No. 9	Half Year Multi Agency Training Report: Attendance & Evaluation Report (April – September 2015)
Discussion	The circulated HSCB & SLSCB Training & Development Group: Six Monthly Update Report (April – September 2015/2016) was noted, giving a background to the group, its work since its creation, and an update on the training programme for 2015/2016. Also acknowledged were details of the successful Graded Care Profile 2 (GCP2) bid, and data on course attendance (including e-learning) and feedback. JH advised that issues around capacity and the sharing of responsibility between Hartle-pool and Stockton had been raised – this will be taken up with LR (Chair of the Training & Development Group), and any developments will be shared with the SLSCB.
Agreement/ Outcome	HSCB & SLSCB Training & Development Group: Six Monthly Update Report (April – September 2015/2016) noted. Issues raised in relation to the group's capacity and the sharing of responsibility to be discussed and shared with the Board at a future meeting.

Ref No. 10	Scoping Update for Thematic Improvement Areas from Lead Board Members
Discussion	a) Managing parents / carers challenging behaviours / culture of optimism & Involvement of all adults living in the household
	In the absence of CH , this item was deferred until the Board meeting in December 2015.
	Due to the ongoing deferment of this item, CM confirmed that he would be writing to CH

and requesting that she urgently addresses this issue, as well as seeking clarity over the representation of secondary schools on this Board.

b) Neglect: awareness, identification and response

LR presented the circulated scoping document for the thematic improvement area of Neglect, and how the Graded Care Profile 2 (GCP2) tool would be used to improve the early identification of, and response to, neglect. There are four strategic objectives within the Neglect Strategy, and number one and four specifically relate to the Board around assurance rather than delivery.

LR felt it was difficult for people to define neglect, and clear priorities needed to be identified which may be different between Hartlepool and Stockton – demographics may dictate this. LR, PB and MG will meet to review the Neglect Strategy Action Plan, and will refine the current version in order to make it more Stockton-specific. The Board's strategic commitment to the Neglect Strategy was re-affirmed, and Board members were asked to ensure practitioners know what the strategy is (PB to re-send the strategy to Board members via the Board Email Bulletin).

c) Voice of the Child

JB provided a verbal update around the Voice of the Child (VoC) thematic work following a third meeting of the VoC group. Those who responded to the recent VoC questionnaire were thanked, though it was noted that no responses had been received from Housing, CAMHS, or the Voluntary Sector, and the only response from the Health agencies came from the CCG (which included no reference to CAF).

The lack of direct representation on the Board for special schools and the Virtual School was also highlighted. An update report around the VoC thematic work will be given at the next Board meeting in December 2015.

Agreement/ Outcome Updates noted, and subsequent actions from each thematic area identified.

Outcome		·		
Log Ref	Mtg Date	Action Required	Person Responsible	Due Date
79/11/1516	19.11.15	It was agreed that CM would send a letter to CH regarding ongoing deferment of the Managing parents / carers challenging behaviours / culture of optimism & Involvement of all adults living in the household scoping document, and also clarify the Board's secondary school representation.	СМ/РВ	30.11.15
80/11/1516	19.11.15	Review the Neglect Strategy Action Plan and refine the current version to make it Stockton-specific.	LR/PB/MG	17.12.15
81/11/1516	19.11.15	Ensure practitioners have knowledge of the Neglect Strategy.	ALL	17.12.15
82/11/1516	19.11.15	VoC thematic work update to be given at the next Board meeting in December 2015.	JB	17.12.15

Ref No. 11	Multi Agency Audits
Discussion	JH questioned what arrangements were in place post-2015 in terms of multi-agency audits, particularly following the completion of the ongoing thematic improvement work. PB was in the process of gathering information across Tees of such audits – future arrangements to be considered at the next Board meeting in December 2015.
	a) Inspection Dates and Preparation JH referred to the circulated Single Inspection Framework (SIF) paper, detailing changes to the executive summary which will be moved to the front page of the report so that there is ready access to the detail that underpins the overall inspection judgement. As a conse-

Log Ref	Mtg Date	Action Required	Person Responsible	Due Date
Agreement/ Outcome	Further discussions of both multi-agency audit arrangements and inspection preparation to be scheduled for the next Board meeting in December 2015.			
	PB noted her attendance with CM at the recent LSCB Chairs Conference (information will be sent to Board members), and highlighted some of the other Board structures which are made up of strategic leads who meet on a regular basis.			
	SW advised that, in light of the expected impending inspection, a concentrated discussion may be required around children on CP plans, and understanding the reasons for the changing numbers, as well as knowledge around domestic abuse and parental substance abuse – discussion to be timetabled into the December 2015 Board meeting. In addition, MG agreed to provide a briefing note for Board members around the issue of parental substance abuse following this meeting, which was being picked up with Public Health col-			
	A list of co	e box that summarises the judgement in a couple of semmon weaknesses found across local authorities whice in their SIF inspections was included, along with the 12016.	h have been jud	dged to be

Ref No. 12	Performance Sub-Group / LIPSG Rationalisation
Discussion	A discussion had taken place at last week's Learning & Improving Practice Sub-Group (LIPSG) meeting regarding the potential rationalisation of the Performance Sub-Group and the LIPSG. AS reported that LIPSG members felt it would be difficult to merge these groups due to resource/time constraints, but proposed some form of monitoring/evaluation or multi-agency audit sub-group as an alternative to the Performance Sub-Group (if it is felt the Performance Sub-Group has fulfilled its objectives now the data-set was established) once the anticipated Tees Performance Management Framework is in operation. SW leaves his post in December 2015, so the position of Chair of the Performance Sub-Group would need to be filled – MG will be picking this up in the interim, including the work around the presentation of the performance data discussed earlier (see item 7).
Agreement/ Outcome	Discussion noted.

Ref No. 13	Partners Operational Safeguarding Issues & Staff Engagement Sessions
Discussion	Local Authority JH reported that Children's Social Care now has unallocated cases involving 17 families, and that there were 10 Social Worker vacancies due to the loss of experienced staff to agencies. The use of the caseload management protection system, along with Sunderland paying more following their recent Ofsted inspection, were also contributing to this pressure. Work is ongoing within the Council in terms of recruitment and retention, and AM has discussed this issue with the HR department and the Leader of the Council.
	In relation to the recent Staff Drop-Ins, 87 people had attended these sessions, but very few were from non-SBC agencies despite non-SBC venues being used. As such, an audit trail of how Board members are cascading information on the forthcoming Staff Engagement Sessions may be required, and all agencies were asked to ensure appropriate mechanisms are in place for effective dissemination of information to their staff at all levels.
	JH also noted a recommendation in the HMIC consultation document that ch

	offend will always be dealt with as though this is a safeguarding concern. It was felt that this is not appropriate, and would have significant impact on all agencies – AS agreed to feed this concern back on behalf of the SLSCB.			
Agreement/ Outcome		oted. Concern expressed over the cascading of Board to a recommendation within a HMIC consultation docur		staff, and
Log Ref	Mtg Date	Action Required	Person Responsible	Due Date
84/11/1516	19.11.15	Relay the concern expressed by the SLSCB in relation to the recommendation in the HMIC consultation document that children who offend will always be dealt with as though this is a safeguarding concern – this would have significant impact on all agencies.	AS	17.12.15

Ref No. 14	15.10.15 Board Minutes for Accuracy
Discussion	Minutes of the Board meeting held on the 15 th October 2015 were agreed as a true record.
Agreement/ Outcome	The minutes of the Board meeting held on the 15 th October 2015 be recorded as ratified.

Ref No. 15	Tees LSCBs VEMT Strategic Group
Discussion	The Tees LSCBs Strategic VEMT Group Annual Report has been prepared, and subject to some minor amendments, will be presented to the SLSCB in December 2015.
	AS noted two operational cases in Stockton which have now been closed. One involved an educational establishment where awareness-raising work around responding to CSE has subsequently taken place. There was insufficient evidence for a prosecution, but the case can be re-opened should the victim come forward with further information. The other case involved issues around young people attending parties – a number of suspects were spoken to, and one was charged and subsequently convicted.
	Also highlighted were two recent episodes of children being groomed online, with the perpetrators using false identities – both victims were found, but sexual activity had already taken place. Online grooming was emerging as one of the biggest risks to children, something which AM felt should be addressed on a national level with internet providers.
	PB queried if any decisions had been made regarding who was going to Chair the Teeswide eSafety Group (discussed at the last Board meeting in November 2015) – AS advised that no discussions had taken place in relation to the Chair of this group, but the coordination of the group was considered. As such, further debate may still be required.
Agreement/ Outcome	Updates noted, with the Tees LSCBs Strategic VEMT Group Annual Report to be presented to the SLSCB in December 2015. Confirmation over who will be Chair of the Teeswide eSafety Group to still be decided.

Ref No. 16	SLSCB VEMT Sub-Group
Discussion	The circulated VEMT Sub-Group Chairs Update Report for SLSCB provided by SM was noted. There continues to be good attendance and positive contributions from all agencies involved, though as previously discussed, there is no current representation from any Health agency. An operational update indicated that 23 young people were currently subject to VEMT, with a breakdown of the gender, age and reason for being subject to VEMT included. Recent issues considered were highlighted:
	 CSE Task and Finish Review – update prepared. VPG Terms of Reference – review completed.

	 Families and Communities against CSE (FCASE) Evaluation Report – discussion and consideration of implications for current structures and processes. Review of Missing/Return Interview arrangements underway. Issues to be considered at future meetings include a Police intelligence 'roadshow', and the Ofsted Thematic Report Benchmarking Exercise (progress update).
Agreement/ Outcome	Updates noted.

Ref No. 17	Tees CDOP
Discussion	No report available this month.
	KA noted that some Tees CDOP money will be carried forward into 2016-2017, but each Tees LSCB will be asked to provide additional support of £3,000. A formal request for this will need to be submitted to the SLSCB for consideration at a future meeting.
Agreement/ Outcome	Noted, with any request for 2016-2017 funding to be formally submitted to the SLSCB for consideration at a future Board meeting.

Ref No. 18	SLSCB LIPSG
Discussion	No report available this month – next meeting scheduled for the 10 th December 2015.
Agreement/ Outcome	Noted.

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Ref No. 19	Tees LSCBs Procedures Group
Discussion	The circulated Tees LSCBs Procedures Group (TPG) Chairs Update Report for SLSCB provided by SM was noted. TPG continues to be a well-attended group, with all members making a positive contribution to the meetings, and work progressing outside the meetings. Work completed included Case Recording Principles [Guidance] (April 2015), Allegations Management [3.8.3] (May 2015), Tees LSCBs Information Sharing Protocol (June 2015), Complaints by Service Users – Stage 2 Protocol [1.12] (July 2015), Child Protection Review Conference [1.10] (July 2015) - incorporating procedure on dual process/protection, Discontinuing the Child Protection Plan [1.11] (July 2015), Female Genital Mutilation [2.19] (July 2015), and Making Requests for Police Information [Guidance] (November 2015). Current work underway was also noted:
	 Child Protection Plan and Core Group Procedure – agreed by TPG. Currently with LSCBs for consideration and sign off. Making a Referral to Children's Social Care/Tees SAFER Referral Tool – work underway to revise current procedures and amend referral tool. Due for completion December 2015. Prevent/Radicalisation Procedure. Due for completion December 2015.
	 Female Genital Mutilation – update current procedures to reflect recent Home Office guidance. Due for completion December 2015.
	 Interface Protocol between Safeguarding Children and Safeguarding Adults. Due for completion December 2015.
	 Police Guidance for Making Domestic Abuse Referrals to Children's Social Care – further discussion taken place regarding impact of recent developments (e.g. Operation Encompass). Multi-agency group established to develop Tees-wide guidance. Due for completion February 2016.
	 Sudden Death of a Baby – work being undertaken by CDOP. Concern within TPG regarding lack of progress. This is being followed-up currently.

Agreement/	Updates noted.
Outcome	

Ref No. 20	Any Other Business.
Discussion	TH advised that, with immediate effect, all historical child sexual abuse medicals will be undertaken by South Tees Hospitals NHS Foundation Trust (STHFT). In addition, a letter will soon be sent out regarding the Rapid Response function within Tees CDOP, and information has been disseminated to provider trusts in relation to the mandatory reporting of Female Genital Mutilation (FGM), with a view to flag records of those considered to be at risk.
Agreement/ Outcome	Noted.