

At a meeting of the Hounslow Local Safeguarding Children Board held on Monday, 14 September 2015 at 3:00 pm at Committee Room 1, Civic Centre, Lampton Road, Hounslow.

Present:

Donald McPhail (Chair)
Jacqui McShannon (Vice Chair)

Alan Adams, Kate Allen, Kylee Brennan, DCI Mark Broom, Nicky Brownjohn, Tom Bruce, Permjit Chadha, Chris Domeney, Mary Harpley, Julie Hulls, Janet Johnson, Shan Jones, Monica King, Steve Liddicott, Michael Marks, Melissa Neilson-Rai, Dr Nimala Sellathurai, Roger Shortt, Staley, Alison Stewart-Ross and Caroline Wright.

Jennifer Hopper

Ann-Marie Brosnan (specialist nurse – safeguarding children) attended with Kate Allen

22. Apologies for absence

Apologies were received from Debra Kane, Lucy Connolly, Steve Davis, Joanna Parkinson, Margaret O'Connor, Linda Kim-Newby, Jonathan Webster

23. Minutes of the last meeting

The minutes of the meeting held on 22 June 2015 were agreed with the following amendments:

Page 6

Item 313 - Change to 'Kylee Brennan reported that there is a joint needs assessment for substance misuse.'

Page 9 To amend:

'Janet Johnson reported that there had been good success in the pilot run in some schools.'

To read

'Janet Johnson reported that there had been good success in the pilot run with social workers.'

Page 10

Item 15 Change 'auctioned' in the last line to 'acted on'.

Item 19 Remove the following:

'Shan Jones would also be leaving and was given thanks for her contribution to the work of the board.'

24. Matters arising

Members of the HSCB were asked to consider three possible logos for use on the HSCB website and indicate which they preferred, to be collected at the end of the meeting.

P4 'Prevent' – There is still a need for a Children's Services member to sit on Channel. Steve Liddicott had held some discussions with Dave Humphreys with regards to the way forward and would continue with this, reporting back to the board.

P9 Item 14

The final report on the fatal stabbing is not available for the meeting and will now be brought to the next HSCB meeting on 23 November 2015.

25. Female Genital Mutilation Pathway (paper)

The board was asked to agree the use of the two referral pathways presented. Pathway 1 – the child's context and Pathway 2 – the family context. The pathways are consistent with existing London procedures.

Monica King questioned why the previously agreed changes, as recorded in the minutes, to the first box on the Family Context Pathway had not been implemented.

Donald McPhail responded that the pathways had been modified and clarified.

Nicky Brownjohn questioned what plans were in place to monitor the effectiveness of the pathways and how the board could be assured that this would be examined.

Donald McPhail responded that this decision would be an auditing decision.

Steve Liddicott reported that there was a link between women who had undergone female genital mutilation (FGM) and countries where it was prevalent. A box showing Hounslow's commitment to give a response was needed on the pathway. He was concerned about the numbers within identified communities.

Donald McPhail agreed that potentially there could be a number of cases to be identified although currently there were actually very few identified and that the prevalence was considered higher than the known number of cases. Currently numbers were primarily unknown.

Chris Domeney questioned what data was available with regards to the prevalence or the likely prevalence of FGM.

Nicky Brownjohn suggested that hospitals would be the best starting point to identify families at risk and that support could follow this receipt of information.

There was a discrepancy between the known and unknown numbers with, theoretically a potentially high number of cases, but in practice a low number of known cases. It was felt that assessment would be the key to ensuring the right support was in place. This could not be the responsibility of only one agency, all agencies involved with potential families and communities needed to be involved. Central Government Guidance is now available and the board agreed to further consider Pathway 2. It was suggested that the pathway

should include further details on the follow up to the assessment, specifically how women would continue to be supported. The flow of information, including information back to GPs, needed to be clearly outlined to support ongoing, long term focus on the child.

Some concern was raised regarding the unknown potential number of cases and the actual capacity of services to fully implement the pathway. Donald McPhail reported that there were currently very few cases with a child focus and he did not think this would change substantially.

Steve Liddicott suggested that the board consider implementing Pathway 1 and look, in greater detail, at the implications of Pathway 2 and the associated risks to families. Statistics indicated that there was a 50 – 80% chance within identified 'at risk' communities of cases having occurred.

The board agreed that Pathway 1 would be implemented with further work to be done on Pathway 2 to clarify the sharing of information, where responsibility for individuals on the pathway sat and to ensure a clear audit trail in respect of the referrals following assessment.

Action:

Further discussion needed regarding the 'Family Context – Pathway 2' to determine best descriptions for boxes and flow of pathway following assessment.

26. West Middlesex University Hospital Inspection Action Plan Update - Shan Jones

Shan Jones reported that a robust action plan was now in place in respect to identified areas for improvement around accident and emergency and staffing. There had been no actions in relation to safeguarding. The trust was required to report to CQG, she was unsure why this was an item on the Hounslow Children's Safeguarding Board agenda.

A challenge for the future could include a close monitoring of standards as Chal West and West Mid became one service. Shan Jones confirmed that arrangements in respect to safeguarding arrangements had remained unchanged and that there would be a named safeguarding professional on both sites with referral pathways remaining the same.

27. Children Detained in Police Custody - Mark Broom

Mark Broom reported that between 8 July 2015 and 31 August 2015 there had been 32 children, in the custody suite, for more than 4 hours. Of these 10 were kept to go to court, 2 bench warrants and the rest were bailed with no further action. Due to a four month closure of the custody suite between April and July it was not possible to compare numbers with other boroughs over the period. It was further reported that new data on vulnerable detainees (including children) would be published on the Mopac data site and that current data would not be comparable due to changes to the range of the data. A comparison with other boroughs for the 8 July to end August period could be prepared if needed.

The board questioned whether there had been enough appropriate adults available on each occasion and whether they could be assured that the Police and Crime Evidence Act had been fully complied with in each instance. Particular concerns around the issue

of safety and violence were discussed and the need to have children placed in emergency care where possible. Mark Broom said that he was not aware of the facility to have children placed in emergency care existing within any command. The board felt it would be useful to know how many children meeting the requirements for placement were among those in custody. Mark Broom reported that it was difficult to arrange placements between midnight and 8am. Jacqui McShannon added that there were particular issues around who these young people were and what system was in place to assess their needs.

Action:

To explore concerns around children detained in custody, particularly the midnight to 8am time slot and how these children have their needs assessed and access support during this time. (placements, PACE and availability of Appropriate Adults)

28. West Middlesex University Hospital - Increase in Safeguarding Referrals - Shan Jones (paper)

A discussion of the numbers of safeguarding referrals detailed in the attached letter was included in Item 10 on Health Annual Reports presented by Shan Jones.

The concerns raised by West Middlesex University Hospital Board of Directors with regards to the very high increase in the number of safeguarding referrals was discussed by the LSCB who agreed that the increase in the number of referrals could be due to the following factors:

- the impact of improved recording
- a change in the criteria for referral within the hospital
- delays in referrals entering the system

It was also agreed that the discrepancies between the number of cases referred by the hospital and those received by the borough could be due to:

- Different thresholds for assessment by the borough and the hospital.
- Cases being referred to a number of target boroughs and not only to Hounslow.
- A number of identified delayed referrals which belonged to Richmond and not Hounslow.

It was agreed that a further breakdown of the numbers was needed to be able to reconcile the referrals made by the hospital with the lower number recorded as received by Children's Services. A further increase was anticipated for the 15/16 annual data due to:

- Closure of the Ashford Pediatric.
- Potential increased numbers from Ealing.

Action:

Monitoring and Evaluation Sub-Committee to look into numbers of referrals and discrepancies in referral criteria which may impact on referred numbers and Borough received numbers, also to identify numbers of referrals in relation to target Borough.

Shan Jones to come back to the board with the number of referrals that came to Hounslow

29. Public Health Update on School Nurse and Health Visitor Service - Joan Wallace

A report was presented providing an update on the transition of the service into the care of the local authority.

It was reported that although there remain difficulties in recruiting into posts and with the retention of staff, around 32 health visitors were currently in post – putting the service in a better position than previously. The Call to Action had resulted in an increase in staff, however there are still vacant posts. The board questioned the risks associated with the vacancies. The primary risk was considered to be the impact on the workload of current staff.

Questions were raised concerning the way in which the problem of co-sleeping was being managed and Kate Allen responded that information is included in a pack which is given out to all new parents.

Steve Liddicott requested a breakdown of the percentages achieved in terms of the universal elements of the Healthy Child Programme.

Information was also shared with regards to school nursing, it was confirmed that the requirements in terms of visibility within schools would be met with CLCH having been selected as offering the best structure. Michael Marks said it would be useful to have actual numbers in respect to vacancies and filled posts. Jullie Hulls added that numbers in terms of qualified and unqualified staff would be useful. It is expected that a clearer picture will be available within a few months. Jullie Hulls questioned how the fragmentation of services would impact on numbers where services cross over.

Attendance at Child Protection Conferences by School Nursing was questioned and Alan Adams asked that reassurance be given to the board that required attendees were available.

Actions

1. Multi-evaluation Sub-Committee to follow up on concerns around difficulty in recruitment and safeguarding arrangements following new contract with CLCH
2. Donald McPhail and Steve Liddicott to look at information available in terms of attendance at conferences and consider future attendance needs
3. Jullie Hulls to attend planning session to consider Health Visitor / School Nurse attendance arrangements at conference
4. Multi-evaluation Sub-Committee to consider numbers
The mandated elements are:
 - Antenatal health promoting visits
 - New baby review
 - 6-8 weeks assessment (incorporates maternal mood assessment)
 - 1 year assessment
 - 2-2½ year review
5. Actual numbers in post in terms of School Nursing under contract with CLCH to be provided, including vacant posts and those in post (qualified and unqualified)

30. Revenge Porn Involving Children - Donald McPhail

A discussion was held with regards to the issue of revenge porn among young people. Currently this is a high priority public and school concern. Recently some difficult cases had raised the profile of the issue, schools are actively managing specific cases where young people had been excluded for being involved in revenge porn. Further education action is being planned and the board agreed to support schools where possible.

The board asked what was currently being done in schools and agreed to find out how schools were dealing with this issue.

Action

Michael Marks and Roger Short will obtain and share information with regards to what is being done to raise awareness within schools, contacting schools to gather information on any related activities - via the Education Network

31. Health Annual Reports

Shan Jones presented the attached Annual report for West Middlesex University Hospital NHS Trust.

The board considered issues around the Trusts failure to meet 95% attendance for Safeguarding Training at Levels 1, 2 and 3. The potential to make Hounslow Safeguarding Children's Board Safeguarding Training available to Trust staff was considered with it being concluded that this would not be useful as the training content did not fit the requirements of the Trust. Shan Jones explained that the training attendance percentage only included staff who had received some level of initial training and not staff who had not yet attended any safeguarding training. Difficulties in getting staff to attend training were attributed to a struggle with work priorities. The struggle to get adult ward nursing staff, in particular, to attend was due to competing priorities and also an unhelpful increase of £5 per head for training.

32. Strategic View of Early Help Hounslow - Michael Marks and Jacqui McShannon

A verbal update was provided by Michael Marks with details provided by Jacqui McShannon. It was reported that the 'front door' had reverted to Social Care and that work was being done to strengthen the conduit for schools and put in an advice line. There were no changes to the threshold with the aim of any planned changes being to create a seamless and efficient service. Changes being made meant that the service would revert to the way it was delivered across most local authorities with a telephone line for direct access by schools, changes to the way staff were deployed and the route into support and early help being standardised.

The Caution Service was being moved back into Youth Offending and SEN and Disability were being moved into Education. Early Intervention had safeguarding processes in place to protect children with disabilities. The Board was made aware that there had been a high number of referrals.

Mary Harpley noted her congratulations to Alan Adams for his recent appointment as Executive Director of Children's Services.

Jacqui McShannon noted that Bob Brown, from the intake team, had now retired and that Neil Wenger and Visner Wright had been appointed.

Michael Marks reported that the consultation on the service for under 5s, A Brighter Future, was underway. It would be completed by 17 October 2015. If the board or members of the board wanted to contribute to this consultation a web link was available. Currently views were being sought through a range of agencies.

Action:

Report on the CQC inspection feedback to be provided for the next meeting

33. Safeguarding and Homelessness - Jennifer Hopper (paper)

A paper was delivered by Jennifer Hopper.

The Board heard that the audit undertaken in April/May 2015 had identified specific scope for improvement and a further audit was due to take place over November/December 2015 to further assess this. It appeared that where additional needs had been identified at the first social care assessment the support and follow-up put in place was good, however, where no additional needs had been assessed at the first social care assessment this was not the case. Changes have now been made to the assessment process and the support and follow-up after the first social care assessment taking place.

Donald McPhail questioned the process of assessment of children without recourse to public funds and the support put in around them. The board was assured that the return to assessment process had been strengthened and that families were now fully supported.

Although the numbers are currently low it was expected that there would be an increase following a planned review of cases in December. The numbers currently supported are actually far lower than the numbers assessed.

34. Standing Agenda Items

35. Reports from Sub-Groups

36. Missing and Vulnerable (paper)

The attached paper was not discussed and no questions were raised.

37. Monitoring and Evaluation (paper)

The attached paper was not discussed and no questions were raised.

38. Female Genital Mutilation (paper)

The attached paper was not discussed and no questions were raised.

39. Child Sexual Exploitation (paper)

Although the attached paper was not discussed and no questions were raised Jacqui

McShannon reported that the feedback from training had been positive.

40. Training (paper)

The attached paper was not discussed and no questions were raised.

41. Cases (paper)

The attached paper was not discussed and no questions were raised.

42. Child Death Overview Panel (paper)

Nicky Brownjohn questioned why learning from the CDOP had not been raised with different organisations as agreed by the Board. An apology was noted.

43. Feltham Young Offenders Institute (paper)

The attached paper was not discussed and no questions were raised.

44. Health Network (paper)

The attached paper was not discussed and no questions were raised.

45. Education Network (paper)

Michael Marks asked what information the board wanted following the recent 175 Audit. Donald McPhail requested that Steve Liddicott and Melissa Neilson-Rai meet with Michael Marks to discuss this.

ACTION:

To provide outline of specific audit information needed by the board

46. Minutes of the meeting

Donald McPhail asked whether the Board was happy to have the minutes of the previous meeting published. If there were any particular concerns members were asked to inform Melissa Neilson-Rai by the following week.

47. Matters Arising

Nicky Brownjohn reported that the CCG had some concerns about the quality of health assessments being done elsewhere for looked after children and requested that the board keep a close watch on this. Children placed outside the borough were a particular concern. Donald McPhail asked whether the board were happy to look into this and to consider whether the local authority were achieving what they needed to with regards to these children. Alan Adams suggested that an analysis of the current situation in terms of process and how this worked with other organisations should be done first.

48. Future Meeting Dates and future agenda Items

23 November 2015

The meeting finished at 5:20 pm.

