

LCCG Safeguarding and LAC Working Group
26 June 2017, 14:00- 16:30
Lower Marsh, Lewisham & Greenwich Room

Present		
NAME		ORGANISATION
Amy Buxton-Jennings,	ABJ	Chair, Commissioning Director for Children's Services, Lambeth CCG/London Borough of Lambeth
Avis Williams– McKoy	AWM	Designated Safeguarding Nurse, Lambeth CCG
Efun Johnson	EJ	Designated LAC Doctor, Lambeth CCG
Yvette Newman	YN	Lambeth Designated Nurse for Looked After Children
Roneetta Campbell-Butler	RCB	Lead Commissioner for Looked After Children, Lambeth CCG / Lambeth Council
Margaret Hill	MH	Named Nurse, Lambeth Community GSTT
Mike Ferguson	MF	Assistant Director Children Looked After & Youth Offending Service London Borough of Lambeth
David Grafton	DG	Lambeth CAMHS Service Manager
Abdu Mohiddin	AM	Public Health Consultant , Lambeth & Southwark
Alison Davidson	AD	Named GP for safeguarding children, Lambeth CCG
Debbie Saunders	DS	Head of Safeguarding Children Nursing team, GSTT
Emily Wilson	EW	Paediatric Trainee, Mary Sheridan
Ayanda Jolobe	AJ	Ayanda Jolobe, Named Doctor, Community GSTT

Apologies		
Ann Lorek	AL	Acting Designated Doctor Safeguarding Lambeth
Susannah Beasley-Murray	SBM	Assistant Director Early Help, Access and Assessment, Children's Social Care, London Borough of Lambeth

No.	Agenda Item	Action for / date
1	Welcome and Introductions	
1.1	The Chair, Amy Buxton-Jennings welcomed all members and guests to the meeting and introductions were made A round of introduction was made and apologies tendered.	
2	Apologies for Absence	
2.1	Please see above.	

No	Agenda Item	Action for / date
3	<p>LCCG/SLWG/003 – Declaration of Interests – In Agenda Items</p> <p><i>No interests were declared in relation to the agenda items for this meeting.</i></p>	
4	<p>LCCG/SLWG/15/004 – Minutes of the Previous Meeting held on 27 March 2017 and Matters Arising</p> <p>The minutes of the previous meeting were agreed as a true and accurate record. Actions and updates were discussed and are included in the Action Log.</p> <p>Matters arising/Action Log :</p> <ul style="list-style-type: none"> • ABJ Request an update on the CYPHP programme and LAC for a future meeting. Action: Add CYPHP programme update to future agenda. Update 26.6.17: This is to be added to the agenda under ‘Looked After Children Health Updates / Reports’ • Action 6.1: EJ Provide narrative for next quarter about progress plan and work plan about how we are taking forward the initial health assessment. Update 26.6.17: EJ provided this to the Group at today’s meeting. • Action 6.2: EJ Provide a progress report and a list of required actions to this group, of how to take forward issues with LAC initial health assessments, referrals and notification. Update 26.6.17: EJ provided this to the Group at today’s meeting. • Action 11.1: MO facilitate a meeting with ABJ, Naeema Sarkar, David Grafton and David Michael (Service Manager responsible for Child Protection Chairs and IROs) to discuss issues with case conferences. Update 26.06.17: AD has met with Naeema Sarkar, who has an updated flowchart and list for Business Support Officers to check which GP cases belong to. If they are unsure they phone the relevant practice to confirm. AD will give an update re how this is embedding at the next meeting on 2nd October 2017. 	
5	<p>LCCG/SLWG/005 – SLAC ToR (Terms of Reference) Review</p> <p>The Group have previously agreed the following 3 priorities will be added to the ToR:</p> <ol style="list-style-type: none"> 1. Looked After Children’s Health and in particular the issues around the Initial Health Assessment. 2. Review of ‘front door’ and common traditions, from the Health Partnership, in relation to the review. 3. Young people at risk, LSCB have been doing with the ‘Young People at Risk Task and Finish Group’. <p>Action: RCB to arrange for the 3 priorities for the Group to be added to the SLAC ToR.</p> <p>Action: MO to add ‘Review of SLAC ToR’ to the agenda for the meeting in March or April 18 – in accordance with when the annual review date falls.</p> <p><u>Updates to ToR:</u></p> <ul style="list-style-type: none"> • Quoracy: at least two of the four Named or Designated Nurses for Safeguarding should be in attendance at meetings. • Reports to the Group are to follow section 11 audits requirement. The ToR re structure and a section is to be added to the top of reports re current issues / challenges. • Quoracy: Assistant Director of Children’s Social Care at Lambeth Council is to be 	<p>RCB/ ASAP</p> <p>MO / March 18</p>

No.	Agenda Item	Action for / date
	added to the membership of the Group with either her or. Susannah Beasley Murray or Michelle Hyden-Pepper to attend meetings.	
6	<p>LCCG/SLWG/006 – Review of CSC</p> <p><u>MASH (Multi-Agency Safeguarding Hub):</u></p> <ul style="list-style-type: none"> • AWM informed the members that MASH Operating procedures have been updated and there is a Strategic MASH Working Group in place • They are hoping to develop the service, to include working priorities such as Children at Risk and CSC, but there are currently issues re the best way to invest in the operational side of the service. They are moving to daily MASH meetings for complex cases. • Feedback from the group was that it was difficult and time consuming to get through to someone via the telephone handling system at the hub. • ABJ informed the members that the service was supposed to introduce a core handling telephone service, but at present there is a telephone service that goes through to voicemail. ABJ requested the ‘MASH core telephone handling service issues’ be re-added to the agenda for the next meeting on 2 October 17. • ABJ alerted the members to the fact that as the number of Section 47s strategy meetings has gone down; there has been a knock on effect re the decrease seen in initial Child Protection conferences. • MF added that they are currently looking at cases where decisions were made not to refer to Child Protection – around 100 cases in the last 2 months, to see if there are any patterns. This work will then be pulled into a report. • ABJ noted they needed to keep clear records of decisions not to refer to Child Protection and ensure partners escalate where appropriate., AWM stated that provider health services have been in the forefront of challenging the way cases are being processed and have written to alert the LSCB and have had numerous meetings with CSC - to highlight the trend. She also believed the risk being carried across the agencies must be greater, due to the lack of a co-ordinated response. <p>Action: ABJ to discuss the difficulty staffs are having getting through to the MASH Hub via the telephone handling service with SBM.</p> <ul style="list-style-type: none"> • AWM reported that the number of police contacts had remained constant, but there were inconsistencies in the way these were not being converted into assessments. <p>ABJ requested that the number of contact and referrals received per agency be added to the agenda for the next meeting on 2nd October 17.</p> <ul style="list-style-type: none"> • MH highlighted the issue of partner agencies not being involved in police and social care strategy meetings/discussions. <p>ABJ requested that members raised any concerns re trends in the way cases are being progressed with either herself or AWM – they will look at the wider picture at the next LSCB meeting in July 17.</p> <ul style="list-style-type: none"> • MH stated that they don’t receive notification of referrals, or when assessments are closed and only receive a list of the number of children on Child Protection and not a list of the number of Children In Need (CIN). • ABJ stated that currently it appears there are issues with the ‘front door’, meaning cases aren’t getting to conference. <p>ABJ and MF said they would raise these issues when they attended the Children’s and</p>	<p style="text-align: center;">ABJ/ ASAP</p>

No.	Agenda Item	Action for / date
	<i>Social Care Performance Board meeting the following day.</i>	
7	<p>LCCG/SLWG/007 – Looked After Children (LAC) Health Updates / Reports – Efun Johnson (EJ)</p> <p><u>The Initial Health Assessment Improvement Project Fund:</u></p> <ul style="list-style-type: none"> • The Provider SOP (Standard Operating Procedure) is to be updated and the working group are also working on a MoU (Memorandum of Understanding). • There is a Health Leads meeting coming up on 13 July 17 (they are every second Thursday of the month) and MF & EJ both felt the membership should be scaled back. • EJ suggested ‘Champions’ should be recruited. • DS informed the members that GSTT are due to start a 4 month Safeguarding and LAC review, which she will probably be chairing. <p><u>CQC / OFSTED Inspection:</u></p> <ul style="list-style-type: none"> • AWM advised they needed to move at pace in Lambeth, re the significant changes recommended to LAC services by OFSTED, as an OFSTED inspection is due and they want to see some impact in terms of the children. <p><i>ABJ requested that the ‘creation of a script re LAC services – where they were, where they have been and where they are trying to get to’, be added to the agenda for the next meeting on 2 October 17.</i></p> <p><u>GSTT LAC Dashboard with narrative - EJ:</u></p> <p>Please see ‘GSTT Dashboard Lambeth LAC 16-17’</p> <ul style="list-style-type: none"> • EJ asked if the narrative included in the dashboard provided was what was required. • ABJ stated that having the narrative added to the dashboard was helpful, as it tells the story of where they have got to so far. 	
8	<p>LCCG/SLWG/008 – LSCB & Sub Working Groups – ABJ / AWM</p> <ul style="list-style-type: none"> • ABJ notified the group that each of the Chairs of the LSCB & the Sub Working Groups are going to attend the new LSCB Business meeting – this will be the core group responsible for driving forward the LSCB Programme. • AWM stated they needed to look at the OFSTED report, (as they were considered to have a failing LSCB), to ensure they are on track for Good or Outstanding at the next inspection. There will need to be a piece of work to map and demonstrate the impact they have had over the last 18 months, in terms of holding partners to account and having a clearly defined role (separate from Children’s Social Care) in terms of scrutiny and governance. • ABJ stated the LSCB Child Protection Improvement Plan should be owned by the LSCB, rather than Children’s Social Care, as it’s a partnership issue and should have that level of independence in terms of scrutiny. 	

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	<p><u>Young People At Risk Working Group: - AWM</u></p> <ul style="list-style-type: none"> There has been a piece of work on going for the last 2 months re CSE and gangs, as the task and finish group's work is coming to an end and the members of this group have been allocated work in order to bring this together into a cohesive programme. <p><u>Performance and Quality Assurance: - AWM</u></p> <ul style="list-style-type: none"> The new Quality and Assurance sub-group is going to be Chaired jointly by Naeema and AWM. They have been developing the workplan for the year. The workplan will follow the LSCB key priorities. There are some issues with capacity and who can co-ordinate the sub group and how the LSCB Board can support this. <p><u>Learning and Professional Development: - AWM</u></p> <ul style="list-style-type: none"> There is a new Learning and Development LSCB Group which will be looking at the annual training offer across the partnership. They will be offering bespoke level 3 training that is reflective of the LSCB key priorities <p><u>Serious Case Reviews (SCRs): - AWM</u></p> <p>I. <u>SCR J Lambeth:</u></p> <ul style="list-style-type: none"> The report has been published and is in the public domain. They are still waiting for the Coroner's report. <p>Action: DG / LAC Health Team to email ABJs re concerns that actions re SCR J haven't been followed up by the CSC so she can escalate them.</p> <p>II. <u>SCR K Joint Lambeth and Bromley LSCB:</u></p> <ul style="list-style-type: none"> This is work in progress. <p>III. <u>SCR L Joint Lambeth and Croydon LSCB:</u></p> <ul style="list-style-type: none"> This case is work in progress – they are planning a practitioner event to summarise the key learning. The report will be published after the criminal proceedings. <p><u>Child Death Over View Panel: AM</u></p> <ul style="list-style-type: none"> They are working on the annual report for 2016 -17. Last year there were 40 child deaths in Lambeth and Southwark, of which 28 were in Lambeth. 22 of the 28 deaths in Lambeth have been reviewed, so there are still 6 cases outstanding. Liz Green is helping to get the backlog of cases down. AM has met with Katie Mascall re training. Kirsten Waters will take over training, as AM is going on a career break for a year. They have met with the DPHs in both Lambeth and Southwark this morning to confirm this. 	<p>DG/ ASAP</p>

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	<ul style="list-style-type: none"> • GPs have been reminded that there might be an OFSTED / CQC inspection and what their role would be. 	
10	<p>LCCG/SLWG/010 – GSTT Performance and Quarterly Reports and Multi Agency Safeguarding Hub (MASH) – DS / MH</p> <p>Please see ‘GSTFT MASH HV Safeguarding Children Quarterly Report 4: January 2017 – March 31st 2017’</p> <ul style="list-style-type: none"> • MH reported that they have included FGM and FNP (Family Nurse Partnership) data. • Data for 6 of the 7 EIHV (Early Intervention Health Visitor). They are working with 141 children – 11 (8%) of which have a CP (Child Protection) Plan, 17 (12%) have a CIN (Child In Need) Plan and 6 (4%) are Looked After Children. • There were 43 consultations / initial inquiries with a Specialist Health Visitor this quarter. These will be down in the next quarter, as they are one staff member down and are in the process of recruiting for the vacancy. • One case was escalated by the named nurse to CSC to re-evaluate the risks. • MH & DS are starting to look at Section 11, in preparation for CQC. • Information re immunisation, Health Visiting and FNP has been hard to come by since Barbara Hills left, but they have now recruited a new Deputy General Manager Jude Connolly, who is starting in September 17. • ABJ suggested MH add a section to the top of the report, for any issues of concern she wishes to bring to the Groups attention. • ABJ noted that it's encouraging that the FNP is reaching vulnerable children. • ABJ requested MH provide more information re how FNPs are working with families and the impact of any issues. • MH notified the members that the FNPs are doing a piece of work looking at how young people work with their relationships, i.e. domestic abuse, with the focus on positive relationships. The work is being carried out in conjunction with a university and will be audited. • ABJ requested information from staff, as to whether or not the FNP is having an impact. • AWM stated it would be interesting to see if the CIN plans had gone up while the CP plans had gone down. • AWM said she would be interested to see how many of the children on page 6 of the report were subject to a multi-agency review, as she would expect these cases to have had these assessments done. • MASH activity went up in the final quarter of last year and is continuing to go up. 	
11	<p>LCCG/SLWG/011 – KCH Performance and Quarterly Reports – RJ</p> <ul style="list-style-type: none"> • They are below compliance with training – they are compliant with their nurses and midwives, it's the admin training they have an issue with and this has been escalated to executive. • Level 2 training are still on a monthly basis. • Nurses and midwives are 87% compliant – midwives are 95.5% compliant at level 3. • They will be going over to e-learning in September 17 – they have been without e-learning since October 16. • ‘Champion’ training has been conducted for FGM, CSE & LAC and they have 	

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	<p>produced training materials so they can do 10 minute update training at team meetings, in order to keep these topics on the 'front burners'.</p> <ul style="list-style-type: none"> • Three audits were carried out in the last quarter. • They had hoped to go live for their CP IS in March 17 – this hasn't happened, as there are IT issues. • Additional support for maternity safeguarding named nurse is coming in – a band 7 nurse. • Maternity safeguarding in Lambeth remains high – 36 babies were on a CP plan in the last quarter. • For FGM: 74 people were identified. Red Thread, 61 young people engaged with the service and in 35 cases the outcome was that there was some change / direction and 17 took some sign-posting to services outside of the hospital. <p><i>ABJ requested a deep dive into FNP in relation to Red Thread and Oasis, in terms of learning about these services and any learning they may need to act on, be added to the agenda for either the next meeting on 2 October 17, or the following meeting on 18 December 17.</i></p> <p>Action: DS/MH & RJ to compile any issues re FNP in relation to Red Thread or Oasis, for discussion at a future meeting. CP-IS preparedness/implementation to be included as an reporting item for provider health services</p>	<p>DS/MH/RJ 02/10/17</p>
12	<p>LCCG/SLWG/012 – SLaM and CAMHS Performance and Quarterly Reports – DG</p> <p>Please see 'Quarter 4 Safeguarding Report Final 21 June 2017' and 'Q4 2016-17 NHS Lambeth CCG Safeguarding Executive Q4 Final 21 June 2017'</p> <ul style="list-style-type: none"> • 12 safeguarding referrals were made to Social Care during Q4 of last year and all were accepted. • There were a number of cases where safeguarding updates were hard to come by. • Initial Case Conference invites are often being received too late, meaning people aren't able to free themselves up to attend. • MH reported that Naeema Sarkar has done some work on this and they now receive these on a Wednesday for the following week. • . • 65 people were referred to CAMHS in Q4 on a Child Protection plan: 5 for physical abuse, 22 for emotional abuse, 33 for neglect and 5 unsure. • Lambeth Social Services have been reviewing their 'front door' – the outcome of the review is still awaited. • The Child Sexual Exploitation Protection Panel has been reinstated. • Multi-Agency Referral Form (MARF) for making referrals to MASH, is going to follow the guidance that separate Child Exploitation Panels are required and the existing Child Protection structure should be used, to look at children who are at risk of significant harm, with the assistance of the specialist CSE workers. • MH informed the members that the plan is being called a Child Safety Plan (as the issue is how to manage a problem outside of the home), instead of a Child 	

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	<p>Protection Plan and will follow the same process as the 'signs of safety'. Including core group meetings.</p> <ul style="list-style-type: none"> • Bespoke safeguarding training is provided, as part of their internal training. • The Lead Commissioner attends the monthly MARAC (Multi-Agency Risk Assessment Conferences). • There are some deficits in the collection of Tier 4 data, as some staff have left and haven't been replaced. There is a new system coming into place, which will populate this data. • ABJ suggested members follow the format of this report, in terms of narrative, red flags and good news, as it gives an opportunity to highlight some of the key points. <p>Action: DG to obtain a couple of cases where safeguarding views don't accord, so AWM can raise them with either SBM or Naeema.</p>	DG/ ASAP									
13	<p>LCCG/SLWG/013 - Any Other Business</p> <p><u>Neglect deep dive: (ABJ)</u></p> <p>ABJ suggested the group should reflect on this at the next meeting on 2 October 17, as this is something which may come up via the LSCB.</p> <p><u>Agenda for SLAC Awayday: (AWM)</u></p> <ul style="list-style-type: none"> • AWM notified the members that ARE had suggested they have a SLAC Awayday, so they could agree priorities in terms of the health economy and bottom out how they relate to LSCB. • RCB informed the group that there are 3 awayday's being arranged: <ol style="list-style-type: none"> 1. Strategic 2. Operational with Mary Sheridan 3. Council Awayday <p>ABJ requested they should reflect on the need for a SLAC Awayday and what may be on the agenda at the next meeting on 2 October 17 and then reflect again after the OFSTED inspection and if neither of these prompt an agenda for an Awayday, postpone it to March / April 18.</p>										
Future Meetings											
14	<p>LCCG/SLWG/014 – Dates and times of future meetings</p> <p>Dates and times of future meetings and deadlines for the receipt of reports / papers are as below</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">Meeting Date</th> <th style="text-align: center;">Papers due by</th> <th style="text-align: center;">Location / Time</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">2nd October 2017</td> <td style="text-align: center;">25th September 2017</td> <td style="text-align: center;">Room 407, 4th Floor, Lower Marsh / 14:00-16:30</td> </tr> <tr> <td style="text-align: center;">18th December 2017</td> <td style="text-align: center;">11th December 2107</td> <td style="text-align: center;">Lewisham and Greenwich Room ,4th Floor Lower Marsh / 14:00-16:30</td> </tr> </tbody> </table>	Meeting Date	Papers due by	Location / Time	2nd October 2017	25 th September 2017	Room 407, 4 th Floor, Lower Marsh / 14:00-16:30	18th December 2017	11 th December 2107	Lewisham and Greenwich Room ,4th Floor Lower Marsh / 14:00-16:30	
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The agenda and minutes of this meeting may be made available to public and persons outside of NHS Lambeth Clinical Commissioning Group as part of the CCG's compliance with the Freedom of Information Act 2000.

LCCG Safeguarding and LAC Working Group Action Log of meeting held on 26 March 17:
updated post 26th June 2017

Item	Action	Lead	Completion
Minutes/ Matter Arising			
4 LCCG/SLWG/15/004 – Minutes of the Previous Meeting held on 27 March 2017 and Matters Arising			
4.1	Add CYPHP programme update to future agenda Update 26.6.17: This is to be added to the agenda under 'Looked After Children Health Updates / Reports'	LAC Designated Professionals EJ, YN & RCB	27.03.17
4.2	Confirm start date for Designated LAC Nurse	DS	26.06.17
4.3	Add away-day to agenda for next meeting?	AWM	26.06.17 Under AOB
5 LCCG/SLWG/006 – LCCG Provider Self-Assessment-CQC/ Ofsted Inspection			
5.1	Provider to present their self-assessment document at the next meeting so that we can have an overview of any issues arising from their self-assessment	ALL	
6 LCCG/SLWG/006 – Slam and CAMHS Performance and Quarterly Reports			
6.1	Provide narrative for next quarter about progress plan and work plan about how we are taking forward the initial health assessment	EJ	26.06.17
6.2	Provide a progress report and a list of required actions to this group in terms of how to take forward issues with LAC initial health assessments, referrals and notification	EJ	26.06.17
6.3	Request report from CYPHP Nurse as part of LAC digest	EJ & YN	
7 LCCG/SLWG/007 – GSTT Performance and Quarterly Reports and Multi Agency Safeguarding Hub (MASH)			
7.1	Raise issue of drop in Child Protection Medicals formally at the Safeguarding Board so that everyone can have a shared understanding of why and what it means for the system.	ABJ	?
7.2	FGM KPIs to be included in the report	MH	?
7.3	Highlight any areas for concerns and neglect audit on report for next meeting	MH	?
7.4	Talk about Neglect audit and deep dive that is being planned for the summer	AM	Deferred to mtg 02.10.17
9 LCCG/SLWG/009 – Slam and CAMHS Performance and Quarterly Reports			
9.1	Future SLAM reports to include a narrative report as well as performance digest	DG	?
11 LCCG/SLWG/011 – Independent Contractors			
11.1	facilitate a meeting with ABJ, Naeema Sarkar, David Grafton and David Michael (Service Manager responsible for Child Protection Chairs and IROs) to discuss issues with		26.06.17

Item	Action	Lead	Completion
	case conferences		
	Have Young People at risk on Part 1 of future meeting agenda	AWM	?
15 LCCG/SLWG/015 Any Other Business			
	All to send any other comments and feedback to AWM or ABJ before Wednesday	ALL	?