

LCCG Safeguarding and LAC Working Group
18 December 2017, 14:00- 16:30
Lower Marsh, Room 407, 4th Floor

Present		
NAME		ORGANISATION
Dan Stoten	DSt	Chair, Assistant 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
Roneeta 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
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
Ann Lorek	AL	Acting Designated Doctor Safeguarding Lambeth
In Attendance		
Nicholas Bryan	NB	Senior Business Support Administrator

Apologies		
Ayanda Jolobe	AJ	Ayanda Jolobe, Named Doctor, Community GSTT
Susannah Beasley-Murray	SBM	Assistant Director Early Help, Access and Assessment, Children's Social Care, London Borough of Lambeth
Ian Diley	ID	Public Health Consultant , Lambeth & Southwark
David Grafton	DG	Lambeth CAMHS Service Manager

No.	Agenda Item	Action for / date
1	Welcome and Introductions	
1.1	The Chair, Dan Stoten welcomed all members and guests to the meeting and introductions were made	
1.2	A round of introductions was made and apologies tendered.	
2	Apologies for Absence	

No.	Agenda Item	Action for / date
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>4.1 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>4.2 Matters arising/Action Log :</p> <p>4.3 <i><u>Paragraph 8.25</u> – In a lot of the surrounding areas the passport has not been used but is now being adopted</i></p> <p>4.4 YN noted that the ‘Health Passport’ is being used.</p> <p>4.5 <i><u>Paragraph 10.3</u> - AD noted that when children were involved in child protection sexual exploitation cases, minutes were coming to the GP.</i></p> <p>4.6 AD noted the correction that ‘minutes were not coming to the GP when children were involved in child protection sexual exploitation cases’.</p>	
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5	<p>LCCG TOR Final Draft</p> <p>5.1 It was noted by EJ to add the corporate parenting board to the Terms of Reference.</p> <p>5.2 In the third paragraph after the introduction where the ‘Safeguarding Annual Report’ is referenced, it states that it reflects the safeguarding activity but the report reflects wider activity on it’s own and should be expanded upon.</p> <p>5.3 DSt queried whether the group has a ‘Vice Chair’ and the Terms of Reference states in order for the working group to be quorate, a Vice Chair needs to be present. The group noted that the ‘Children’s Director’ or ‘Assistant Director’ can be listed as the Vice Chair.</p>	
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<p>5.4</p> <p>5.5</p> <p>5.6</p> <p>5.7</p>	<p>AL noted that a named doctor would need to be on the list for paediatric activity.</p> <p>Action: AL to invite Named Dr Lambeth community to join the SLAC working group</p> <p>RCB asked if In section 8 an amendment be made to;</p> <p><i>Looked After Children's Health and in particular the issues around the Initial Health Assessment and review</i></p> <p>DSt noted that a deadline will be put for the end of the month for sign off to be completed electronically.</p>	
<p>6</p> <p>6.1</p> <p>6.2</p> <p>6.3</p> <p>6.4</p> <p>6.5</p> <p>6.6</p> <p>6.7</p> <p>6.8</p> <p>6.9</p> <p>6.10</p>	<ul style="list-style-type: none"> • <i>Self-Assessment-CQC/ Ofsted Inspection (Health partner are requested to discuss their provider health self-assessment and pre inspection preparation).</i> • GSTFT • KCH • SLaM <p>The group discussed the document with agreement to circulate the document after the meeting for each member to fill in. Some points for the first draft of the 'Self Assessment' document were noted.</p> <p>1a. Davina has provided evidence from questionnaire by asking children & parents about their views on Child Protection medicals. This has been repeated this year.</p> <p>DS noted that there is a lot of evidence that can be used from FNP services about user involvement and feedback.</p> <p>DSt queried when feedback is received, what is done with the information. What are the actions, and is there a way of monitoring and tracking that these actions have been followed through.</p> <p>DS reported noted that in the 'Evelina' the feedback was followed up with the 'You Said, We Did' reporting.</p> <p>1b. RCB noted this only applies to children who have had a safeguarding issue.</p> <p>AL noted that this data is collected by Family Nurse Partnership (FNP)</p> <p>AL noted that something specific needs to be developed to target this question the information is out there but it's not being collated.</p> <p>1c. Children and families tell us what's working well in regards to Safeguarding</p> <p>EJ noted that there are minutes and notes from previous safeguarding meeting.</p>	

6.11	DSt noted that again it seems as though data is being collected, but how the collation of the data is being gathered needs some structure.	
6.12	1d. Evidence from the previous 3 questions ties into this indicator. Evidence is being collected.	
6.13	2a. 2b. 2c. and 2d. were previously touched on in the previous questions.	
6.14	2e. AWM noted that we need to send out evidence that we've systems in place to reduce the disadvantage and even outreach to those who are out of Borough.	
6.15		
6.16	DSt noted that from a commissioning point of view there is a financial implication and the group needs to ensure the wording is correct. 2g. Friends and Families test is used.	
6.17	3a. There are 5 mandated visits for children	
6.18	3b. EHC plans and Person Education plans are in place.	
6.19	5c. There is an Audit going around about the MASH (Multi-Agency Safeguarding Hub).	
6.20	DS noted that there was a discussion in regards to CAMHS being involved in the MASH.	
6.21	5d. In acute services there is always a consultant paediatrician on board	
6.22	5g. This area was described as problematic. There is a piece of work being done within the community in regards to tracking and monitoring the movement outs and transfer outs.	
6.23	DSt noted that LEAP are starting some work in February 2018 whereby children can be tracked in the system by using one unique identifier.	
6.24	6b. AL noted that timeliness is an issue. EJ noted that consent is not very well managed. Also health recommendations are not being acted upon.	
6.25	Action: RCB to speak to Nigel in regards to the statutory notification	
6.26	7b. Within GSTT there is now a joint Adult and Child Safeguarding Hub Committee.	RCB
6.27	7c. More work is needed to be done on the tracking of the risks to children. EJ noted that this is where a database would be needed.	

6.28	Action: LAC Annual Report to an agenda item at the next SLAC and to be added onto the Children & Maternity Programme Board January Agenda	NB
6.29	9c. EJ noted that there is a Peer Review, and what is needed will be the evidence from the programme.	
6.30	AWM noted that the document will be circulated and members will then be able to populate the sections as required.	
6.31	Action: 'Self Assessment' document to be circulated to the working group members. Members to populate each field and return for finalisation.	ALL MEMBERS
7	LCCG/SLWG /006 Review of CSC Item to be carried over to the next meeting	
8	LCCG/SLWG /012– Looked After Children (LAC) Health Updates /Reports <ul style="list-style-type: none"> • Initial Health Assessment Improvement Project Plan • CYPHP Programme Update • GSTT LAC Dashboard • Feedback from Corporate Parenting Board 	
8.1	YN presented to the group.	
8.2	YN noted that when she came into post, she had completed a Looked After Children policy guidance document and had gone out for comments. Since that time a standardised document that's been introduced by NHS England.	
8.3	YN noted that the document that has written from a Lambeth perspective and could be made into a joint document with Southwark.	
8.4	DSt suggested that it would also be helpful after review, if Kings could be included within the document also.	
8.5	YN noted that she would like to take everybody's comments on the document and update it.	
8.6	Action: All to feedback to YN	All Members
8.7	<u>Dashboard</u>	
8.8	EJ provided an update to the group. EJ noted that there were some fields that RCB had asked to be added, but there are still some outstanding fields to be added by the admin. The new	

8.9	admin in Southwark was tasked with this and has not been completed as of current.	
8.10	<ul style="list-style-type: none"> EJ noted that fewer children are being referred for reviews 	
8.11	<ul style="list-style-type: none"> EJ has raised this issue with Social care and the performance team. 	
8.12	<ul style="list-style-type: none"> The target is 95% of LAC being seen. 	
8.13	<ul style="list-style-type: none"> Every Q4 there's a peak, whereby there's a quota of children who are highlighted as needing to be seen, but these children should have been seen in the previous quarter. 	
8.14	<ul style="list-style-type: none"> LAC are also not being referred timely for initial health assessments 	
8.15	EJ noted that there was an error where nursing clinics were not being booked.	
8.16	YN noted that over q2 a nurse returned from long term sick and was unable to carry out contacts. The outreach nurse who was working across boroughs had only completed 2 health assessments for Lambeth in July and 1 for August.	
8.17	There is also a 50% DNA rate.	
8.18	Out of 59 appointments that had been offered, 30 had been un-booked. These are contributing factors to the low number of contacts for the LAC Nursery Service.	
8.19	YN noted that Lambeth LAC nursing service have for the past year have had only half the Nursing provision of Southwark. Currently the specialist nurse works part-time 0.3WTE. This provision is not sufficient to meet the RHA workload.	
8.20		
8.21	EJ noted that nursing capacity/recruitment needs to be strengthened (funded) to match the doctor's capacity to complete 2 and a half clinics a week. This will help bring the numbers into alignment.	
8.22		
8.23	<p><u>Adult Health Data</u></p> <ul style="list-style-type: none"> Most of the assessment are turned around in the timescales agreed 	
8.24	<ul style="list-style-type: none"> 67% of the assessments not turned around are because of information be waited on from the GP's 	
	<p><u>Initial Health Assessment</u></p> <p>EJ has sent the charted progress of the Initial Health Assessment to RCB.</p>	
9	LCCG/SLWG /007 LSCB & Sub Working Groups	
9.1	Minutes of the Sub Working groups have been noted	

9.2	<u>Child Death Overview Panel</u>	DS
9.3	DS noted that she has spoken to Davina and Margaret are making some progress from the suggestions of the last annual report and will be able to take forward and implement some actions	
9.4	Action: DS to feedback to group at the next meeting.	
9.5	<u>Serious Case Review</u>	
9.6	<u>SCR J Lambeth</u>	
9.7	The coroner enquiry is now closed	
9.8	<u>SCR K Joint Lambeth and Bromley LSCB</u>	
9.9	Parents have been in contact with the independent author and have both been interviewed.	
9.10	<u>SCR L Joint Lambeth and Croydon LSCB</u>	
9.11	The case has been delayed and will be published after the criminal proceedings have taken place. Actions to improve practice are being processed	
10	LCCG/SLWG /010– GPs & Independent Contractors	
10.1	<i>The group is asked to review and note update from Dr Alison Davidson- Named GP, Lambeth CCG.</i>	
10.2	<ul style="list-style-type: none"> • GP's have requested face to face training by a 'Prevent Trainer' this is a priority area. 	
10.3	<ul style="list-style-type: none"> • There has been great difficulty with getting a list of children on Child protection Plan for each practice 	
10.4	<ul style="list-style-type: none"> • Reports from the LSCB 50% of GP's not attending Child Protection, however there is no evidence that GP's have been invited. 	
10.5	RCB noted that there isn't anybody in post for the 'Prevent Training' to be provided and suggested whether 'Prevent' could be integrated into the GP Safeguarding Training.	
10.6	AWM has advised for the meantime for the online Prevent training to be accessed	
10.7	RCB noted that interviews will be conducted next week and candidate will be willing to carry out face to face training	

10.8	https://www.elearning.prevent.homeoffice.gov.uk	
11	<p>LCCG/SLWG /013– GSTT Performance and Quarterly Reports and Multi Agency Safeguarding Hub (MASH)</p> <p>11.1 <i>The group is asked to review and note update verbal/report on the following:</i></p> <ul style="list-style-type: none"> • <i>GSTT Safeguarding Executive Committee Report Quarter 4 report 2017</i> • <i>MASH Report</i> • <i>FGM</i> • <i>FNP</i> • <i>CP-IS</i> <p>11.2 MH presented to the group.</p> <p>11.3 MH noted that the MASH Report has experienced a slight drop in the quarter, as there were 75 cases in the first quarter, and there are 71 cases in this current quarter. The referrals to social care have increased in the quarter from 239 referrals to 242.</p> <p>11.4 AWM noted that it is unclear what is a contact and what is a referral in regards to the Social Care figures. DS noted that it is currently being mapped out on what will be defined as a referral. AWM noted that there is some concern about the distinction.</p> <p>11.5 AWM queried what is being done with the ‘Merlins’. MH noted that the ‘Merlins’ are being triaged and are being recorded as a contact.</p> <p>11.6 Action: MH to provide clarity between contact and referral and to bring document to the next meeting.</p> <p>11.7 MH reported back on the ‘Digest’ to the working group. MH noted that there is a struggle to get the Health Visiting numbers and the midwifery numbers will be provided monthly.</p> <p>11.8 MH noted that that there is a new domestic homicide review taking place, being undertaken in Lambeth.</p>	MH
12	<p>LCCG/SLWG/014- KCH Performance and Quarterly Reports</p> <p><i>The group is asked to review and note update verbal/report on the following:</i></p> <ul style="list-style-type: none"> • <i>KCH Safeguarding Lambeth Quarter 4 report 2017</i> • <i>CP-IS</i> • <i>FGM</i> • <i>Self-Assessment-CQC/ Ofsted Inspection</i> <i>(Health partner are requested to discuss their provider health self-assessment and pre inspection preparation).</i> 	

12.1	The Chair has asked the group to note the reports submitted for this item																
13	LCCG/SLWG /015– SLaM and CAMHS Performance and Quarterly Reports <i>The group is asked to review and note update verbal/report on the following:</i>																
	<ul style="list-style-type: none"> • <i>SLAM Safeguarding Lambeth Quarter 4 report 2017</i> 																
13.1	The Chair has asked the group to note the reports submitted for this item																
14	LCCG/SLWG /015–Any Other Business																
14.1	<u>Performance Digest</u>																
14.2	EJ noted that she has started to receive the Performance digest, but the data is still inaccurate. The provision of services are inaccurate. The PEPs looks like they have reduced, but actually the social workers are not entering the data onto the PEPS.																
Future Meetings																	
15	LCCG/SLWG/014 – Dates and times of future meetings Dates and times of future meetings and deadlines for the receipt of reports / papers are as below																
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr style="background-color: #d9d9e3;"> <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;">9th April 2018</td> <td style="text-align: center;">2nd April 2018</td> <td style="text-align: center;">Room 407, 4th Floor, Lower Marsh / 14:00-16:30</td> </tr> <tr> <td style="text-align: center;">16th July 2018</td> <td style="text-align: center;">9th July 2018</td> <td style="text-align: center;">Room 407, 4th Floor, Lower Marsh / 14:00-16:30</td> </tr> <tr> <td style="text-align: center;">1st October 2018</td> <td style="text-align: center;">24th September 2018</td> <td style="text-align: center;">Room 407, 4th Floor, Lower Marsh / 14:00-16:30</td> </tr> <tr> <td style="text-align: center;">10th December 2018</td> <td style="text-align: center;">3rd December 2018</td> <td style="text-align: center;">Room 407, 4th Floor, Lower Marsh / 14:00-16:30</td> </tr> </tbody> </table>	Meeting Date	Papers due by	Location / Time	9th April 2018	2 nd April 2018	Room 407, 4 th Floor, Lower Marsh / 14:00-16:30	16th July 2018	9 th July 2018	Room 407, 4 th Floor, Lower Marsh / 14:00-16:30	1st October 2018	24 th September 2018	Room 407, 4 th Floor, Lower Marsh / 14:00-16:30	10th December 2018	3 rd December 2018	Room 407, 4 th Floor, Lower Marsh / 14:00-16:30	
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