

LCCG Safeguarding and LAC Working Group
27th March 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
Ann Lorek	AL	Acting Designated Doctor Safeguarding Lambeth
Angelina Barton	AB	Interim Business Manager, LSCB
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
Sabina Malique	SM	LSCB Board Manager

Absent		
Daniel Stoten	DS	AD Integrated Children and Maternity Commissioning, Lambeth CCG
Adam Curtis	AC	Named Nurse for Lambeth Community
Barbara Shelly	BS	Nursing Safeguarding Children Lambeth
Paul Archer	PA	Named Nurse for Safeguarding Children, SLaM
Rosalinda James	RJ	KCH Named Nurse-Safeguarding Children, KCH
Gerry Egan	GE	Lead Safeguarding Practitioner & Clinical Specialist
Debbie Saunders	DS	Head of Safeguarding Children Nursing team, GSTT
Meme Obasohan	MO	Commissioning Support Officer, LCCG

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	Apologies had been received in advance of the meeting from: Debbie Saunders (DS)Head of Safeguarding Children Nursing team, GSTT Rosalinda James (RJ) KCH Named Nurse-Safeguarding Children, KCH	

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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 12th December 2016 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 • MH -Designated LAC Nurse has been recruited to; a start date will be confirmed by DS and fed back to all. Action: DS to confirm start date for Designated LAC Nurse • MARF form (Multi-agency Referral Form) has been updated and will be reviewed at LSCB this week • ABJ mentioned that it will be helpful to get update on the action logs before meeting to cut down on the number of discussions • ABJ asked members about opinions on how this meeting currently works; her impression so far is that this meeting is used for updates on our safeguarding arrangements. ABJ proposed that going forward it will be helpful to have a clearer work programme and to focus on key priorities and changes. • AWM advised that the meeting should cover the S11 governance arrangements and NHSE governance and accountability framework for safeguarding. This includes an overview of training, supervision, etc. The minutes are reviewed and reported to the IGC. • Group agreed it will be good to have a more forward looking approach to the meeting and to re-circulate the terms of reference to everyone Action: AWM to recirculate terms of reference to group • In terms of immediate priorities, ABJ highlighted three priorities, which includes: ¹.to have an overview of Health Initial Assessments for LAC, ².Social Services Front Door and Young People at Risk Task and Finish Group and ³.what Health contribution is to this piece of work • LCCG responsibilities are to coordinate and improve the health economy's contribution to safeguarding and LAC in Lambeth. 	
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	<ul style="list-style-type: none"> AM highlighted this group' strategic and leadership role in safeguarding innovation and practice change and development. For example, the development of an EMIS algorithms to look for indicators of neglect. Which working group should take this work forward, LSCB, and or the Children & Maternity Programme Board? DV the GP IRIS project, when was the last time the IRIS Scheme was reviewed strategically, (this sits Adults), there is relationship with the SLAC if the adults are parents. AM, suggested an away day to plan further the strategic development of the SLAC working group objectives and key priorities. Action : Add away-day to agenda for next meeting 	
5	<p>LCCG/SLWG/005 – LCCG Provider Self-Assessment-CQC/ Ofsted Inspection</p> <p><i>Health partner are requested to discuss their provider health self-assessment and pre Inspection preparation.</i></p> <p>AWM -It was agreed at previous meetings to have the provider health self-assessments (CQC/ Ofsted) as a standing item on agenda. Each provider to give a verbal update at these meetings about their preparedness There should be a rolling RAG rated action plan that demonstrates progress on areas identified as amber or red.</p> <p>ABJ agreed that self-assessments should be updated regularly in readiness for: CQC, & The Joint Targeted Area Inspections (JTAs) . The 2017 'deep dive' theme is children living with neglect.</p> <p>Action: ABJ asked each provider to present their self-assessment document at the next meeting so that we can have an overview of any issues.</p> <p>AWM to disseminate JTAs framework information</p>	
6	<p>LCCG/SLWG/006 – Looked After Children (LAC) Health Updates / Reports</p> <p><i>The Committee / Group was asked to review and note an update from Dr Efun Johnson – Designated Doctor for Looked after Children</i></p> <p>EJ- The timeliness of referrals for IHA by CSC remains a concern, this is a legal requirement. There are plans in place to address this. EJ receives a weekly spread-sheet. The LAC health team are working closely with CSC, LAC AD and mangers to identify and address some of the complexities/barriers across the system.</p> <p>ABJ- There has been changes made to the referral forms which potentially should speed up the process.</p> <p>EJ-Highlighted the baseline information needed for the initial assessment, but any duplication on the forms is being taken out and the form will be piloted to see if it improves things. The BAFF form will still need to be completed.</p> <p>AWM- It will be beneficial for the LAC quarterly report to be supplemented with a narrative account about the progress made with the work plan, and the clinical overview. Additionally, to know the impact and added value of CYPHP 0.5 LAC post.</p> <p>ABJ asked if there was jointed dataset that enables us check on a regular basis whether systems put in place for LAC referrals and notifications are working</p> <p>EJ said there is not a jointed dataset but Health are aware of the numbers of LAC and are currently looking at their system to make sure there are enough slots to see all LAC,</p>	

	<p>however the referrals are entirely Social Care's responsibility</p> <p>AL- Good practice is to have a system in health for tracking LAC to see those who have left care or new arrivals. This has been an operational system oversight, partly to administrative capacity.</p> <p>ABJ - Agreed it will be good to have a clear sense of how the process should work, highlighting any issues about capacity in order think about what could be done to address gaps</p> <p>EJ - Reported that for the Out of Borough Children (OOBC), there is an established system, as soon as they get notified, provider sends information to ensure that we capture as much as we can and offer to do their Health Assessment and then sign a service level agreement.</p> <p>AWM- Asked for the data for OOBC to be included in the LAC quarterly report.</p> <p>AM asked about immunisations data of LAC and what was happening, this was also raised in the last CQC inspection.</p> <p>AL- Retrieving immunisation data is an area of concern. The care notes system has had to be rebuilt as there are problems with the changeover coupled with admin issues.</p> <p>EJ- Unfortunately there has being no immunisations done for almost a year now. However, the LAC feedback following engagement and activity session was that LAC did not want unexpected immunisations; they did not want to come to clinic and be immunised. The new Designated Nurse will be picking up on immunisation when she starts and will be looking at the spread-sheet. Lambeth have approximately an 80% immunisation rate which is better than it was. The issue is that the data isn't feeding through and does not reflect the true picture.</p> <p>Action: Designated LAC Professionals to supplement the quarterly LAC report with qualitative narratives to inform the SLAC group of the progress on KPIs and work plan. OOBC data to be included.</p> <p>Action : EJ to 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</p> <p>Action: Request report from CYPHP Nurse as part of LAC digest</p>	
7	<p>LCCG/SLWG/007 – GSTT Performance and Quarterly Reports and Multi Agency Safeguarding Hub (MASH)</p> <p><i>The group was asked to review and note update from Debbie Saunders – Named Nurse, GSTT and the verbal update from Margaret Hill – Named Nurse, Lambeth Community GSTT. The GSTT Performance Report</i></p> <p>MH highlighted the following:</p> <ul style="list-style-type: none"> • Trust is compliant on both Level 2 and 3 safeguarding training • Workforce- all vacancies have been filled and the Nurse Specialist Safeguarding post has gone out for advert for recruitment • There has been a decline in the number of children subject to a CP plans and this seems to be happening month on month 	

- Child Protection Medicals the numbers of medicals has also decreased.

AL highlighted that there has being an increase in the numbers of Child Protection Medicals recently, more children was seen again in December and fewer in January, but December and February seem to be higher than have been seen in presiding years. 30 Children were seen at the same period the year before compared to 41 now.

ABJ advised to raise issue about drop in numbers/change formally at the Safeguarding Board so that everyone can have shared understanding of why and what it means for the system.

AL- that for CSA, the reason is partly because the Haven has changed some of their referral criteria

- There is a decrease in MARAC cases. The MARAC Sub-Group have started up again after a gap for about one year
- MARP panel have changed to a full day with the morning looking at children at risk of CSE and the afternoon incorporating missing children therefore numbers are expected to go up
- GSTFT Supervision Policy has been updated January 2017.
- There is Task and Finish Group that have been set up to look the processes in place within Acute in the community
- The School Nursing Health Assessment Form is now going to be used as a Case Conference report; it will be used for the basis of supervision in order to cut down on the repetitive reports they have to write.
- A flow sheet for MASH information sharing and follow up is being devised

AWM - requested that the SLAC quarterly report be strengthened to include; Midwifery, FGM, FNP, EI HVs to report on case load numbers, CIN and those subject to CPP.

AM- Asked what was currently happening with triaging of School Nurse work flow and mentioned that some years ago the flow of A&E slips was audited

MH explained that when any child under the age of 18 goes into A&E, a symphony slip is generated to be signed off the next morning and anyone with major concerns are highlighted. A RAG rating is used, i.e. red for immediate action, amber for follow-ups and green-fine and no further action.

Action- ABJ asked for a report for next meeting, MH to highlight any areas for concerns Midwifery, FGM, FNP KPIs to be included in the GSTFT quarterly reports

Action- AM to talk about Neglect audit and deep dive that is being planned for the summer

MASH Update:

- Number of Children subject to a MASH enquiry has decline again this quarter.
- There continues to be a fortnightly practitioners meetings.

	<ul style="list-style-type: none"> • CSC have commissioned a Consultant to undertake a review of the MASH which will conclude at the end of this week. • There remains no access to the Children Social Care Mosaic records, by the MASH HV. This continues to impact on HV ability to appraise and analyse information in relation to complex cases and consequently share risks with health practitioners. 	
8	<p>LCCG/SLWG/008 – KCH Performance and Quarterly Reports</p> <p><i>The group was asked to review and note update from Rosalinda James – Named Nurse, Kings College Hospital. Enc - KCH Governance Report April– June 2016.</i></p> <p><i>Item not discussed as Rosalinda James was absent</i></p>	
9	<p>LCCG/SLWG/009 – Slam and CAMHS Performance and Quarterly Reports</p> <p><i>The group was asked to review and note update from –Gerry Egan - Named Nurse for Safeguarding Children, SLaM -Enc – SLAM Quarterly Report presented by David Grafton</i></p> <p>DG reported on-going problems with retrieving SLaM data. Unfortunately there have being some roles/post rationalisation and the data analyst is no longer in post. DG said he is hoping that the gaps in this reported will be filled in the next month or so and he will send an updated report through</p> <p>DG however reported low case conferences attendance due to the fact that although there is a lot of case conference, the invites come through late and therefore the clinicians are unable to attend because of other work commitments. Clinician however still makes necessary contact with CSC to provide updates. This has remain an on-going problem</p> <p>Action : Future SLaM report to include a narrative report as well</p>	
10	<p>LCCG/SLWG/10 – Child Death Over View Panel</p> <p><i>The group received a verbal update from Dr Abdu Mohiddin, Children’s Public Health Consultant. Public Health Summary.</i></p> <p>AM reported:</p> <p>OFSTED Inspectors are in Southwark, AM was interviewed last week along with the Neonatal Panel Chair. Although this is not directly relevant to Lambeth, we are joint CDOP. They asked about admin support, this has been a major problem, however, talked about the new team in place and what the team is doing</p> <p>The inspectors also asked about representation and critically there was lot of discussion about challenge in meetings including CDOP.</p> <p>Their indicative judgement/report will be known by the end of this week</p> <p>AM also reported that they had an update at the London CDOP meeting about new review for Children with Learning Disability and because of the Child Review process already, we will be asked for extra items</p>	
11	<p>LCCG/SLWG/011 – Independent Contractors</p> <p><i>Update from Dr Alison Davidson – Named GP, Lambeth CCG.</i></p> <p>AD reported on Level 2 & 3 Child Protection Training. Level 3 training has had Social Care session</p>	

	<p>has been embedded in training. SCR and learning is also embedded as well as LSCB neglect audit</p> <p>There seem to be on-going issue around CSC sending invites to conferences and GPs not sending case conference reports. The GPs' feedback was that they are not getting invited to conferences and also do not have correct contact details when invited</p> <p>ABJ suggested having Young People at risk on Part 1 of future meeting agenda to discuss any issues that needs giving special attention to. Part 1 of meeting to be what are the key issues and Part 2 –standing updates from Providers</p> <p>Action: Meme to 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</p>	
12	<p>LCCG/SLWG/012 – LSCB Executive Minutes</p> <p><i>The group received an update and feedback from the minutes of the meeting from Sabina Malique.</i></p> <p>ABJ presented a set of slides developed by Sheleena Powtoo, the formal LSCB Business Manager following conversation from the last Safeguarding Board Meeting. Josie Collier had presented a report to the last Safeguarding Board about the work she has being doing with the Front Door, however Josie is leaving at the end of this week.</p> <p>Sheleena has being doing some work on End to End Process Review in Children and Social Care, which is about helping Children and Social Care get their Policies and Procedures in order around the Child's Journey.</p> <p>Sheleena identified some clear objectives in report which includes:</p> <ul style="list-style-type: none"> • Establish a single point of contact across Social Care and Early Help • Clarify which cases get step-down either into universal or Early Help Services as they come through MASH • Clarify the roles and involvements of Partnerships and being able to communicate Partnership arrangements <p>ABJ highlighted some of the deliverables set out in report, there has been issues about the different terminologies used, e.g. what is a contact, referral, MASH, and First Response Team. ABJ noted that currently it appears MASH and the First Response Team sits slightly separately from each other rather being an integrated hub. The proposal is to have a holistic integrated service</p> <p>Report gives a number of recommendations in terms of implementation, however the key next step is to have the discussion at the LSCB to get an agreed view of what we want the Front Door to look like and agree on the forms, emails etc.</p> <p>ABJ asked group about any issues or points they will like raised/feedback at the safeguarding Board on Wednesday</p> <p>AWM suggested having some KPIs that distinguishes and acknowledges professional referrals</p>	

	<p>MF noted that not every case should go through the MASH process, it should only be for cases where there is a threshold issue or the information does not allow the Front Door to make a judgement. MASH should sit behind the Front Door not in front.</p> <p>AWM – Highlighted that clarity is required about the process; if there is consent, the case does not necessarily need to be MASH as there is already consent to share information anyway.</p> <p>ABJ said we will need to get a clear protocol around what cases should be subjected to the MASH process..</p> <p>Action: ABJ asked all to send any other comments and feedback to AWM or her before Wednesday</p>													
13	<p>LCCG/SLWG/013 – Serious Case Review</p> <p>AWM reported that:</p> <ul style="list-style-type: none"> • SCR J -waiting for a Coroner’s pre-meeting. • SCR K- have just had first meeting and working through the process • SCR L- Croydon has had the Practitioner’s event and is waiting for report. SM updated that there is a draft report and a Panel Meeting tomorrow to consider the draft report and SCR Sub-Group next week • SCR TB Greenwich- has GP involvement for Lambeth. • Lambeth SI will be discussed at the next Panel Meeting in April 													
14	<p>LCCG/SLWG/014 – FGM <i>The group was asked to review Enc- FGM Safeguarding Pathway</i></p> <p>AWM presented new FGM guidance to Group, there is a quick guide for health professionals and some service standards for commissioners. There is also new guidance around disability and mortality process</p>													
15	<p>LCCG/SLWG/015 Any Other Business</p>													
Future Meetings														
16	<p>LCCG/SLWG/015 – Dates and times of future meetings 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 style="background-color: #d9e1f2;"> <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;">26th June 2017</td> <td style="text-align: center;">19th June 2017</td> <td>Lewisham and Greenwich Room ,4th Floor Lower Marsh</td> </tr> <tr> <td style="text-align: center;">2nd October 2017</td> <td style="text-align: center;">25th September 2017</td> <td>Room 407, 4th Floor, Lower Marsh</td> </tr> <tr> <td style="text-align: center;">18th December 2017</td> <td style="text-align: center;">11th December 2107</td> <td>Lewisham and Greenwich Room ,4th Floor Lower Marsh</td> </tr> </tbody> </table>	Meeting Date	Papers due by	Location / Time	26th June 2017	19 th June 2017	Lewisham and Greenwich Room ,4th Floor Lower Marsh	2nd October 2017	25 th September 2017	Room 407, 4 th Floor, Lower Marsh	18th December 2017	11 th December 2107	Lewisham and Greenwich Room ,4th Floor Lower Marsh	
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LCCG Safeguarding and LAC Working Group Action Log: 27th March 2017

Item	Action	Lead	Completion
Minutes/ Matter Arising			
4 LCCG/SLWG/15/004 – Minutes of the Previous Meeting held on 12th December 2016 and Matters Arising			
4.1	Add CYPHP programme update to future agenda	AWM	
4.2	Confirm start date for Designated LAC Nurse	DS	
4.3	Add away-day to agenda for next meeting	AWM	
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	
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	
6.3	Request report from CYPHP Nurse as part of LAC digest	EJ	
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 share understanding of why and what it means for the system.	ABJ	
7.2	FGM KPIs to be included to 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	
9 LCCG/SLWG/009 – Slam and CAMHS Performance and Quarterly Reports			
9.1	Future SLaM report 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 case conferences	MO	
	Have Young People at risk on Part 1 of future meeting agenda	AWM	

Item	Action	Lead	Completion
15	LCCG/SLWG/015 Any Other Business		
	All to send any other comments and feedback to AWM or ABJ before Wednesday	ALL	