

DEVON LOCAL SAFEGUARDING CHILDREN'S BOARD

Minutes of the Meeting held on Friday 30th March 2007 at Buckfast Abbey Conference Centre

Please note that a copy of these minutes and minutes of previous meetings of the Devon LSCB can be accessed at:-

www.devon.gov.uk/index/cyps/child-protection/devonlscboard.htm

Present

Anne Whiteley, Director of Children & Young People's Services
Deborah Booth, Strategic Project Manager for Educational Achievement of Children in Care
Chris Dimmelow, Children's Safeguarding Manager, Devon Children & Young People's Services
Derek Moore, Assistant Director of NCH Devon and Cornwall
Jane Richards, Portfolio Holder, Devon Local Medical Committee
Alison Kearnes, Assistant Director, NSPCC Devon, Dorset & Cornwall
Helen Hyland, Designated Nurse - Child Protection - Devon
Maria Kasprzyk, Policy & Performance Improvement Manager, Devon County Council
Charles Holme, Designated Doctor – Child Protection – Devon
Julie Hammacott, Principal Education Welfare Officer
Janet Phipps, General Manager for Women's and Children's Services, Northern Devon Healthcare Trust
Colin Terry, BCU Commander for North and East Devon, Devon & Cornwall Constabulary
Claire Mitchell, Nurse Consultant (Safeguarding Children) RD&E NHS Trust
Michele Thornberry, Named Nurse – Child Protection - Devon
Lucy Beckwith, Operational Manager Child Health, South Devon Healthcare NHS Trust
Martin Quaintance, Social Worker – Willowbrook Project (attending as observer)
Frances Hunt, Child Protection Officer, Exeter (attending as observer)
Julie Phillips, Administrator/Minute Taker

Apologies / copy of minutes to

Laura Spittles, Named Nurse – Child Protection, Devon NHS Partnership Trust
Adrian Childs, Devon Partnership Trust
Roy Tomlinson, Adva
Peter Hancock, Mid Devon District Council
Madeleine Jackson, Senior Crown Prosecutor, Crown Prosecution Service
Bob Brown, Head of Community Support Unit, Devon & Cornwall Police
Peter Jeffs, Director of Communities, East Devon District Council
Liz Smith, Clinical Lead, Devon PCT
Martin Spragg, Youth Offending Services Manager
Corinne Hayes, Consultant Paediatrician, RD&E NHS Trust
Ann Morecraft, Designated Manager – Child Protection, Devon PCT
Kevin Peers, Interim Assistant Director (CYPS)

Others Invited

Cathy Ellingford, Children's Lead Representative (SW Region) Devon PCT
Mary Mitchell, Assistant Chief Officer, Devon & Cornwall Probation Service
John Davey, Director of Service Delivery, Connexions
Peter Adey, Directorate Manager, RD&E
Piers Tetley, Devon County Council
Graeme Barnell, Adult & Community Services

Deborah Booth opened the Meeting and chaired until the arrival of Anne Whiteley.

1. APOLOGIES FOR ABSENCE

Apologies for absence were received from Roy Tomlinson, Laura Spittles, Adrian Childs, Peter Hancock, Peter Jeffs, Madeleine Jackson, Bob Brown, Liz Smith, Martin Spragg, Ann Morecraft and Corrine Hayes.

2. MINUTES OF THE LAST MEETING

Accuracy

Page 8 – note the correct spelling of Amanda Cox's surname.

Page 11 – note that case TB (new Case) had a heart condition.

Page 12 – note that Corinne Hayes is no longer the Named Doctor for the RD&E Trust. Ron Smith is the Named Doctor for Exeter and East Devon. Also that at least one of the following: Claire Mitchell, David Tomlinson, Corrine Hayes and Peter Adey attend LSCB meetings and so all need to be sent agenda and supporting papers for each meeting.

Matters Arising

Page 4 – Chris Dimmelow had re-issued the terms of reference of the Domestic Violence Sub-Group. He needed to have some detailed discussion with Roy Tomlinson as to how this sub-group was represented on the LSCB.

The terms of reference of the Domestic Violence Sub-Group were accepted by the LSCB.

ACTION:

CHRIS DIMMELOW TO DISCUSS WITH ROY TOMLINSON HOW THE DOMESTIC VIOLENCE SUB-GROUP IS REPRESENTED ON THE LSCB.

Page 5 – Chris Dimmelow reported that Martin Spragg had sent out the consultation document, and the consultation period was now closed.

Page 7 – Training Sub-Group – Michele Thornberry was welcomed to her first LSCB meeting.

Page 10 – Deborah Booth noted that the matter of the Joint Area Review Action Plan would be picked up by Anne Whiteley when she joined the meeting.

Page 10 – Chris Dimmelow confirmed that LSCB members had been given a list of members of the JAR Monitoring Group and the PAT Board, plus their e-mail contact details.

Page 12 – Chris Dimmelow confirmed full agreement had been reached with all parties with regard to the content of the Executive Summary regarding Child Minder DH, and understood this document was about to be issued to all sets of parents. Charles Holme added that he and Bob Brown planned to see the parents also. Chris Dimmelow confirmed that OFSTED had been in contact with Bob Brown regarding aspects which should not be mentioned in terms of providing feedback to the parents.

ACTION:

CHARLES HOLME AND BOB BROWN TO LIAISE REGARDING MAKING ARRANGEMENTS FOR JOINT VISITS TO ALL THE PARENTS CONCERNED REGARDING CHILD MINDER DH.

Page 13 – Advice Leaflet regarding Child Protection in Schools – Juliet Hammacott confirmed that these leaflets were in the process of being sent to all schools via the Education Welfare Service. Twenty five leaflets would be sent to each school, along with an explanatory covering letter to Head Teachers of primary, secondary and special schools.

ACTION:

JULIET HAMMACOTT TO CHECK WITH BEVERLEY DUBASH WHETHER THE CIRCULATION INCLUDES LINK EDUCATION.

Page 13 – Criminal Records Bureau Checks

ACTION:

LIZ SMITH TO CONFIRM TO THE JUNE 2007 LSCB MEETING THAT DEVON PCT ROUTINELY DOES THREE YEAR CRB CHECKS OF STAFF WORKING WITH CHILDREN.

Page 14 – LSCB Development Day – The venue for this event has still to be confirmed.

Page 14 – GMC Consultation re Guidance for Doctors with regard to Children and Young People – Jane Richards confirmed she had drafted a response on behalf of the LSCB and sent this to Chris Dimmelow.

Page 15 –

ACTION:

MAPPA UPDATE TO BE A ROUTINE ITEM ON EACH LSCB AGENDA.

3. REPORT OF THE TRAINING AND WORKFORCE DEVELOPMENT SUB-GROUP

Michele Thornberry drew to the attention of LSCB members changes in charges for the child protection foundation course. It was proposed that persons outside of the agencies contributing to the College of Trainers be charged more, a practice which would be more in line with the commercial sector. A 50% cancellation charge would be made where between 1-2 weeks' notice was given, and the full course cost would be forfeited if less notice was given.

Derek Moore expressed concern that the proposed charging, although of itself reasonable, would rule out attendance from the independent and charitable sectors. Chris Dimmelow in response stated that Devon County Council had been subsidising other attendees. Similar reservations had been voiced by schools who had to pay because they were not part of the College of Trainers, and also had to pay for the cost of supply staff. If there was an improvement in the LSCB's financial situation, it might be possible to consider some subsidy. The current costings were extremely good value for money nonetheless.

Deborah Booth thought the idea of making a charge for cancellations was a good idea, as was the requirement that a person's line manager gave a signed authorisation for their release to undertake this training.

Claire Mitchell commented that commercial organisations sought to make a profit, and she had thought the aim was to get as many eligible staff through the child protection foundation course as possible. Whilst she understood the need to be cost effective, nonetheless attendance on this course needed to be encouraged. Chris Dimmelow responded that the LSCB just wanted to cover the costs of training of those persons not part of the Training College, and if the LSCB wanted he would obtain the costing figures for perusal.

ACTION:

CHRIS DIMMELOW TO ASK KAREN BROWN FOR A BREAK DOWN OF COSTINGS IN RELATION TO THE PROVISION OF THE CHILD PROTECTION FOUNDATION COURSE.

It was noted that the sub-group felt the LSCB should have a logo reflecting what it did and in what context. Juliet Hammacott and Michele Thornberry suggested the idea of running a competition within schools to design a suitable logo. Any members of the LSCB with any suggestions/designs to liaise with Chris Dimmelow.

ACTION:

CHRIS DIMMELOW TO PURSUE THROUGH THE COMMUNICATIONS GROUP.

4. REPORT OF THE HEALTH SUB-GROUP

Helen Hyland reported that, since January 2007, the composition of the sub-group now included representation from Cornwall. It was felt that Cornwall welcomed this opportunity.

Charles Holme noted that Devon was up to complement with Named Nurses.

ACTION:

THE LSCB AUDIT TOOL RE CHILD DEATH SCREENING TO BE AN AGENDA ITEM FOR THE JUNE 2007 LSCB.

Chris Dimmelow advised that a full review of the MARAC system within Devon had just been completed. This was generally seen as being an appropriate way of dealing with high risk domestic violence cases. Referral in the scheme was largely via Police Domestic Violence Officers. It was considered the scheme was sufficiently well established to be able to accept other referrals, i.e. where agencies other than the Police had picked up on domestic violence concerns and wanted to refer these to MARAC.

Colin Terry advised that the Police were developing a piece of software, called MOSAIC, as a predictive tool. The idea of this was that it was possible to identify by postcode where people lived who were most at risk of domestic violence (people fitting into given lifestyle groups). British Crime Survey figures were overlaid into this.

ACTION:

AN UPDATE REPORT ON THE MOSIAC PROJECT TO BE A POSSIBLE AGENDA ITEM ON A FUTURE LSCB MEETING. COLIN TERRY TO SHARE DETAIL WITH THE LSCB AS APPLICABLE.

5. REPORT OF THE SERIOUS CASE REVIEW SUB-COMMITTEE

Case KB – Chris Dimmelow advised that John Ingham (Independent Social Worker) was writing the overview report in conjunction with Jane Richards, and a first draft document was imminent. The outcome was likely to be critical of the other local authorities.

Case AC – Chris Dimmelow confirmed that the Commission for Social Care Inspection were content with the overview report on this case.

Case KW – Chris Dimmelow advised that he had received the majority of management reports now. Helen Hyland and Claire Mitchell would be producing the overview report on this case.

Case RB – Chris Dimmelow made the point that this case was not known to Children's Services but there had been a significant Health involvement concerning the parents' mental health. Management Reviews had been requested and were under way. A formal Child Death Review would be undertaken by the Bristol hospital where the child died.

Case TL – Chris Dimmelow confirmed that a Child Protection Strategy Meeting had taken place. There was felt to be no evidence that this child's death was anything other than a tragic accident. The death was felt to be due to the child's physical presentation with Downs Syndrome and a chest infection.

Child XB – Chris Dimmelow advised that there might be an issue around parental responsibility as the parents of this child had been drinking, the father got up to feed the baby and could remember nothing else. A Strategy Meeting had been held.

Charles Holme commented that healthy infants sleeping with their parents was not seen as being dangerous. However, co-sleeping in cases where parents smoked and/or drank was dangerous, and co-sleeping on a sofa was an even more dangerous practice.

Charles Holme further commented that the TL and XB cases would have benefited from a joint medical/Police CAIU visit. There was a need to clarify with the PCT how Consultant Paediatricians were indemnified in undertaking this type of work, i.e. working outside of a hospital environment.

Helen Hyland observed that there appeared to be a trend of children coming to the attention of the LSCB with serious/life threatening injury who ended up surviving, whereas in the past such cases had resulted in child deaths. Chris Dimmelow in response noted that in the AC case, there had been a rapid and appropriate response which got the child to the RD&E Hospital and treatment commenced immediately. The latest information was that this child had made a complete recovery. Child SL suffered serious injuries but survived. Case KW involved a stabbing which was felt to be a cry for help, as the injuries to the child were superficial.

6. REPORT OF THE EDUCATION SUB-COMMITTEE

Juliet Hammacott reported that the Education Sub-Committee's next meeting was scheduled to take place on Thursday 26th April 2007.

Between 1st September 2005 and 31st August 2006, there were a total of 30 courses attended by Education staff. There were 109 attendees – 98 school staff, 9 staff from the independent sector and 2 staff from other educational establishments. In addition, there were 9 refresher courses run with 123 attendees.

With regard to the child protection awareness sessions, 180 such sessions were run in the abovementioned period, attended by 4,106 people.

At present, 95.6% of designated staff within schools had had whatever training they needed during this period. The percentage of persons not trained came down to 17 schools, all of which had been written to with a list of the training available. There would be follow up, although indications were that these schools were taking up the training on offer.

A further audit was due to be undertaken in September 2007.

It had been proposed that a letter be sent to schools each term to remind them to inform the Education Welfare Service of any change in their designated personnel.

Helen Hyland asked whether there were links into the independent education sector in terms of the provision of child protection training. Juliet Hammacott responded that independent schools had a duty under section 157 of the Education Act to safeguarding and promote the welfare of children. Chris Dimmelow added that independent schools should have a designated teacher for child protection. Also, any independent sector school DCC contracted with had to provide a copy of their child protection policy and procedures indicating how they would practice appropriately with regard to safeguarding (including safe recruitment) and general safe practice within the school regarding teachers and other adult staff, and pupils (especially with regard to residential establishments). Juliet Hammacott added that independent schools like LEA schools also had OFSTED inspections.

Juliet Hammacott confirmed there was an independent school representative on the Education Sub-Committee.

Jane Richards noted, re the KB serious case review, that KBs brother was deemed to be a victim also and it had not been possible to get information from the private school they attended.

Deborah Booth advised that she and Juliet Hammacott were provided with copies of OFSTED reports on independent schools and Deborah Booth checked them for any reference to child protection.

Deborah Booth on behalf of the LSCB thanked Juliet Hammacott for all her hard work with the Education Sub-Committee. Juliet Hammacott responded to say much of the credit had to go to Beverley Dubash.

Juliet Hammacott advised that Beverley Dubash had been appointed as Principal Education Welfare Officer, to take on this position once she had retired. Advertising for Beverley Dubash's vacated post was underway.

7. MULTI-AGENCY REFERRAL FORM/JAR ACTION PLAN

ACTION:

CHRIS DIMMELOW TO CIRCULATE THE PROPOSED NEW MULTI-AGENCY REFERRAL FORM TO LSCB MEMBERS AS SOON AS POSSIBLE.

Maria Kasprzyk advised that the proposed multi-agency referral form had gone out to full consultation. The completion of this form will replace the requirement for agencies to confirm their referral in writing. Data collected on the form is required to complete the integrated children's system forms used by social care.

To date, 100 responses had been received – 80 of which were from schools. The proposed form was based on a model currently used in Somerset and Kent and was in two parts – the first part comprised basic data needed to process a referral and the second part was based around the framework for assessment. It was on this part of the form that a reason for the referral needed to be stated.

Feedback was that Head Teachers were very unhappy about needing to seek written consent before making a referral, unless the matter was child protection. Another issue was the length of the document. Primary schools were more in favour of the concept than secondary schools.

It was recognised that for schools, this would represent a huge difference to current practices, whilst Health staff would be more familiar with completing this type of form.

Claire Mitchell made the point that the proposed new multi-agency referral form was not a replacement for telephone referrals. The form itself was not difficult to complete, insofar as the person filling it out just put in the information they had. Maria Kasprzyk added that, from the consultation, some people had said they appreciated knowing exactly what was required of them.

Chris Dimmelow asked if the completion of this form would be mandatory for non-child protection referrals. Maria Kasprzyk responded that she thought the form was felt to be a model for non AXS pathways. A letter is being sent to all agencies requesting their co-operation to complete the referral form and it will be mandatory for non-child protection cases. Practice Guidance would be going out to social care practitioners shortly for cases where consent had not been obtained to the making of a referral.

Juliet Hammacott asked what the new multi-agency referral form was like compared to the version used by schools. Martin Quaintance responded that all the information on the school form would be on the new form.

Charles Holme considered the new form was good, although he was concerned it did not cause confusion with the AXS pathway. Maria Kasprzyk confirmed the form was for non-AXS pathway learning communities.

Derek Moore affirmed that it was a good idea to share information. A large body of the work which went on with families and communities took place within the voluntary sector, and he had not previously been aware of this initiative. Maria Kasprzyk responded to confirm there had been consultation with the voluntary sector.

Martin Quaintance stated that the current practice was for a telephone call to be made to a referral co-ordinator, who passed the information on to a Duty Social Worker who would then telephone the referrer for more information. Agencies were meant to write up within 48 hours and sometimes this was not received at all. The proposed new form would be electronically completed and submitted.

Janet Phipps advised that the Northern Devon Health Care Trust were looking to draw up a new referral form and would be anxious to avoid any overlap. Before, for any child coming in, an alert would come up on the system. With the present systems, alerts were lost plus there was no access to the Register at night. The software provider, Fujitsu had come up with what they called a "work around" to improve the situation, and provided the Trust with a function whereby they could immediately refer out to other agencies.

Michele Thornberry observed that her work base, Honiton Hospital, could not e-mail confidential information to the Police or CYPS as the system was not secure enough.

ACTION:

MARIA KASPRZYK AND MARTIN QUAINANCE TO MAKE A PRESENTATION OF THE PROPOSED MULTI-AGENCY REFERRAL FORM TO THE 26TH APRIL 2007 MEETING OF THE EDUCATION SUB-COMMITTEE.

ACTION:

MARIA KASPRZYK AND MARTIN QUAINANCE TO RAISE WITH OLM AND FUJITSU THE ISSUE OF SAFE TRANSFER OF SENSITIVE INFORMATION BY ELECTRONIC MEANS.

At this stage, Anne Whiteley joined the Meeting and assumed the Chair.

In response to Lucy Beckwith, Maria Kasprzyk confirmed the aim to have an agreed format for the multi-agency referral form by mid-April 2007 at the latest.

Frances Hunt cautioned the need to be absolutely clear that users understood the issue of gaining consent and not needing to do so when there were child protection concerns. Martin Quaintance responded that this information had been put on the referral form and linked to the website. This was also covered in the practice guidance. Frances Hunt felt the matter also needed to be made very clear in child protection foundation training also.

Anne Whiteley commented that it was critical to get the multi-agency referral form implemented, and suggested the LSCB follow up its implementation with some qualitative management evaluation work. One of the reasons why safeguarding had been described as inadequate was because of confusion in the minds of practitioners. There was a need to be able to evidence and check that workers understood exactly what they were supposed to be doing.

8. JOINT AREA REVIEW ACTION PLAN

Anne Whiteley advised that prior to June 2007, a review of the Children and Young People's Plan had to be undertaken. Following on from that, in Autumn of 2007, a full annual refresh of the Plan would be undertaken and that meant another comprehensive needs analysis being completed. That fitted into the annual performance assessment process which this year would start with the

provision of a reviewed plan in June 2007 together with a self assessment on progress since the JAR culminating in a self-assessment judgement process. The top priority was to turn around the 'inadequate' judgement on safeguarding. To help with this process, Outcomes UK consultancy was working with the County Council. Anne Whiteley had asked them to look at a small number of performance indicators which would help us to judge an improvement from "inadequate to adequate". Anne Whiteley briefed the meeting on the regular meetings held with the DfES to monitor performance and the impact of external support (Outcomes UK) and partners.

Anne Whiteley had also asked Outcomes UK to identify particular areas where qualitative analysis was required including case audit. There was a need to be very sure that throughout every level of practice it was known what was going on and this could be evidenced and documented. It had been helpful to receive this week from the DfES descriptors of what the County Council would look like if they were judged to be 'outstanding'; 'excellent' 'good', 'adequate' or 'inadequate'.

ACTION:

CHRIS DIMMELOW TO CIRCULATE THE ABOVE INFORMATION WITH THE MINUTES OF THE MARCH 2007 LSCB MEETING.

THE LSCB TO HAVE DETAILS OF THE PERFORMANCE INDICATORS ABOVE FOR THEIR CONSIDERATION /AGREEMENT. FOR INCORPORATION INTO LSCB BUSINESS PLAN AND REGULAR SYSTEM MONITORING.

Anne Whiteley felt it was clear the inspectors in the Autumn would be looking at safeguarding and would look at children with special needs, another area which was criticised. They would want to see evidence of consistency across Devon including in what services were provided.

In preparation for the APA the Children's Trust and the Authority, have put arrangements in place as to how the process will be managed. One of the first actions being undertaken next week was a management meeting involving all senior managers across the county where they would look at / scrutinise evidence of performance regarding the five outcomes against these judgements.

Chris Dimmelow asked whether the annual performance assessment would include interviews with staff, or would it just look at the Performance Indicators and any other written evidence put forward. Anne Whiteley responded that she thought so, but the inspectors had only two days in which to cover a large area. Further details are awaited.

Alison Kearnes reported upon a recent NSPCC initiative whereby a multi-agency group would undertake a case audit of a small number of cases. Information would be gathered and presented back to the group to identify what lessons needed to be learnt, where there had been inconsistency of decision making, thresholds and service provision.

Charles Holme noted that an issue in serious case reviews was gaining access to agency notes and how to obtain permission to be able to do so. Maria Kasprzyk responded that over the past six months Gloucester had undertaken a multi-agency case file audit they had sent letter to all parties advising of this and asking recipients to get in touch if they had any objections.

Claire Mitchell advised that the RD&E Trust had asked the Devon Wide Group to audio all their safeguarding practices.

ACTION:

CHRIS DIMMELOW TO OBTAIN INFORMATION FROM ALISON KEARNES ABOUT THE NSPCC INITIATIVE AND REPORT BACK ON THE ISSUE TO THE JUNE 2007 LSCB.

9. CHILD DEATH SCREENING

Chris Dimmelow made a presentation of information from the regional conference.

The context in which child deaths was being considered was as follows:

- Victoria Climbié
- Children Act 2004
- Reforming of the Coronial Service
- Baroness Kennedy's report
- Concerns around judicial decisions in individual cases (including Trupti Patel, Angela Cannings)

The point was made that unexpected deaths included cases where a child had a chronic medical condition from which early death was expected, but death was unexpected at the time the child actually died.

Rapid response to unexplained child deaths:

multi-agency teams respond to all unexplained deaths

- carries out an immediate investigation of such cases
- undertakes types of investigation that relate to the current responsibilities of statutory agencies
- need on-call capacity
- collection of information in standard manner
- follow death through and maintain contact with the family at regular intervals

overview of all child death to be undertaken in the Local Authority area

- paper exercised based on information available from the rapid response team and other sources, including perhaps the Coroner.
- fixed team membership to review these cases
- rapid response team holds regular meetings

local child death overview panel

- set up by the Local Authority
- function of LSCB to ensure investigations carried out and data analysed
- population covered needs to be greater than 500,000 (in this respect it was noted Cornwall seemed to be looking towards linking in with Plymouth to meet this figure)
- rapid response team may cover more than one LSCB catchment area
- age range to be covered = birth to under 18 years is consistent with the 1989 Children Act).

Chris Dimmelow stated that from the last LSCB Peninsula Group, he wrote and offered a meeting on 10th May 2007 in Plymouth regarding the amalgamation of local authority areas to meet the abovementioned population requirement. Jane Richards thought whilst there was a need to have rapid response teams in a number of localities, it would be better to have the local child death overview panel covering the whole of the South West peninsula.

Colin Terry commented that the Police undertook rapid response work on a regular basis and so would offer whatever assistance they could into the process. Charles Holme in response noted the large number of Police Officers who had attended the Warwick child death conference, which was very pleasing.

Issues explored by CEMACH:

- feasibility of data collection
- what data should be collected?
- can preventable deaths be identified?

Issues explored by the Warwick team:

- evaluation of early
- 9 pilot sites chosen

- draw on CEMACH work

Further work on child deaths:

- development of statistical returns and national data collection
- development of training materials, both on-line and off line
- costing the resourcing of the new requirements

ACTION:

CHARLES HOLME TO E-MAIL ANNE WHITELEY, WITH GENERAL ISSUES FOR HER TO RAISE AT HER MEETING WITH JAYNE CARROLL, PCT COMMISSIONING AND DR VIRGINIA PEARSON TO CLARIFY HOW THEY WOULD BE COVERED BY THE PRIMARY CARE TRUST.

Child Death Review Processes

Charles Holme presented his consultation paper. He considered that after the Bristol meeting, there was a need for a peninsula response. There was a need to have rapid response teams in each Acute Trust area – ideally a few professionals in each area would have done the Warwick University training course and be available to work out of hours. There was a need for some clarification as to how Health professionals would be indemnified when working outside of their usual hospital environment. Some Paediatricians would feel uncomfortable working in a different environment. There was a need to ensure competencies and standards were not compromised. It was suggested that Community Paediatricians within each Trust might be more willing and able to work with the Police and Social Services to undertake home visits at short notice.

Another concern was the amount of time required in collating information and chasing agencies for test results, and the suggestion had been put forward of a local co-ordinator like a Health Visitor undertaking this work.

It was suggested that local co-ordinators provide reports to Child Death Review Panels.

Charles Holme advised that Professor Peter Fleming and his team were bidding for funds to run a one year project comparing Chapter 7 methodology with information being gathered by Health Visitors on a regional basis. Work would commence this summer and report back would be due in 2009. It was felt whatever option was eventually chosen, it was important to retain local connections by way of local staff and local knowledge of an area.

Anne Whiteley stated that as part of the developing Children's Trust Governance the Chief Officers' Commissioning Group was to meet up twice yearly – to try to ensure that their commissioning coincided with the planning cycles of various authorities. The first meeting of the Chief Officers' Group was scheduled for the end of April 2007.

ACTION:

THE LSCB AGREED THE RECOMMENDATIONS IN CHARLES HOLME'S REPORT.

IT WAS AGREED THE LSCB WOULD ENTER INTO NEGOTIATIONS WITH SOUTH WEST LSCBs REGARDING A CHILD DEATH SCREENING OFFICE IN THE PENINSULA IN ORDER TO BE ABLE TO GAIN FROM ECONOMIES OF SCALE.

CHARLES HOLME'S E-MAIL TO ANNE WHITELEY TO INCLUDE A REMINDER TO ASK JANE AND DR VIRGINIA PEARSON AT THEIR MEETING TOGETHER WHETHER THERE ARE ANY RESEARCH MONIES IN STRATEGIC HEALTH AUTHORITIES TO UNDERTAKE THE PILOT.

10. PRIVATE FOSTERING, DEVELOPMENTS AND INSPECTION FEEDBACK

Andrea Morris and Cathy Houlihan were in attendance for this agenda item. They reminded the Meeting that that private fostering covered distant family members and strangers rather than close relatives.

Andrea Morris made the point that this was the first time Devon County Council had been inspected for private fostering services.

The Fostering Service was awarded a 'good' grade for every five of the outcomes of Every Child Matters, and had five requirements to meet (compared with 12 in previous years).

Staff had been appointed specifically to work in private fostering – two Social Workers and Development Worker. The Development Worker, in conjunction with Education and Health colleagues, raised awareness about private fostering and networking in neighbouring Local Authorities and learning from other Local Authorities who had had private fostering in place for longer than Devon. The Fostering Services had linked effectively into BAAF who for a number of years had had a special interest group and BAAF linked to the national agenda and initiatives. There was small evidence of some of that work having an effect in terms of examples of the general public referring to the Fostering Service. One of the main areas to be worked on was how the service sat alongside CYPS colleagues. Across the country there were different models of delivery of private fostering and Devon needed to be making firmer decisions about which one was right for them.

Andrea Morris highlighted that, in Devon, language schools were a particular issue. Their response to date had not been good in terms of them giving information about carers who took on young people for more than 28 days. Over the past year, there had been an increase in notifications across the service and demand was outstripping response capacity. The Fostering Service was not meeting statutory deadlines for initial visits or assessments currently. Also over the past year it had been felt that the Fostering Panels were not the appropriate place in which to look at private fostering arrangements. This was also the view of the Commission for Social Care Inspection. Private foster carers often had very different backgrounds and arrangements deemed to be 'good enough' rather than 'parenting plus.'

In summary, Devon had made a good start in terms of putting together its private fostering service, the majority of requirements being met or nearly met.

Chris Dimmelow asked what the link was between private fostering arrangements and the LSCB. Andrew Morris responded that there should be very distinct communication strategies between the private fostering team, the LSCB itself and a regular report mechanism as clearly this was a safeguarding issue. There was a need to set up a commissioning route for the LSCB to ask the Private Fostering Safeguarding Sub-Committee to undertake work on behalf of the LSCB.

Jane Richards asked what statutory requirement there was for language schools to notify their arrangements to Local Authorities. Andrew Morris responded that if language schools were setting up a system bringing children under the age of 16 into host families for more than 28 days, they had a statutory responsibility to act within the legislation. The BAAF special interest group was taking up the issue of language schools with the DfES. The suggestion had been made of an awareness raising week. It was noted that the British Council had an involvement with some language schools, and they had a code of conduct for those schools to adhere to. Chris Dimmelow noted that language schools were not required to obtain Criminal Records Bureau checks on the adults who looked after their students.

Cathy Houlihan stated that the Fostering Service was receiving some notifications of foreign children coming to live in England for their education. Education Welfare Officers had taken this on very strongly as something to promote within schools. Devon had around 22-25 children most of the year in private fostering situations, some of whom were extremely vulnerable. Many were "sofa surfers". Last year, the Fostering Service was dealing with around 45 young people, most of whom were referred by CYPS.

Chris Dimmelow advised that a new Chair of the Private Fostering Safeguarding Sub-Committee was required, as Monica Summers (Independent Reviewing Officer) was unable to continue with that role.

Chris Dimmelow asked if the Private Fostering Safeguarding Sub-Committee could also be the approval panel. Andrew Morris responded that this could not happen, but membership of the latter could be drawn from the former.

Anne Whiteley thanked Andrea Morris and Cathy Houlihan for their report and presentation and offered the Board's congratulations on the outcome of the inspection.

ACTION:

A NEW CHAIR TO BE APPOINTED TO REPLACE MONICA SUMMERS AS THE CHAIR OF THE PRIVATE FOSTERING SAFEGUARDING SUB-COMMITTEE. ANDREA MORRIS TO COVER ON AN INTERIM BASIS.

A PRIVATE FOSTERING PANEL TO BE SET UP, WHOSE MEMBERSHIP MAY BE DRAWN FROM THE SUB-COMMITTEE.

THE FUTURE OF THE PRIVATE FOSTERING SERVICE NEEDS TO COME THROUGH THE COMMISSIONING ROUTE, BE BASED ON AN ANALYSIS OF OTHER MODELS OF SERVICE AND BE PITCHED FROM THE CHILD'S PERSPECTIVE.

IN THE MEANTIME, THE PRIVATE FOSTERING SAFEGUARDING SUB-COMMITTEE TO MAKE REGULAR REPORTS TO THE LSCB, TO INCLUDE: REGISTER; AGES; GENDER/ETHNICITY; DISABILITY; DURATIION OF PRIVATE FOSTERING ARRANGEMENTS; HOW OFTEN MEETING REQUIREMENT OF INITIAL VISIT.

THE ANNUAL DfES RETURN TO BE PRESENTED TO THE JUNE 2007 LSCB.

11. CONTACTPOINT (PREVIOUSLY CHILD INDEX)

Rob Weeks attended to make a presentation to the Board. He explained the change of name had been made by the DfES to more accurately reflect what the tool was seeking to achieve. Contact Point was intended to be a tool for practitioners aimed to work towards the five aims of Every Child Matters – be healthy; safe; enjoy and achieve; make a positive contribution; and achieve economic wellbeing. ContactPoint would be coming into force in 2008, and the software was currently being tested out. ContactPoint would be gradually rolled out to all eligible practitioners. Guidance would go for consultation in May 2007.

Rob Weeks gave an account of the perceived benefits of ContactPoint: this would be a national project run by the DfES in 150 Local Authority regions. The system would contain information on all children in England up to 18 years of age. Parents would not have the option to opt out.

Information held on the system would include a unique identifier number per child. Details would not be lost if, for example, a child moved home. Juliet Hammacott noted that in Devon there were 1000 children whose education was unknown. Rob Weeks responded that a practitioner would be able to search on any of the fields.

LSCB members expressed concern around the potential for 'losing' children and false identities being input. Rob Weeks explained that when a child moved, that would become apparent via data being updated on the school system, for example, or by a child presenting at a GP surgery.

In response to Jane Richards, Rob Weeks acknowledged the risk of data being duplicated, although ContactPoint would match data from various sources. The quality of available data would be very high as it would be the best available (over time).

Juliet Hammacott made the point that Education operated a system of unique pupil numbers, and it was known if a child changed school they were given another unique pupil number. She suggested

it would be better to use their child allowance number, on the basis that the vast majority of children were covered this way.

In response to Charles Holme, it was confirmed there would be an audit trail so that name changes etc could be tracked. In response to Julie Hammacott, it was confirmed that Local Authorities' missing persons officers would have access to the system.

Julie Hammacott pointed out that there was no legal requirement for a parent to inform the LEA that they were home educating their child, unless their child was educated at a State school beforehand. Some children had never been educated within the State system, and it was harder to get any information about them.

Anne Whiteley suggested one benefit of ContactPoint would be that the commissioning process would be better informed by way of the comprehensive information contained within that system.

Rob Weeks continued his presentation by saying there were between 3 and 4 million children each year who needed additional services, and so ContactPoint would contain the following additional information:

- lead professional contact details
- SENCO
- Sensitive services – mental health, sexual health and drug misuse (Will not show if a child is subject to a child protection plan, but would show Social Worker details). Consent from a child's parents would be required for sensitive services information to go onto the ContactPoint database. ContactPoint would record that child as being in receipt of a sensitive service but not the detail of this. The system user would have to contact a third party to broker contact with the provider of the sensitive service concerned.

Between the ages of 18 and 25 years, there was potential for young people to remain on ContactPoint if the young person concerned agreed to this and their carer felt it necessary. The aim would be to provide continuity of care/information.

Local projects had a duty to link in local initiatives (such as Care First) where it was felt that data would enrich the quality of data held on ContactPoint.

Principles of access:

- must be easy to access by practitioners
- system must contain good quality data
- the long term intention is that the practitioner accesses ContactPoint by their usual systems (such as Care First) or by direct Web access where this is not possible. The practitioner could also get data whilst away from their office via an operational support facility (with due security).

The aim was that ContactPoint would be updated from case management systems wherever possible.

Principles of security:

- design and operation to be subject to industry and governmental standards, plus independent audit
- practitioners need enhanced CRB approval and need to have basic IT skills before they can access the system
- practitioner logs in with a password and electronic token
- user has to specify reason for access when they log in
- every access goes to an audit trail so that patterns of unusual/suspicious usage can be investigated.
- a practitioner can shield some sensitive data in order to safeguard the welfare of the young person concerned, but there would be periodic review to determine the ongoing appropriateness of this.

Anne Whiteley noted that ContactPoint was receiving £110,000 funding for this year, some of which could be carried forward. Funding was available until 2009-10, after which it would become an operational expense for Local Authorities. Rob Weeks advised that a Data Manager would be starting work soon, who would be responsible for looking at local data sources.

Charles Holme made the point that the child health system was a universal system, hence there was potential for overlap between this and ContactPoint.

Chris Dimmelow asked what level of confidence was there that the quality of software as such with regular updates would go through smoothly? Rob Weeks responded that from Day 1, one could expect a number of national systems to be linked.

Anne Whiteley asked if the system was likely to crash with numerous practitioners logged on at any one time. Alison Kearnes raised the potential risk of cross-contamination. Maria Kasprzyk pointed out that not all professionals would have the same view on what to input – for example whether 'child's address' meant their main address or the address of their foster placement. Also, for fostered children, could their parental address be recorded?

LSCB Members raised concern at the potential for hacking into the ContactPoint system.

ACTION:

LSCB MEMBERS TO PUT IN WRITING TO ROB WEEKS THE ABOVEMENTIONED AND ANY OTHER CONCERNS AROUND CONTACTPOINT SO THAT HE CAN RAISE THESE DIRECT WITH THE DFES.

Rob Weeks raised the following implications for local safeguarding:

- ContactPoint would not record the fact of a child's name being on the Child Protection Register but would enable the child's Social Worker to record their involvement and indicate their wish to be contacted.

Anne Whiteley asked what risk analysis had been undertaken. Rob Weeks responded to confirm Devon had done one plus there was a national risk analysis. There was a Project Team, chaired by Ingrid Fisher to whom Rob Weeks had presented the Stage 2 plan.

- LSCBs would have special abilities in certain situations to look at an audit trail and section 47 investigations.

The point was made that out of hours usage and access in respect of children outside a practitioner's area would be highlighted as a potential misuse, which the operational support team would investigate with the relevant manager.

The Meeting agreed the need for a Devon response to the consultation process, and Anne Whiteley's suggestions of the need to link into to Information Governance plus that there should be some involvement from Devon County Council's Young People's Scrutiny Committee.

ACTION:

ROB WEEKS TO PROVIDE AN UPDATE REPORT TO THE SEPTEMBER 2007 LSCB MEETING.

12. NATIONAL REVIEW OF LSCB PROGRESS

Chris Dimmelow's report was considered by the Board. The point was made that a base budget only had been established for the LSCB.

Anne Whiteley made the point that a representative from the County Council's Scrutiny Committee had an open invitation to attend LSCB meetings, but this had not been taken up. Chris Dimmelow had been attending Scrutiny Committee meetings up until recently.

ACTION:

CHRIS DIMMELOW/ANNE WHITELEY TO RAISE WITH CHRISTINE CHANNON (CHAIR OF DCC SCRUTINY COMMITTEE) THE MATTER OF ATTENDANCE AT LSCB MEETINGS.

ACTION:

BOARD MEMBERS ARE ASKED TO MAKE ANY RESPONSES TO CHRIS DIMMELOW BY MID-APRIL 2007, WHICH WOULD THEN BE PUT FORWARD AS A SINGLE DEVON LSCB RESPONSE.

13. REGIONAL PROCEDURES

Chris Dimmelow had previously circulated an A4 poster and business card drawing attention to South West Child Protection Procedures (website contact www.swcpp.org.uk). He hoped to be able to get this onto the Devon website.

14. AXIS NETWORK CONSULTATION

The document entitled 'Developing Access – consultation on the next steps of the AXS programme' was received by the Board. In addition, Board members received a hard copy of the AXS consultation questionnaire, which can be completed electronically.

Charles Holme remarked that it was vital to get child protection representation into the teams as a way of working. Within Joint Agency Teams, child protection issues were held onto a little longer. There was a need to get child protection training into the AXS pathways so professionals could be aware of child protection issues in fulfilling their professional roles.

ACTION:

MARIA KASPRZYK TO RAISE THIS ISSUE.

15. SUBMISSION FROM THE NSPCC

Alison Kearnes presented the following documents to the Board:

- sheet entitled 'What are LSCBs being asked to consider doing?
- Paper entitled 'Safe Communities Toolkit'
- Questionnaire entitled 'Feedback on LSCB action concerning equal protection for children'
- NSPCC Spring 2007 Milestone: "Don't Hide It" – LSCB Briefing Notes

Alison Kearnes stated that the NSPCC believed children should have the same protection in law as adults from physical assault. The NSPCC strongly felt smacking children as a means of chastisement was wrong, and recognised some societies say it is unacceptable without attaching any penalty. When children are hit, this gives them the message that violence is acceptable, that this is how conflict is resolved – the danger being that children carry these beliefs into adulthood and use violence as a means of conflict resolution and/or chastisement of their children.

The Meeting felt that the LSCB could sign up to the Children are Unbeatable Alliance.

ACTION:

ALISON KEARNES TO DRAFT A STATEMENT TO BE INCLUDED WITHIN THE LSCB BUSINESS PLAN, AND TO BE PLACED ON THE WEBSITE.

Alison Kearnes reminded the Board that ChildLine joined with NSPCC in February 2006. ChildLine hold a different position on confidentiality in respect of the young people who use their service, and

there had been a lot of discussion with the government as to whether this needed to change. The current view was that unless a young person was reporting something which was life threatening, ChildLine's confidentiality policy would remain. This recognised that within society children found it hard to talk about abuse.

ChildLine would be moving from its current Newton Abbot base to Keble House, Exeter (next to the Crown Court) with effect from 19th April 2007 and would be co-locating with the Young Witness Scheme in Exeter.

Alison Kearnes explained that the Safe Communities Toolkit was a 3 year NSPCC initiative aiming to ensure that all children and young people in England and Wales could take part in organised activities safely.

Anne Whiteley suggested that there could be some link into the Community Safety Partnerships.

Deborah Booth suggested Dillon Hughes (Principal Youth Officer) would also have an interest.

ACTION:

ANNE WHITELEY TO RAISE WITH THE APPROPRIATE DEVON COUNTY COUNCIL 'CHAMPION'.

16. CONSULTATION ON SAFE PRACTICE GUIDANCE

Chris Dimmelow reminded the Board that this had been circulated a few weeks ago, and any comments should be submitted to the Government Office South West on the form provided.

17. ANY OTHER BUSINESS

(a) Maria Kasprzyk confirmed she had met with Richard Stevens regarding agenda papers going onto the website with appropriate securities being put into place.

(b) ACTION:

CHRIS DIMMELOW TO BOOK BUCKFAST ABBEY AS THE VENUE FOR THE FORTHCOMING DEVELOPMENT DAY.

(c) Anne Whiteley on behalf of the Board thanked Juliet Hammacott for all her hard work as a member of the Board, plus its predecessor the ACPC, as well as for her professional work with the Education Welfare Service. The Board wished her well in her retirement.

18. DATE AND TIME OF NEXT MEETING

The next LSCB Meeting will take place on Friday 22nd June 2007 at East Devon District Council Offices, The Knowle, Sidmouth.

Signed

Anne Whiteley

Director of Children & Young People's Services

Dated

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