

**Date:** 20<sup>th</sup> November 2017

**Time:** 13:00 until 16:00

**Chair:** Simon Westwood, Independent SSCB Chair

**Venue:** Committee Room 4, Civic Centre,  
Chorley Road, Swinton, M27 5AW

## Minutes

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### **1. Welcome and Apologies**

**Chair of meeting:**

Westwood, Simon Independent SSCB Chair

**Members in attendance:**

Mr Allsop, Chris	Superintendent, Greater Manchester Police (Representative attended)
Ms Armfield, Karen	Head Teacher, Boothstown Methodist Primary School
Ms Clancy, Karen	Deputy Director of Integrated Governance, Lead Named Nurse Greater Manchester Mental Health
Dr Dixit, Kalpesh	Designated Doctor, SRFT
Ms Ford, Emma	Head of Safeguarding, Salford City Council
Ms Hubber, Sharon	Assistant Director Specialist Services, Salford City Council
Ms Kelly, Clare	Assistant Director of Nursing, SRFT
Ms Patel, Andrea	Designated Nurse, NHS Salford CCG
Ms Pugh, Nicola	Community Director (Manchester, Salford and Trafford) Cheshire & Greater Manchester CRC (Representative attended)
Ms Ramsden, Charlotte	Director of Adult and Children's Services, Salford City Council
Ms Seale, Manjit	Assistant Chief Executive, National Probation Service
Ms Thorpe, Francine	Director of Quality & Innovation, NHS Salford Clinical Commissioning Group

**Officers in attendance to represent SSCB members:**

*Ms Marshall, Anne-Marie Services Manager, Salford CVS (representing Ms L Murray)*

**Officers from the SSCB in attendance:**

Ms Bentley, Vivienne (minutes) Senior Business Support Officer, SSCB  
Ms Slack, Tiffany Interim Business Manger, SSCB

**Other agencies or groups invited onto the Board as co-opted members and advisors**

<i>Ms Davidson, Kay</i>	<i>Youth Offending Service Manager, Salford City Council (Item 4)</i>
<i>Ms Long, Victoria</i>	<i>RIAT Practice Manager, Salford City Council (Item 3)</i>
<i>Ms Morris, Michelle</i>	<i>DCO (Item 5)</i>
<i>Dr Pike, Alison</i>	<i>DMO (Item 5)</i>
<i>Mr Dallimore, Damian</i>	<i>Programme Challenger Lead (Item 3)</i>
<i>Ms Dugdale, Nicola</i>	<i>Deputy Designated Nurse: Safeguarding Children and LAC, NHS Salford CCG (Shadowed Ms A Patel)</i>

**The Lead Member for Children's Services (participating observer)**

CLlr Walsh, John Elected Member

**Sub Group Chairs (attend when required):**

Mr Clitherow, Alan Detective Chief Inspector, Greater Manchester Police  
Mr Rumley, Tim Senior Youth Service Manager, Salford City Council (Item 3)

**Apologies received from:**

**SSCB Members:**

Ms Blackburn, Deborah Assistant Director: Public Health Nursing

Rabbi Grant, Simon                      Lay Member  
Ms Murray, Louise                      Deputy Chief Executive, CVS,

**The Lead Member for Children's Services (participating observer)**

Cllr Stone, Lisa                              Assistant Mayor: Services for Children & Young People

**Other agencies or groups invited onto the Board as co-opted members and advisors**

Ms Burfitt, Elaine                              Named Doctor: Community Child Protection, SRFT

**Not expected to attend**

**SSCB Members:**

Ms Browse, Laura                              Head of Primary Care, NHS England  
Mr Hassall, Anthony                              Chief Accountable Officer, Salford CCG  
Mr Herne, David                                  Director of Public Health  
Ms Nathan-Lingard, Sarah                              Service Manager, CAF/CASS

**Sub Group Chairs (attend when required):**

Mr Rumley, Tim                                  Senior Youth Service Manager, Salford City Council  
Ms Metcalfe, Madeline                                  Learning Support Service Manager, Salford City Council

**Other agencies or groups invited onto the Board as co-opted members and advisors**

Ms Armitage, Emma                                  Learning Support and Safeguarding Manager, Salford City College  
Ms Ashton, Lorraine                                  Solicitor, Manchester & Salford Legal Section

**Did not attend**

Ms McGovern, Jennifer                                  Assistant Director Joint Commissioning

**Presentation of Reports –**

**2. Neglect (Emma Ford)**

- 2.1. Ms Ford presented the report submitted by Sean Atkinson and included in the papers for this meeting.
- 2.2. There is a neglect audit underway at the moment, Mr Atkinson attended a recent Learning, Improvement, Performance Management and Quality Assurance sub group meeting to talk about the audit and future data set for neglect.
- 2.3. There is work in place to look at how we work with neglect in Greater Manchester as well as locally.
- 2.4. The neglect strategy and action plan have been revised, and are overseen by the Neglect group.
- 2.5. The report asks how we can better engage with children and young people, the graded care profile is very parent focussed and Mr Atkinson has suggested adding to this to add the child's perspective and welcomes any further suggestions.
- 2.6. The Chair commended the report and obvious activity in this area with the strategy, working group and links to Greater Manchester. The Chair asked for any general comments.
- 2.7. Ms Ramsden asked what the overview hopes to achieve and what support is required from the SSCB. Ms Ford informed that the overview provides the SSCB with information and assurance.
- 2.8. The Chair asked what indicators will be used. Ms Ford explained that this was discussed at the Learning, Improvement, Performance Management and Quality Assurance sub group and it was agreed to look at the indicators via the neglect audit and how this links with the neglect strategy. The audit will be made available to SSCB members
- 2.9. The Chair noted that two Greater Manchester Neglect meetings have been cancelled and asked if work is back on track and that agencies are able to sustain their support of this work. Ms Ford

acknowledged that there had been a delay in setting up meetings however the group is committed and all are happy to continue with this work.

- 2.10. 7 minute briefings have been circulated to SSCB and training distribution lists as well as being uploaded to the SSCB website (<http://www.partnersinsalford.org/sscb/7minutebriefings.htm>).
- 2.11. The audit report will go to the Learning, Improvement, Performance Management and Quality Assurance sub group to evaluate the impact before it is brought back to SSCB. Ms Patel informed that the Learning, Improvement, Performance Management and Quality Assurance sub group is working to get sub groups to have more ownership of their data and the Learning, Improvement, Performance Management and Quality Assurance sub group will have oversight.

**Action 2.1:** Ms Ford will confirm the neglect audit completion date.

### **3. Complex Safeguarding (Damian Dallimore)**

- 3.1. The Chair welcomed Mr Dallimore to the meeting and explained that Greater Manchester work is ongoing in this area, we need to identify what needs to be done locally or if we are confident the Greater Manchester work will be sufficient. Mr Dallimore is here to present the Greater Manchester work.



SSCB complex  
safeguarding present

- 3.2. The Chair noted that this presentation provides the broad picture and noted that Ms Blackburn would be able to focus the local needs and issues for Salford. This report does highlight the work of The Bridge and Phoenix and The Chair asked what we need to do more of, do better and where are the gaps.
- 3.3. Ms Slack commented that Ms Dallimore regularly attends the Complex Safeguarding sub group, which met last week and focussed on Prevent. Gemma Rice attended the meeting and gave assurance and noted where gaps and risks have been identified. Ms Rice has agreed to circulate a copy of the Prevent Action Plan to the Complex Safeguarding sub group; Community Safety Partnership has governance for this action plan.
- 3.4. There was some debate at the meeting regarding the local pathway, currently there is not a local policy on Prevent available on the SSCB website, and Ms Rice has agreed to provide a briefing to explain this as an interim measure. There are a number of Greater Manchester developments which are potentially hindering moving forward on local practice. The group were asking if practitioners in Salford are aware of local pathways and procedures.
- 3.5. Ms Patel noted that there has been an increase in the numbers of children and families coming through; including looked after children, as part of Prevent. The Chair noted that Prevent is led by Community Safety Partnership and suggested that we ask them to provide more assurance, this would minimise any duplication of work. The aim of this session is to increase knowledge and be clear about the governance; The Chair can raise any issues at the Inter Board Chairs meeting.
- 3.6. The Chair asked health colleagues for their views on post trauma therapy and asked if this has been identified as a gap. Ms Thorpe noted that she can see the benefits of a Greater Manchester approach and informed that all economies are looking at CAMHS and re-commissioning services in a different way, this will be included in commissioning arrangements.
- 3.7. Ms Ramsden noted that this presentation does not identify what is being done in Salford, the governance does lie with Community Safety Partnership and Salford has a comprehensive approach with guns and organised crime. There is a lot of proactive work ongoing in Salford.
- 3.8. Ms Hubber noted that we tried to join up the Manchester and Salford teams, this lost Salford's identity as a CSE team. This team does undertake a lot of good work which is not visible in Salford,

therefore it has been agreed have a single team for Salford and to expand this work. Children's services have worked with Alan Clitherow at GMP and Andrea Patel, NHS Salford CCG to produce a paper in response to the PCC GM review of CSE. Mr Allsop is proactively looking at this to identify how to work differently. CSE, missing from home and slavery are all part of complex safeguarding.

- 3.9. Ms Slack informed that plans are underway for a Complex Safeguarding conference in March 2018; this will showcase work locally and at a Greater Manchester level. The conference will be facilitated jointly with adult services.
- 3.10. Dr Dixit noted that the CAMHS transformation will look at the hub and spoke model for complex safeguarding, it also needs to look at factors that lead into complex safeguarding. A lot of research on neglect of children indicates warning signs as behaviour changes, educational attainment and criminality. We should not lose sight of these primary factors and they should be included in the overall Greater Manchester plan when we provide supporting networks. We also need to look at how we include this in education for children, such as the Run, Hide, and Tell campaign to teach children what to do in the event of a terrorist attack.
- 3.11. Ms Armfield informed that schools are looking at how to teach this to younger children, without frightening them. Schools are looking at in-vacuation policies, for incidents where schools need to keep children inside for their safety.
- 3.12. Ms Thorpe asked how discussions regarding commissioning arrangements are taking place. Mr Dallimore informed that there is a commitment to commission regionally and deliver services locally; this will need to be done in collaboration with local services.
- 3.13. It was noted that a CSE audit, commissioned by the Greater Manchester Mayor has a deadline of today to send papers in. The Chair will be attending a meeting with the Police and Crime Commissioner (PCC) regarding this audit.
- 3.14. Specific information has been requested from the SSCB, most of the information requested is OK to submit however the request includes reports to the SSCB on CSE, reviews and other information received on CSE. It was noted that the SSCB is not a public body and is therefore not subject to FOI requests. If it has been agreed not to publish information, this information will not be shared. Information is shared with the SSCB that is not made public, if this is shared outside of the SSCB we would not have any control over where else it is shared.
- 3.15. We also need to understand the purpose of the review, it may be to inform a needs assessment which would be positive; however it may be used to de-commission services and reduce funding. There has been some debate recently regarding PCCs not releasing agreed funds to LSCBs.
- 3.16. Ms Hubber informed that there is a meeting directly after this meeting to agree the papers that will be sent for inclusion in this audit, some of the information is from SSCB, and some is from Children's Services. The Chair informed that he has asked the PCC and there is not a current information sharing agreement in place in relation to information shared as part of the CSE audit.
- 3.17. Ms Ramsden noted that at the moment this is a desktop exercise, a decision will then be made to ascertain if anything further is required. There is a steering group in place and Jim Taylor is a member of this steering group.
- 3.18. **FGM (Andrea Patel & Victoria Long)**
- 3.19. Ms Patel introduced Vicky Long, Practice Manager who attended this meeting to present the FGM report included in the papers. This report is the first overview report including a deep dive of FGM cases. Midwifery currently report on every live birth and it is hoped to include an FGM assessment on this report.
- 3.20. Work has been undertaken to capture the ethnicity and location of women subject to FGM, central locality has the highest number currently and it is planned to target training in this area. It was noted that localities are defined differently by different agencies.

- 3.21. The process is that a strategy meeting is held for all FGM cases to identify if there is any further involvement required. There have been a number of inappropriate referrals of male children. Ms Patel informed that risk assessment models are being developed.
- 3.22. Ms Long informed that very few FGM Orders are taken out, there have been three in Salford, it has been more about signposting to services. It is unclear who holds the Orders; Mr Dallimore confirmed that it is a top priority for the hub.
- 3.23. Ms Patel informed that at the Greater Manchester FGM forum it was recognised that Salford is ahead in work regarding analysis and information sharing.
- 3.24. The Chair commended the report; it is helpful, gives clear indication of the needs and identifies vulnerable groups. This should be fed into Greater Manchester. Ms Ramsden agreed and noted that Greater Manchester midwifery pathways are being re-commissioned and Ms Blackburn is the Salford representative on this work. Ms Patel confirmed that she has discussed this with Ms Blackburn and noted that more investigation work is required to understand why referral numbers are low.
- 3.25. Ms Patel informed that the report outcomes are clear and they are keen to strengthen links with the Guardian Project. Ongoing issues will need to be built into plans.
- 3.26. The Chair noted there had been some discussion about inappropriate male referrals and recollected previous work regarding illegal male circumcision and asked if these could be linked. Ms Long agreed to address this issue in the next report. Ms Patel informed that the issue has been highlighted at a Greater Manchester level and there is call for more robust assurance.
- 3.27. The Chair thanked Ms Long for attending today; the report is well written and easy to read.

#### **4. YOS Business Plan (Kay Davidson)**

- 4.1. Ms Davidson attended to present the Youth Offending Service (YOS) business plan and assured that the service is working to this plan. The business plan is written as directed by the Youth Justice Board, the aim of the service is to reduce the number of young people offending and re-offending and also reducing the number of young people receiving a sentence. There has been a reduction in first time entrants and numbers receiving custodial sentence. It is harder for young people to receive court disposal now, this means that the rate of re-offending will increase although this is for a smaller cohort of young people.
- 4.2. Ms Seale noted that this is a good report and noted that with the ongoing budget restraints it is commendable that work is ongoing. Ms Seale asked whether there is an issue regarding young people in custody overnight. Ms Davidson informed that there is good oversight, a YOS representative attends every warning meeting and tries to prevent Orders being made. They receive a list each morning regarding arrests, who is in the cell area and who has been held overnight. They identify who should have been placed in a Pace bed.
- 4.3. Ms Ramsden highlighted that it is important to recognise that most of the people involved with YOS have less than ideal lives; there is a lot to learn from their life experiences. Ms Davidson confirmed that most of the young people are already known to services. Ms Seale noted that all offenders on the case study are open to Probation.
- 4.4. Ms Ford noted that there is a lot of national research regarding drives to offending and asked if there is anything additional we can do. Ms Davidson felt that family connections and their links to other families are important.
- 4.5. Ms Ford noted that this will link with criminal exploitation work. Ms Ramsden noted there are very different perspectives of vulnerable children, some are hardened criminals, and there are links with the young person's plan and also with the discussion on neglect earlier. It was also noted that many of these young people will also be parents.

## 5. SEND (Alison Pike and Michelle Morris)

5.1. Dr Pike and Ms Morris attended to present special educational needs and disabilities



SEND Presentation  
to SSCB 2017-11-20.1

5.2. Ms Armfield commented that from a school perspective many of the child protection issues for this group of children are due to parental wish which may not be the same as professional perspectives. Dr Pike acknowledged that we need to look at the full picture and often professionals can forget the reasons why, when addressing behaviour needs. Ms Patel noted that agencies have started to identify the links with other boards.

5.3. Ms Hubber informed that the culture is changing and reviews are being combined, e.g. LAC reviews and EHCPs can be undertaken simultaneously, reducing the number of meetings the family are expected to attend.

5.4. Ms Hubber is confident that all children who are subject to a child protection plan and have a disability can be identified. Ms Ford will liaise with Dr Pike to discuss how the meetings are booked in and discussions with the Chair are facilitated which can feed into the child protection plan or the step down plan. Dr Pike noted that work can be done earlier at team around the child level.

5.5. Ms Seale commented that Trafford did well in their SEND inspection and suggested contacting them. Dr Pike confirmed that they are looking at other authorities and their inspection results.

5.6. The Chair asked if the data helps or hinders and can it be identified if a child already has SEND involvement at the point of child protection referral. Dr Pike noted that there is one local authority system, but there are a number of health data systems, plans are in place to better connect these systems.

5.7. Ms Kelly noted that the learning from Child R serious case review identified the importance of a lead health professional and suggested exploring this role further as they would be the professional that would attend all of the meetings and be aware the child has SEND, EHCP etc. It was noted that the lead professional for a child is not necessarily a health professional. SRFT safeguarding team are able to access health and local authority systems.

5.8. The Chair noted that IRO and CP Chairs need to ensure mechanisms are in place to refer across to SEND and vice versa and test to ensure that objectives in plans are checked to ensure they are the same or compliment each other. Ms Morris informed that the outcomes are linked to the young person's aspirations, the young person and their family have input in this process. They are audited annually to identify if the outcomes have been achieved, partly achieved or failed to achieve and why.

5.9. Ms Thorpe noted that Salford City Council and NHS Salford CCG work well together.

5.10. The Chair thanked Dr Pike and Ms Morris for attending the meeting today.

## 6. Proposed Safeguarding Arrangements & WT 2018 Consultation (Chair)

6.1. The Chair informed that this paper is his report to the SSCB and includes all shared views.

6.2. The Chair has the responsibility to ensure current arrangements are sustained whilst new arrangements are agreed and implemented.

6.3. The proposed arrangements were shared at the SSCB development session in October and will be shared with the Salford Adult Safeguarding Board on 6<sup>th</sup> December 2017. A combined adults and children board meeting could be arranged in January if felt useful.

- 6.4. The Chair has met with the Chief Executive and he has agreed to convene a meeting with statutory partners in February to discuss the proposals. It is hoped that this meeting will make some decisions regarding the process and timetable of the proposed changes.
- 6.5. The Working Together 2018 consultation is open until 31<sup>st</sup> December 2017 and consultation meetings are ongoing.
- 6.6. The revised guidance is expected in April 2018 with a 15 month implementation period to give time to agree new arrangements, publish, verify and implement the changes.
- 6.7. The Working Together 2018 guidance is not prescriptive and does give permission to develop local processes. This gives the opportunity to look at broader issues and identify where there is any overlap.
- 6.8. Ms Seale noted that the proposals appear to be logical and reasonable and queried the proposal for Section 11 to continue. The Chair clarified that this proposal is to simplify the process, agencies will provide their own assurance and it is proposed to have a day for agencies to challenge each other regarding their assurance reports. It is a statutory duty for agencies to deliver safeguarding and without a Board to hold agencies to account; a shared event would be beneficial.
- 6.9. Dr Clancy informed that she recently attended Manchester Safeguarding Children Board's away day which was a similar process, during the afternoon event, agencies sat together to challenge and share learning. This was found to be a valuable process.
- 6.10. Ms Seale noted that the structure of Coordination and Delivery and SSCB layers can be onerous. The current structure means that a SSCB member wishing to Chair a sub group will also need to attend and present to the Coordination and Delivery group. The Chair informed that the Strategic Partnership would replace the network and there would not be as many at the strategic partnership meetings as there are at SSCB meetings. Coordination and Delivery would consist of sub group chairs and they would not necessarily be at the Board meetings.
- 6.11. Ms Ramsden expressed concern that the proposal includes an added layer of bureaucracy and asked what the purpose of the Safeguarding Executive would be and how this will link to the assurance board and Greater Manchester.
- 6.12. Ms Thorpe welcomed the proposals and attempts to articulate outcomes and asked about the lay member/community ambassador role. The Chair informed that he has met with the Lay Member and Vocal, the new guidance does not reference lay members. There is always some debate about how we communicate with communities and thought is being given to utilising lay members in community networks with a system to support them. The terminology for this process can be determined by the group. Leaders already meet with other community groups.
- 6.13. Ms Seale noted that the new structure includes joint sub groups and suggested arranging meetings on the same day which would benefit joint sub group reports. The Chair has discussed this with Steve Pugh, current SSAB Chair, it is clear the statutory role of Adult Safeguarding Boards is not changing and any changes should not weaken their statutory role. There could be a joint safeguarding assurance board which would need to be clear of the statutory function of SSAB. Mr Pugh is happy to meet on the same day but does not want the meetings to be combined.
- 6.14. It was not felt that practice review meetings should be joint meetings as there are different priorities for children and adults. The Chair had envisaged that the support and administration could be joint with relevant practitioners attending the meetings dependant on the review.
- 6.15. The Chair confirmed that the diagram includes all proposed sub groups and noted that if a sub group is not listed this does not mean the activity will cease, for example domestic abuse will report to Community Safety Partnership. This would need to be acknowledged in the children's arrangements. Complex Safeguarding and Neglect task and finish groups would remain in place until Greater Manchester processes are established.

- 6.16. The Inter-Board Chairs meetings have a joint protocol and terms of reference. The next meeting is scheduled for end of November. With this in place there is some assurance that issues are not being missed and there is commitment from all Chairs to take this forward.
- 6.17. Ms Seale noted there is potential for the strategic training group to be joint with the adult safeguarding board and asked if the group would still exist in the new structure with reports expected at Coordination and Delivery. The Chair clarified that if the group is joint, a decision is needed to clarify where the group reports, if the group stays as it is then a report to Coordination and Delivery would be expected.
- 6.18. It is important to maintain the goodwill and positive arrangements already in place with the Chief Executives of the Local Authority and NHS Salford CCG.

**7. Salford City Council's Response to Grenfell Tower (Charlotte Ramsden)**

- 7.1. Ms Ramsden informed that this report was asked for by the Chair in a letter to the CX and is included in the papers for the meeting for information purposes. When the fire at Grenfell Tower happened, there was a lot of local news coverage as there are a number of tower blocks in Salford which have used similar materials. This report is written in response to the concerns raised at that time.
- 7.2. The meeting accepted the report and the assurances provided within it.

**Business**

**8. Minutes of previous meeting, matters arising (Chair)**

- 8.1. There has been a delay in circulating the minutes, therefore it was agreed to accept any comments or queries on the minutes in the next seven days.

**9. Outstanding actions (Chair)**

- 9.1. There has been a delay in circulating the action log, this will be updated and circulated prior to the next meeting.

**10. Coordination & Delivery Group Update (Chris Allsop)**

- 10.1. The Coordination and Delivery update paper was circulated just before this meeting. Mr Allsop informed that he will be standing down as Chair of the Coordination and Delivery Group as he no longer has the capacity to undertake this role. The Chair asked members to consider if they would be able to undertake this role.

**11. SCR – verbal update (Emma Ford)**

- 11.1. Ms Ford informed that an audit of Section 85 notifications has been completed, it was recognised that there was not a clear way to identify how these cases have been referred in. This has been rectified and it is clearly marked. Parallel to this audit, trying to find out if health have a record of cases referred in. Ms Hubber informed that contact has been made with Alder Hey and CMFT, to ask if they have processes in place, they have requested more time to identify the processes. Ms Patel noted that we would want assurance that a process is in place.

- 11.2. Ms Ramsden suggested that this could link with SEND.

- 11.3. Ms Kelly noted that Salford Royal should also be contacted for details of any long term admissions for 16-17 year olds.

- 11.4. The Chair noted that the SSCB needs to have assurance that all providers are aware of their duty to notify the local authority, have a process in place and know how to follow it.

**Action 11.1: Ms Thorpe will take Section 85 Notifications to the Greater Manchester Quality Board and ask colleagues at the Board to check their arrangements and processes.**



## Key Local and National Issues

### 12. Feedback from:

- **GMSP**  
Action 12.1: The minutes of this meeting will be circulated.
- [Children & Young People's Trust Board](#)  
Please access the link to the update from the latest meeting
- **Health & Wellbeing Board**  
This Board met last week, the main focus of the meeting was adults

## Key Information: Items Circulated for Information

Items	Actions	Contact details
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### 13. **MAPPA Annual Report 2016-17**

- 13.1. All MAPPA reports from England and Wales are published online at: [www.gov.uk](http://www.gov.uk).
- 13.2. Ms Seale has asked the MAPPA Support Unit to prepare a bespoke report for each local safeguarding adults and safeguarding children board. This will be presented at a future SSCB meeting.

### 14. **SSCB Annual Report**

[tiffany.slack@salford.gov.uk](mailto:tiffany.slack@salford.gov.uk)

- 14.1. The SSCB Annual Report 2017-18 has been published on the SSCB website:  
<http://www.partnersinsalford.org/sscb/annualreport.htm>

### 15. **Safeguarding British Minors returning from the conflict in Syria**

- 15.1. The Chair informed that he has received an alert and guidance for local authorities regarding managing this process. It was noted that this is not currently an issue for SSCB.

## Standing Items

Item No	Title	Lead	Paper/Presentation
16.	<b><u>Items to refer to young people</u></b>	<b><u>Open</u></b>	<b><u>N/A</u></b>
16.1.	This meeting did not identify any items to refer to young people.		
17.	<b><u>Items to evidence challenge and/or good practice</u></b>	<b><u>Open</u></b>	<b><u>N/A</u></b>
17.1.	Presentation and discussions regarding Complex Safeguarding, FGM, SEND and the proposals for the new safeguarding arrangements.		

### 18. **AOB:**

- 18.1. **SSCB Vice Chair:** The Chair informed that Ms Thorpe has agreed to take on the role of Vice Chair to SSCB.

**Action 18.1: Ms Bentley will update the website to note that Ms Thorpe is the Vice Chair of SSCB.**

- 18.2. **Strategic Training Group Chair:** The Chair conformed that Clare Kelly has agreed to take on the role of Chair of the Strategic training Group.
- 18.3. **Communication with tertiary services and primary care:** The Chair informed that he has raised this issue with the Association of LSCB Chairs to try and establish if this is a local or national issue. There was some confusion about the expectation from the group, they would welcome a clear steer and are willing to raise with NHS England and raise at other forums.

**Action 18.2: Dr Dixit agreed to email Mr Westwood with clear questions to raise with the Association of LSCB Chairs.**

18.4. Ms Patel noted that there are two issues which include tertiary services sharing information with appropriate places and the community paediatricians as well as a broader strategic issue.

**Action 18.3: Ms Patel agreed to email Mr Westwood to explain the issues regarding communication between tertiary services and primary care services.**

**Dates and themes of future SSCB meetings**

Date	Report Deadline	Theme	SSCB Lead
15/01/2018	05/01/2018	Domestic Abuse	Chris Allsop
19/03/2018	09/03/2018	Child Sexual Abuse	Alan Clitherow

**Minutes verified by:** Simon Westwood

**Minutes verified on:** 20<sup>th</sup> December 2017

**Minutes amended on:** 15<sup>th</sup> January 2018