Present:- Councillor Cusworth (in the Chair); Councillors Beaumont, Clark, Elliot, Jarvis, Khan, Marriott, Price, Short and Julie Turner.

Apologies for absence:- Apologies were received from Councillors Brookes, Hague, Ireland, Marles, Pitchley, Senior and Jones.

The webcast of the Council Meeting can be viewed at:- https://rotherham.public-i.tv/core/portal/home

37. DECLARATIONS OF INTEREST

Councillor Elliot made a Personal Declaration of Interest in Minute No. 42 (Rotherham Safeguarding Adult Board Annual Report 2017/19) – Council appointed Co-Chair of the Learning Disability Partnership Board and Partner Governor of RDaSH.

38. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

There were no members of the public or press present at the meeting.

39. COMMUNICATIONS

Health Select Commission
Councillor Jarvis provided Members of the Select Commission with an update of the Health Select Commission RDaSH Sub-Group where feedback had been received on the CQC inspection.

Corporate Parenting Panel
The Chair reported that the Panel had not meet since the last meeting of the Commission.

A meeting had been arranged for the Sub-Group to meet with Rebecca Wall to look at the LADO process and the impact of that on foster carers and in particular on the retention of foster carers.

Improving Lives Performance Group
The meeting had not taken place due to illness, however, issues raised would be fed back to Children’s Services in due course.

40. MINUTES OF THE PREVIOUS MEETING HELD ON 6TH NOVEMBER, 2018

Consideration was given to the minutes of the previous meeting of the Improving Lives Select Commission, held on 6th November, 2018, and matters arising from those minutes.
Resolved:- That the minutes of the previous meeting of the Improving Lives Select Commission, held on 6th November, 2018, be approved as a correct record for signature by the Chair.

It was noted that an e-mail had been sent to Select Commission Member seeking expressions of interest in establishing a sub-group to look at Holiday Hunger in the New Year.

41. ROTHERHAM LOCAL CHILDREN'S SAFEGUARDING BOARD

Christine Cassell, Independent Chair of the Rotherham Local Safeguarding Children Board, together with Phil Morris, Business Manager, presented the Board's annual report 2017-18.

Attention was drawn to:-

- There had been a number of inspections by external regulators. They reflected the very significant improvement in Rotherham, particularly in Children's Services, over a very short period of time.

- Those improvements in the Council and indeed the wider partnerships were to be celebrated, however, there were still further improvements to be made in safeguarding both in individual agencies and the partnership response.

- The very speed of the improvements brought some risks. Health and Protection were good but further work was required both within Children’s Social Care and partners to ensure that the good practice was consolidated and embedded.

- There was a problem nationally with the demand on Safeguarding Services, particularly Social Care, whilst budgets were reducing.

- Rotherham’s situation was further exacerbated by the effective multi-agency work on complex abuse and the impact of Operation Stovewood. The effective management of demand would continue to be monitored by the Board and Partnership whilst supporting and challenging further improvements in safeguarding.

- Future areas of focus
  - New arrangements for LSCB
  - Neglect
  - Monitoring of effective Early Help Service
  - CSE and the wider issue of exploitation
  - Voice of children and families
  - Continue to develop the existing work across the various boards with responsibilities in relation to safeguarding e.g. Adults Board.
• To increase collective understanding of communities in Rotherham, target services and support in order to ensure that the support was going to the right place and continue to develop the resilience of particular communities within the Borough

- The Children and Social Work Act 2014, removed the requirement for LSCBs in their current form but there was a requirement still to have a partnership of local agencies working together to ensure safeguarding. The key difference in the new arrangements as defined in the revised guidance – Working Together 2018 – was that it now became a shared accountability between the local authority, Chief Operating Officer of the RCCG and Chief Officer of the Police

- A working group had been established to consider the arrangements with development of proposals in due course. They must be published in June 2019 and in place by September 2019. There was a strong commitment across partners to build on the existing good work of the partnership and to strengthen that further

Discussion ensued on the presentation with the following issues raised/clarified:-

• The working group of Chief Officers working on the new Board arrangements had indicated that they would wish to continue with an Independent Chair

• Whilst not able to answer directly with regard to placements for children with disabilities due to being an operational question, the Board would continue to question whether there were sufficient placements for children with SEND

• No specific audits/activities had been undertaken by the Board with regard to ensuring the safety of the particular placements. The Board received SEND updates to ensure the new combined plans were in place. The multi-agency plans were one way of ensuring the safeguarding aspects of placements including arrangements for children who were placed outside the Borough

• The Local Authority had robust arrangements in place to ensure it was placing children and young people in settings that were of good quality, Ofsted registered and were achieving good or better through the inspection process with mitigations in place when the placement did not meet the required standard

• Work was taking place on the development of placement sufficiency. Ideally all Rotherham children and young people should be placed within the Borough so they were closer to the family home/network
The Board had received reports from the Council's Commissioning Team regarding the processes they adopted when commissioning placements and that they undertook a full safeguarding assessment of the placement to ensure it was safe.

As part of the routine work of the Board, all organisations were asked to undertake a self-assessment (Section 11 assessments) which included reference to any inspections, as appropriate, and actions arising. There was a periodic multi-agency challenge process on the audits.

The number of Child Protection visits had fallen. When questioned, Team Managers were able to articulate the reasons for the decline and assure that there was oversight and supervision. Assurance was sought about the length of delay and had it made any difference to the outcome for the child. The answer provided had always reflected that there was good oversight of the cases.

There was a correlation between the fall in Child Protection visits and the teams with higher caseloads. A full response would be provided after the meeting.

The voice of the child in relation to domestic abuse had not been looked at specifically by the Board.

The Safeguarding Children Procedure were multi-agency and, therefore, whether a health professional, school teacher, Social Worker, one needed to be able to understand what that procedure was telling you about understanding the child you were working with and what steps you may need to take. Often the Procedure was updated because the practice was changing and improving in a positive way.

The Board received reports on Prevent but it was not its primary responsibility; it came under the remit of the Safer Rotherham Partnership. An update was due to the March 2019 meeting.

A number of people had had a hypothesis for some time with regard to the impact austerity must be having in terms of stress and strains on families. The recent Association of Director of Social Services report was very important in highlighting some of the issues that needed to be addressed. The NSPCC had carried out work and identified an increase in physical abuse rather than generalised neglect which they were attributing to austerity.

One of the big issues from Safeguarding Board perspective was the engagement of all agencies and all professionals in undertaking Early Help assessments and getting involved in Early Help. Regular reports were submitted to the Board and encouragement was given on the benefits of partnership working in that way. However, the Board had
noticed better information coming forward to evidence that there had been changes in key areas that Early Help staff working in

- There have been significant improvements over recent years in the way in which Early Help was co-ordinated and the way in which partners were working together. There was some evidence of the impact on families and the Board would be seeking further evidence of the impact and improvement of families.

- To make the improvement that has been made in Rotherham over the period of time was really remarkable in terms of comparison with other areas. Once areas reached the point where they were “good”, it could be quite a fragile time in terms of ensuring that improvement was sustained and in fact continued.

- The Board continued to raise the issue of dental assessments and Initial Health Assessments for Looked After Children and asked partners to find solutions to ensure that they received the medical and dental support that they had to have. It was an issue that needed to improve and the Board would continue to argue the need for.

- The evidence the Board had received was that thresholds were applied appropriately with regard to the progress from Early Help to Social Care.

- The new arrangements for the former LSCB will have a slightly different configuration of the groupings. There now needed to be some Chief Officer/Senior Officer oversight from the 3 agencies. There would be an Executive Group, which would drive the work of the Board and would be smaller than the full Board arrangements, and then look at the wider partnership to engage the current Board members, discuss with them the frequency and nature of the meetings, to ensure attendance and that it was seen as a meaningful process. It was the aim to ensure real engagement with the wider partnership which would then address attendance issues.

- The new guidance did not make reference to the Lead Member, however, the Lead Member continued to have statutory responsibilities. As part of the new arrangements discussions were taking place as to the appropriate involvement of the Lead Member and Director of Children’s Services. Working Together 2015 had stipulated who had to be on the Board and respective responsibilities in considerable detail; the new arrangements were much more permissive which had advantages and disadvantages. The 3 accountable partners had the opportunity to say who they would like the wider partners to be and how they would like them to be involved.

- Much of the representations nationally on the consultation document had been with regard to the involvement of Education. The Board was very clear there needed to be strong links with Education. The
current Board had a very strong group of Education partners and would want the new arrangements to build on and strengthen that

- Clarification was sought to establish if there were any barriers from issues being stepped up from Early Help to Social Care or whether the threshold for meeting Social Care was appropriate in the opinion of the Independent Chair

- The thresholds were a document essentially which described the continuum of support from Early Help through Children in Need to eventually children being taken into care; it establishes the range of support available. It was owned and established by the Partnership. The Board had a document which sets out examples to help people understand what was appropriate to meet the needs of the family. The issue should always be what was the appropriate and effective level of support for that child and family and the thresholds were there to guide people making the right decisions. Evidence from a range of sources currently showed that thresholds were being applied appropriately and nothing to suggest that there were problems

- Rotherham was close to the national average with regard to re-referral rates

Resolved:- (1) That the Rotherham Local Safeguarding Children Board 2017-18 Annual Report be noted.

(2) That anonymised audit from the Domestic Abuse Partnership Review be circulated for information.

(3) That the LSCB Chair be invited to the July meeting to update the Committee on the new Safeguarding Multi-Agency Partnership arrangements.

42. ROTHERHAM SAFEGUARDING ADULT BOARD ANNUAL REPORT 2017/18

Sandi Keene, Independent Chair, and Jacqui Scantlebury, Safeguarding Adult Board Manager, presented the Rotherham Safeguarding Adult Board's annual report 2017/18.

Attention was drawn to:-

- The Board operated under the legal framework of the Care Act 2014 and was now a statutory Board. When the Care Act was published there were a number of different emphasises in relation to Adult Safeguarding e.g. making safeguarding personal which focussed on working with individuals to achieve the outcomes they wanted from the process rather than necessarily following a very rigid set procedure with defined outcomes
- The Board was still in development. Throughout other local authorities and Boards there were different interpretations of thresholds. The threshold in Adult Services was what would constitute a concern and what would constitute an inquiry.

- When the Care Act was published, Rotherham was starting its Safeguarding Adults work from a very low base in relation to the organisation of the Board and prioritisation of the work.

- There had been considerable investment in time and commitment from the Council and partner agencies. The Board sub-structure was heavily dependent, and benefitted from, the individual commitments from members of the Board from other agencies. There had been very little performance information, but as a result of commitment from the Council that was being vastly improved.

- There was not a great deal of benchmarking information nationally to ascertain where the Board was although work was being undertaken in Yorkshire and the Humber to look at some of the comparative information around thresholds.

- Work had taken place on the constitution of the Board, developing within South Yorkshire revision and revitalising any procedures that had been using in the past and some individual procedures that the Rotherham Board had created in terms of what it had felt was important.

- Next year there was to be a joint Adult and Children’s single audit of agencies around Safeguarding.

- Rapid progress within the confines of restricted resources.

Headlines of Report

- The data needed to be understood from the point of view that in Adult Safeguarding there would be a number of people who were referred as a concern/inquiry and deemed to have met a threshold for people who were in residential nursing care as well as people who were in their own homes.

- Also operating within the context of people having a variety of capacity in order to respond to and to be safeguarded and operated within the Mental Capacity Act.

- The latest quarter’s information showed that the Board was dealing with 46% within residential and nursing care, 36% people in their own homes and others from other settings e.g. hospital, community hospital community services and acute hospital.
The level of concern reporting had decreased in the last year where as the level of inquiry investigation had increased. This needed to be understood and investigated further, however, it was felt that the decrease of concern was because of effective signposting at the front door when enquiries came in.

Nationally there was still some movement around what was deemed “quality” and what was deemed “safeguarding”. The Board was confident that it was not an outlier in these matters. In as much benchmarking data was available, the Board was fairly confidently that the reduction in concerns combined with the increase in the proportion of investigations meant that it was getting some of the decision making right.

The areas of abuse that were deemed to be increasing at quite a significant rate included physical abuse, psychological abuse and domestic abuse. Domestic abuse figures are where it was deemed that the person affected was a vulnerable adult within the Care Act.

The Board now had a quality assurance process and had been quality assuring case files. A variation in standards had been found with the biggest issue being consistency of decision making. However, it was not just the Local Authority that carried out investigations and inquiries; other bodies such as RDaSH and the Hospital now did their own inquiry investigations so further work was required to continue to be satisfied with regard to consistency.

National issues

The LeDer Programme (Learning Disability Mortality Review Programme). The Board was now required, and as a community, to refer any death of a person with learning disabilities to the national programme where they were found to have passed away at an earlier stage of their life. There was an investigation of the circumstances to ensure the person’s death could not have been prevented.

Rotherham had referred some cases to the LeDer Programme but had not had any feedback as yet due to a backlog with the actual investigations and reporting. There had been 2 cases locally that had given rise to concern but they were historical cases; there were no current cases in terms of the Programme.

In common with other authorities there were very significant backlogs in terms of the work of assessing people's capability and capacity in terms of Deprivation of Liberty Standards. Not all Deprivation of Liberty were Safeguarding issues but some were. The Board was keeping a watching brief and requested regular updates.

There were a small but rising number of self-neglect cases of vulnerable people not caring for themselves adequately for whatever reason. Case management was very complex due to a number of...
difference reasons but excellent support had been received from RDaSH in how to handle, manage and support such individuals

Our priorities for the future
- Continued building of the foundations
- Get the procedures right
- Improving public engagement
- Raise the voice of the individual
- Need to understand far more about consistency of practice and areas for development
- Look at the prevention and early support offer across the Borough
- Look to refresh the Board’s plan for development over the next 3 years (the Rotherham Safeguarding Adults Board Strategic Plan for 2019/21)

Questions
- It was not felt that the increase in self-neglect was as a result of the Mental Capacity Legislation but agencies were required to ask whether somebody had the capacity to make their own decisions and, even though some of the decisions may not be wise decisions there may not be a legal base for intervention. That did not mean to say that authorities did not have a duty of care and one of the issues was the threshold. The Board was working with RDaSH who were a national exemplar

- With regard to the Learning Disability Mortality Review the person’s area of residence was the significant not their area of GP practice. Many of the incidents were as a result of recognising medical problems and providing or ensuring there was sufficient medical assistance for people. There was now a growing body of evidence of what to watch for but in the main ensuring people with a learning disability received the most appropriate medical support at the earliest possible opportunity

- The Board had not been informed of the proposed changes to the Learning Disability Services. However, within the Board’s priorities was to assure itself that people with Learning Disabilities were receiving an appropriate safeguarding response if and when required

- There was no guidance on “oversights” and when they became a safeguarding issue. An oversight would be deemed by any provider to be an initial quality issue. Currently it was a matter of professional judgement within the overall boundaries and guidance that existed with regard to level of concern. Currently the Board did not record repeat referrals and it may be something for the future in terms of monitoring. If there was a referral 3 times as result of an oversight it would be referred elsewhere. It would be something that the hospital would take up with the individual practitioners in terms of their response to an individual
• The lead for human trafficking and modern day slavery was the Safer Rotherham Partnership with whom the Board were working very closely with. The Board had received on the topic and, on behalf of the SRP, had conducted mystery shopping exercises into the first point of referral to test out people’s reactions. At the end of last year the Board had increased its awareness of vulnerable adults coming under this umbrella from one to 3 so there was recognition that some of the individuals described had such a vulnerability and eligibility for services from the operational staff.

• In comparison to other local authorities, Rotherham had given a high degree of commitment to developing services for vulnerable adults who might not traditionally fit a box of somebody with learning disability/mental health problems. The Vulnerable Adults Team within the Local Authority, which had commitments from Adult Social Services, Housing Services and other services in the Borough, was well placed to be able pick up and support people who were identified in those situations with a degree of vulnerability.

• Due to it being operational, an answer could not be given with regard to catching up on of new assessments/reviews. However, there was a dedicated team that carried out Safeguarding investigations and enquiries, as well as the Area Teams, who dealt with the highest profile and most urgent matters. There was not an awareness from a Safeguarding perspective that there was a backlog in following through safeguarding enquiries.

• An assurance could not be given that the voice of the victim, particularly vulnerable adults, was being captured and being heard. There had been less focus on victims of domestic abuse who had vulnerabilities than possibly Children’s. The Board had not had a dedicated report other than a general report that they had been involved in the action planning and fully participated in. There had no deep dive into interrogating the specific incidences for individuals as part of the Board’s performance monitoring as yet and would form the next level of its development. So far the case file audits had been in relation to a cross-sectional perspective on individuals.

• Under the Care Act people who were undergoing inquiries as a result of safeguarding concerns, had a right to have an advocate. The Board had undertaken some initial work to attempt to establish if individual had been offered an advocate although it was difficult to interrogate the data. At present that data had been difficult to establish and achieve. The Council was retendering the Advocacy Service and the Board assumed that the tendering process would monitor quality and the appropriate measures in terms of delivery of service. It would be the interest of the Adult Safeguarding Board that the volume of activity was available to enable not just those who came under DoLS and the Mental Capacity Act, but anyone who was going
through a safeguarding enquiry that they had somebody to support them to do so. It was a live and current piece of work for the Board to establish that baseline; once established the Board would assure itself with regard to the quality of the offer

- Due to its operational nature, an answer could not be provided with regard to the Vulnerable Care Leavers Risk Management Pathway

Sandie and Jackie were thanked for their presentation.

Resolved:- (1) That the Rotherham Safeguarding Adult Board Annual Report 2017/18 be noted.

(2) That the Board give priority to ensure that people with learning disabilities were adequately safeguarded under the new arrangements.

(3) That when the 2018-19 Annual Report was submitted that it also include the Rotherham Safeguarding Adults Board Strategic Plan for 2019/21.

43. EARLY HELP - CHILDREN MISSING FROM EDUCATION

Further to Minute No. 23 of the meeting held on 23rd September, 2018, Susan Claydon, Head of Service Early Help, and Dean Fenton, Head of Service School Planning, Admissions & Appeals Service, presented the following further information as requested:-

- Each Local Authority had the responsibility to employ a CME Officer. Rotherham had an Operational Manager who oversaw the work and a Head of Service Strategic Lead.
- All Early Help Locality Teams adopted attendance and CME related issues as ‘everybody’s business’ so that home visits and enquiries pertaining to a child missing from education could be directed by the CME Officer and associated manager.
- As part of Phase 2 and 3 of the Early Help Strategy, Cabinet had agreed that the CME function move from Early Help into Education and Skills. This was important in further aligning CME processes to wider education processes such as school admissions and elective home education. The transition expected in January 2019.
- 177 children (from 97 families) classified as new CME referrals, a reduction compared to the previous quarter (188 children/97 families).
- Of the 177, 92 children had been known to have had previous episodes of CME that were closed.
- Evidence suggested that the recurrence was largely due to families being transient and then returning to Rotherham intermittently rather that concerns related to vulnerability and/or safeguarding issues.
- At the end of the reporting period there were 146 active cases that remained open to CME – a 30% reduction from Quarter 1.
- 256 resolved cases (significant increase on Quarter 1 – 134 cases)
- 13.7% of children within the CME cohort were eligible for Free School Meals
- 89 new referrals from primary schools and 88 from secondary schools
- Outcomes data now captured – of the 256 children that were closed to CME in the Quarter, 46 were found and transferred to admissions and tracking. 75 children were closed as they were found and another local authority subsequently accepted responsibility for them. 21 children were found in a school within another local authority and 29 were found have taken up a new place at a school in Rotherham. 22.5% of children were closed as a result of all possible enquiries being exhausted and 12% were verified to have left the UK. 2 children were classified as being educated at home
- The majority of the children found in another authority were proportionately distributed around South Yorkshire
- Of the newly identified cases, 82.5% were from the central area of Rotherham at the time of referral
- The majority of children CME were classified by ethnicity as Roma by their parents (40%) and a further 36% unclassified
- The Early Help Head of Service had negotiated a new form, introduced in October, in conjunction with the School Admission Service, to encourage parents to complete ethnicity information. This element remain a voluntary aspect when applying for a school place in Rotherham
- Work was taking place within schools/education to better understand the needs of Roma facilities and ensure that services maximised co-working and shared approaches
- The Early Help Service was working with the RMBC Communications Team to publish good news stories about the positive work with Roma facilities in the locality to assist with reassurance in the community
- More detailed locality information had been added to the quarterly scorecard that detailed localities across the Early help reach area
- Free School meals analysis had not been captured and included in the Quarter 2 scorecard

Discussion ensued with the following issues raised/clarified-

- The School Admission process sat within Education and Skills where there was a tracking system for when families applied for a school place for their child. If a parent presented themselves directly to a school and made an application, CME would transfer it to the application and transfer process and was monitored and tracked through the Admission to School process. At the end of the process if the child still did not have a place, it would be referred to other protocols such as Fair Access
- Elective Home Education was also part of the Service and had links to the multi-agency Strategic Missing Group
The Authority had a responsibility to employ a CME Officer. The move for that position to be within Education was much better for the postholder’s personal development and the linkages across all.

There would be a seamless transition from application and process into CME still with oversight into Early Help and through the Strategic Missing Group day-to-day liaison.

It was difficult to prevent families travelling out of the UK, however, the Service worked intensively in the localities. Work was taking place to educate families with regard to the detrimental impact of removing their children from school. There was a team of workers as part of the Early Help Service in the Clifton locality, predominantly where the CME children were, as well as dedicated workers at the Secondary School and the feeder primary schools. There were strong links to the community organisations, Clifton Learning Partnership and REMA, who worked through assertive outreach in the community, and strong links with the service area. There was attendance an open evenings where interpreters/Roma speaking staff would be present to communicate the concern about children’s education being disrupted. However, some of the CME children were not due to them returning to their home country but move around the UK for job opportunities.

The Early Help Service ensured it had exhausted all options before fining families. It was a different route for CME as Fixed Penalty Notices (FPN) for children who took holidays in term time. The Service made sure it was supporting families and understood what the holistic family need was as fines may not change behaviour and may add to the poverty and deprivation of what some of families were facing.

The Authority had limited powers by statute with regard to Elective Home Education. Local Authorities had a duty to establish whether a child was receiving an adequate education, however, it was a very difficult threshold to measure. Currently a Bill was going through Parliament in relation to Elective Home Education and the powers of local authorities. The Bill looked to strengthen local authority statutory duties and suggested things such as an assessment or baseline of education. Rotherham carried out safe and well checks.

There was a governance group, Overview and Accountability Group for Elective Home Education, consisting of representatives of Social Care, Early Help and other agencies such as NSPCC, Barnardos, NHS. Any cases of children not seen would be worked through with other agencies and if still not seen there was an escalation process through Early Help into Social Care. The Group had been in operation for 18 months and was accountable to the Strategic Missing Group.
If there were any concerns when an expression to Elective Home Education was made, there were rigorous checks to ascertain if there were any pre-existing concerns and that family in receipt of support. If so there would be discussion at the Overview and Accountability Group and the family to ensure all were in agreement and advice and support offered. Some expressions had been opposed and work had taken place with Children and Families to secure a better outcome for that child.

From the assertive work carried out in the community described previously, the Service was notified as soon as possible of any new families that had moved into the area. Often new arrivals would present themselves at one of the voluntary organisations and the information was shared. It was not impossible that a family could move into the area and not be known of for a couple of weeks but in general agencies would find out. If a family came from another local authority there were checks carried out with the Authority in the same way as they would if moving from Rotherham.

Resolved:- (1) That the report be noted.

(2) That consideration be given to the format of a 6 monthly future report(s) to include the Strategic Missing Group and the wider context of Children’s Missing from Education, persistent absence, Fixed Term Exclusions, Elective Home Education.

(2) That discussions take place with regard to the possibility of including Children Missing from Education to the weekly tracker.

44. DATE AND TIME OF THE NEXT MEETING

Resolved:- That a further meeting be held on Tuesday, 15th January, 2019, commencing at 5.30 p.m.