

# HEREFORDSHIRE CHILDREN'S TRUST

Children's Trust Board,  
Meeting Minutes

Wednesday 27 January 2010

Room 3 Blackfriars

2.00pm – 5.00pm

**PRESENT:**

**IN ATTENDANCE:**

**ACTION    ACTION  
BY**

**1.    APOLOGIES:**

Andrew Stong 3.30 Akeem Ali and David Waldron leaving early

**2.    DECLARATION OF INTEREST**

None

**3.    REVIEW OF TERMS OF REFERENCE – ELECT NEW CHAIR**

JH standing down as chair – thank for support for last 3 years.

Chairs professional in view of changes in legislation.

SM Formally thank JH for effort and contribution to yp. Ali akeem welcomed her as active member of the board.

TOr

Chair of board leaser of Childrens Services, legal requirement to chair of board – elect new chair.

Chair can Dir of chidrens service, from 2009 guidance, (see CB for list) LA monitor effectively chairs work

KP head of CS to be chair propose head of Childrens Services.

Day to day knowledge of issues. SM

SM happy to take on role. From strategic view logic in that.

DrIT – skills proposed chair fit what is required. External view and accountability is important, who is accountable to who needs to be clear.

TOR – Chair DCS etc Independnet chair.

Nominations from Board – RH second nomination,.

SM – accountability – clear. Reports to clear guidance in statue, clear expec around CT and its role – continue to evolve nationally. Within Hfds – part of del of local strategic partnership, multi agency partnership community strat within Hfds, key priorities within LAA. Alongside health and well-being 6 sub groups which CT belongs. Hcsgb – Chair LSP are kept up to date with key issues around CT performance , monies etc. Direct accountability to chief exce and political group. Link into PCT abd Board and sub stgructure when appropriate.

DrIT happy with this being minuted and agreed.

Group agreed SM as Chair.

Sm thanked the group.

RH TOR – membership list dir LSC look at what happens when no LSC. CB consultation on revised guidance for CT proposed until finalised then review TOR re membership at that point.

KP West Mercia Police /Senior.

DRIT – Shadow Board relationship how does that work – Chair of clinical ref grp NHS Herefordshire. Change to title.

Engagement yp .

Action

Datre set information to members of board fir mtg with members of board VCto circulate.

Amendment made subject to guidance and circulated. TOR

**4. MINUTES FROM THE PREVIOUS MEETING AND MATTERS ARISING**

**ACCURATE RECORD**

**5. SERIOUS CASE REVIEW UPDATES**

**6. PRIORITIES FROM MANAGEMENT GROUP**

CB Need to be able to advise staff what is bneing done this year through outcome groups. CT doing this year.

Man grp looked at this – hot spots at risks. Particular area of focus from outcome groups. Wording may be needed to look at. Would like endorsement – oputcome groups to look how they can achieve this.

e.g. esafy part of bus plan and focus SGB

Obesity – Be Healthy

People direct contribution to – id what can be specifically done to achieve priorities.

Try to measure – id what indicators to be used. Shadow Board to look at wording.

E & J Ks 1 and 2 wording needs to stay that way to be recognised sby people working in the area to recognise.

SM recommendation from each group.

Not as yet been shown to Shadow Board.

DRIT – this is a way to engage Shadow Board

AS would like them to have looked at it before CTB

AA define process area assessment, NHS Police, prorities compliments members of board.

Outomce groups chaird by DS, SA, PR, KB, stay staf steering group

KD, CB mand group Julie Powell Schools Forum.

KP like the prorities – anyone can pick it up says what they are, targets, how it measures, recommendations. Concise and clear for direction of travel. Everyone will be able to understand.

RH worgng way around – strategy fron CTB to go to outcome groups.

David LSC – skills yp level 2 – employability – measureedd by DCSF data.

Richard Betteton – correct way practitioners via outcome groups, pleased to see them.

CB part of CYPP set strat priorities – safety and obesity are mention.

Priorities lifted from the cypp. KP need to be reviewed. When met put another priority in place. CB difficulty to do this some not able to be measured as quickly.

DRIT – coherent with safeguarding paper. Makes sense for vulnerable people.

SMe promoted the need for 4-5 priorities. Makes sense. Need to say why these have been chosen. In future to look at cypp priorities across the board and cross cut them to bring them together.

SA that is what has been done – partnership working.

SM happy with them – smarter in terms of target – how much achievement. Yp need to see it and ask them if there is another priority – hot spot for year.

JH – link esafety bullying – one area causing concern.

KP written doc and rationale – overlaying document the reason why the Man Grp, Board set objectives – evidence trail required.

Work to be actioned – feedback on progress CB / PG yp to be asked for one resonabile target.

Thank leads. Man grp with renewed leads. CB thanked SA and new leads.

DrIT – PR needed with information. Needed to be broadcasted.

Get wording – next 2/3 weeks. KP 41K to youth pact – engaging with youth – crime disorder – do a survey send out template , bus around county flavour of community.

Action: outside of meeting PG to speak to Gaby Wright to co-ordiante

## **7. PROGRESS REPORTS FROM OUTCOME GROUPS ECONOMIC WELL-BEING**

CB PR new chair – look at functioning of group and time taken and membership.

Key successes and barriers ABG providing add courses take up good by unlikely to meet target set prior to current climate.

Houssuign issues number of yp in B & B

Child poverty Jobcentre plus – briefing sessions – positive outcome

Areas of concern – connexions and lsc coming into council attendance and work has been patchy.

Relationship 14-19 consortium and EWB group. How does it work together – concerns role out of diplomas. Are we supporting correct qualifications.

SM historic groups – e.g. 14-19 conflict or support. Need clear and encourage information and work to come via CT.

ECM groups disconnectivity – this needs to be addressed.

RH need strategic lead.

SA groups do not know how to move things forward.

SM need to improve elements quickly.

SMe structure of roles of outcome groups – clarity of parameters.

Out come groups should persue co-ordination of bus plans from strategy.

CB CTB set strategic direction of CT Outcomeg group to work effectively members are those who make strategic decisions.;

SMe need clarity at CT need to ensure Strategies not in place need to someone responsible for commissioning.

CB man group responsible for issues that do not sit with outcome group.

SMe piece of work to know next time which areas we do not have a working strategy to put in place actions in place,

SA multi agency group work on strategy fot CTB to sign off and

outcome group to oversee it.  
RH level 2 / 3 achievements – a lot of cross over.  
Man group more detail of what each group is doing.  
SA Be Healthy lead – propose strategy. Man group discuss overlaps who is leading, process for taking forward.  
SM details from groups CB and SM to discuss on what the Man Grp focuses on. Need for confidence right things in place and accountability cross activities, inter agency working and barriers.  
KP Safer Hfds groups overlaps, not dovetailing. Clear understanding of what each groups do.  
SM rationalising of meetings/groups LSP needs to be raised. Julie Gethin to support this.  
SMe CT statutory basis strategies need to be in place – helpful to

Action: Man group to provide a contemporary view of where we are with strategies .  
KP 44K crime and anti-social behaviours – no joined up working.

DrIT ask for funding to be nominated to which are SM to write and ask for this – Julie Gethin and Chair of Hfds partnership what funding is to be allocated to.

## **BE HEALTHY**

SA broader picture improving health of population – single plan. To have impact joining up underlying principles – providing services 1-1 new skills, need to support them with healthy lifestyles to put things into practice. Policy to support people. Provide services no continuing commitment. SA bus plan bring together 2010/11 to bring components together cyp transition to adulthood healthy lifestyle. 7 sections obesity, smoking alcohol, accidents, well being oral health and sexual health. Smoking and Alcohol already out all compelled by end of March.  
Be Healthy outcome group overview of CT of plan.  
Plan core money not only grantfunding.  
CAHMS ABG paying for no plan to say what is needed to be achieved – next time report against plan and exception reporting on barriers and ask CTB for assistance.  
CAHMS – multi agency – Mental well-being plan will have childrens element in it. Positive parenting, and behaviour.  
Prevention SA table for discussion at Be healthy group, mental health service – treatment PCT commission process, Jade Brooks to make connection.  
CAHMS strategic group – CB KD lead, chairs operational group of CAHMS, vice chair of Be Healthy. CAHMS be Healthy remit – forward plan agenda item – urgently required. SA CB to meet with KD to get 1 plan produced. Clarity is required.  
SA clear structure.  
KP core funding get senior level to discuss funding to be used collectively of how it is to be used. Funding need to support areas.  
SM money available for CAHMS ABG .  
CB there is a strategy – needs to be changed.  
KP everyone knows what they want to achieve.  
AA clear what influence have on item discussed. NHS mental

health commissions, police – mental health safeguarding, organisations to have bus plan for service. Assemble of plans. Day to day operational plans – careful to ask Be healthy. CTB request plans.

Clarify core business, partnership work together to achieve task. DRIT – what is evidence based for interventions. Clarity needed medical interventions, social etc funding – spending makes sense and following the same plan. Look across organisations of how the plan is being implemented.

SA assemble what is already being paid for and see how this supports plan. Clarity of roles.

KP money is sufficient – inflexibility of sharing funding.

AA CT move forward, mandate to SA of Be healthy group.

CB Chairs to need to look at funding how is it working – what needs to be done.

SMe – SA to do her part, strategic work also being done.

SM diff pots of money – direct man of outcome group – to be able to articulate – id needs, priorities, how to be delivered. CTB put money in and hold outcome group or area accountable.

Stratify, what is doing, who, how it is going or issues.

SM CAHMS strat document – no sufficient.

SA as chair convey CTB want issues carried out. SA due to experience can identify gaps.

AA system needs to work. Be Healthy to be del operational group, strategy direction of travel for groups. Be Healthy getting things done in relation to strategy. Strategy plan owned by people who are involved in day to day..

KP director level PCT/council what is required e.g. Be Healthy

SM discussions to be held at LSP. Chris Bull direction strat commissioning of Children Services is CTB.

DRIT use SA as a test to define how this works.

SA as chair of Be healthy – starting point look at what is available and issues. CB and Sa to discuss strategy. Agree Be Healthy CAHMS strat group overview.

Report data annually – no new data – CB man group discussed – change the report card.

CAHMS data – SA look at what is happening to be able to define data.

Clarity of LAA targets which needs to be met. Will be indicated.

CB CAHMS judged by pi's met.

Healthy lifestyles – obesity priority – indepth plan will be available within next 2 weeks. Supporting children. Change4Life. Very positive.

JH clarity around what is obese – Change4 life does not talk about obese.

AS will look at measurement programme.

Oral health – fluoride teeth.

Alcohol – admitted to hospital focus, then wider any attendances accidents wider issues.

Chymida = service agreements with GP – sustainable system of test, Will improve but not meet target.

Attendance – Sa planning to propose membership for sign off – agreed formal membership.

Sm queried number of reports. Remit of how many groups

attending need to be aware of issues needed to know.  
MB stay safe on agenda each time. Report every month RT KD and PG

2 of other group to attend.

## **8. 10/11 HSCB BUSINESS PLAN AND DRAFT CONSTITUTION FOR AGREEMENT**

MB now got a good understand of Hfd now good idea of challenges over the next few months. Lessons not learned quickly enough.

CT approves new constitution  
Bus Plan in April  
Gove CTB and SGB – clear April  
Comments support as Ind chair – responsibilities for agencies

Constitution  
SGB and CTB relationship. SGB clarity over safeguarding outcomes to CT – reporting role but must maintain challenging role. Commissioning through CTB. CT and LSCB members on both. Project man and operationalising should be made clear. Constitution for agreement. Bus Plan in April workstreams for each subgroup and priorities for coming year.

Constitution – broad terms diff between CTB and SGB. List diff elements of SGB. Board made up of seniority deci and resources, specialist areas e.g. GP etc. Large group with diff interests. Sub grp important means of del report streams.  
Bus plan will show how priorities are being achieved, qrtly report to CTB showing progress and reg report to CTB.  
SM – very helpful, clear relationship and communications/reporting. Clarity about info to CTB. Pg of report para 7 – Ind scrutiny and chall role of SGB – primary function is to lead the multi agency, leadership role is critical.  
Leadership of multiagency is the most diff area trying to bring them together. (to be minuted)  
Same people on CTB and SGB, in relation to decision re commissioning. SGB – source of knowledge and power to deliver CTB delegate power to SGB. Delegating responsibility guaranteed report back and will not function unless there are members to drive it forward. E.g. police issues  
KP – if it is deemed a risk is critical immediate action to be taken in TOR. If risk is so great chair can action the change.  
SM agree – national guidance not clear CTB and SGB – challenge and debate is required. Agree points to be made if to be diff in Hfds clarify linkages and how this will work. CSG agenda and function of CTB and sub structures – must keep clear links with SGB.  
AS – CTB delegating tasks to SGB or accountability.  
CTB agree bus plan tasks for a year – accountability.  
Accountability for safeguarding within agencies. MB to come to CT to raise concerns over issues that need to be moved on.  
Add another sentence and recirculate to group. – group agreed.

Risks – (MB) page 3 sublisted – Key role SGB audit and

monitoring Section 11 stat requirements.

Sc 11 what each stat agency requirement to demonstrate improvement within safeguarding on an annual basis signed off by LSCB. Show deficits within agencies and strengths. SGB bring regular outcome of audits to CTB.

SM how much info comes to CTB – positive about accountability but agree how much needs to come to CTB. Manageable and appropriate.

KP data adequate, read info before meeting and raise issues/questions. CT generally does this. Info is needed to be able to read it and agree or raise issues.

SM need to know agencies – accountability stat responsibilities for agencies, SGB overlying for CTB. What mech and man is in place. CT level – secondary order where consistent failings what is being put in place to address this.

Be healthy indicators and improvement plans – PCT is doing this in Be healthy area.

AA end of period asked as a board what we have done – should be able to say what has been done. Multi agency – where obstacles in police, nhs, council removed them. Paper not exposing and explaining obstacles should not be at CTB. Info threaten public confidence in Hefd. How it can be made better. For clarification.

AS paperwork not overload, more focused agenda, prioritise and focus to be agreed. Paperwork enables dissemination within agencies.

AA papers more focused.

SM left SGB do the work and look at how CTB can help.

KP – new chair day to day area of business not carry to much reflection. Needs to be balanced. Need to be aware of the needs of members. Need more cross cutting.

MB pag 3 para 11 – resource issues SGB business unit preventing assurance mech, obtaining correct data. Delegate within agencies MB have access to help resolve operational issues and for the coming bus plan.

Action – Agencies to put forward appropriate contact. To MB. People and information deficit.

KP / MB confirmed some data still not being received.

DRIT – commissioning role or supervision.

SM historically aspects of data diff to get from agencies, often because data is not tangible, due to cross cutting. PI to be correct and identify who is doing work and deadlines.

Amount of funding available to SGB to have correct staff to support CTB arrangement and HSGB arrangement. Need to strategically put money to support.

SGB agencies (some) provided funding to SGB. Funding agreed at CT level to agree x amount to SGB to assist with delivery.

KP data is available – look at data required over a regular basis. .5 million to agencies via police historically crime and safety. Highest level funds Safer Hfds – agree raise as an issue to LCP – Julie Gethin ABG money allocated

Action SM and KP work together raise at LSP.

AS statutory partners – MB have to get stat partners correct at first. SM need to invest in safeguarding due to amount of pressure and risk, focus on inspection accountability. Other authorities have had significant investment.

SME – agree re financial. Information consider topic based work to test sharing of information. E.g, Alcohol misuse y, police, health, safeguarding. Test arrangements multi agents improvement plan. Part of work plan to agree some areas.

SM agreed.

MB RT Bus Man outlined process of safeguarding. 2 SCR last year and Hfds involved in 3 others. Just commissioned first case 2010 last week. Report SGB in early July. Themes – Info exchange, record keeping and multi-agency working.

CYP – parented contact with adult drugs, (Hidden Harm), children placed in Hfds from other areas falling through net.

Bring to CTB.

SME CT more impact if looking at spec issues.

Drift imported into Hfd county, no mech planning process if full needs of people being met. This needs to be looked at.

Action: SCR – ask staff to work up deep dive on information to be debated. Work programme report from and ask officers and staff to present report.

MB SCR become more rigorous – evaluation of SCR and inspection process SG del unit – who writes report. Ave cost 15 – 20K per SCR if not meeting OFSTED re-written more costs. MB 2 per year if not more.

KP SCR did not pick up lessons from last one. To be ahead of game demand that lessons have been implemented and the problems have been solved. Lessons need to be acted upon quickly.

SM issues of resources, need to invest sig amount of funding – multi agency training.

MB – member of board guidance to front line staff re SCR.

Members agreed for inform to go out with mins.

MB to sum up – positive high level commitment senior man in each agency – down side not yet a structure within bus unit element that is working, requires direct council pct agree a model to be able to deliver the business.

KP staff on secondment – training development. Key people to work under direction. PCT project worker .

KP / SM to discuss outside meeting on who can be used to help.

## **9. ABG 2010/2011 INDICATIVE ALLOCATIONS FOR 94% GUARANTEED AMMOUNTS**

### **6% PROPOSALS TO HEREFORDSHIRE PARTNERSHIP**

Submission to HP – children priorities –

EWB – responsible policies del group encon ~WB in hfds – put in request for NEETS – money not given directly worj with EWB to address need.

Safeguarding aspect – talk to safer communities group.

Group shuld look at amount of money and see how this is allocated.

Back to HP for sign off.

Del groups need to work together.  
 RH relationship ABG and other funding to delivery activities.  
 ABG came from whole range of streams eg education school  
 improvement partners part of ABG spreadsheet lists ABG groups. No  
 longer ring fenced to activities.  
 To delivery local area agreement. CT HWB largest contributors  
 no arrangement each group has its priorities – ABG assist to meet  
 priorities. Staff costs covered. CT 94% of grant been given.  
 Money moved around but still have to deliver services.  
 KP strategic level needs to make decisions to look at where the  
 money is to be allocated. Define where money needs to be spent.  
 ABG audit would not meet criteria as money is used on staffing  
 costs.  
 KP posts need to be looked at.  
 Look at priorities collectively.  
 Recommendations 2  
 SM how the funding should be allocated.  
 Man Group did not feel that they had the means to make decisions.  
 Reports to come on what is funding is being spent on etc  
 Money connections – 100% should be in – coming into council.  
 Others more latitude to move around.  
 Recommendations – rationals – KP what has been delivered  
 against targets. CB locked into 3 year contract connections.  
 SM need to stay as it is – smarter as a group on allocations, needs  
 to come to CTB sooner to make decisions.  
 DS E & J understanding of what is being delivered in her group on  
 funding to make the decisions.  
 Drlt – public spending review – fragile form of funding. Is there a  
 contingency in place if funding stream is stopped.  
 SM no plan in place within directorate reorganising directorate.  
 Coming month announcing new structure.  
 Message needs Approved recommendation on Item 5  
 6% - has been agreed. Man group will be informing CTB on  
 outcomes  
 RH 6% - submission in December – work with others.

**10. APPROVAL OF HEREFORDSHIRE RESPONSE TO DCSF CONSULTATION ON CHILDREN'S TRUST**

CB to be submitted end of Jan PG put together from conversations  
 with outcome groups etc.  
 SMe – response 7 implications funding – structural changes  
 involved. CT not ready yet.  
 SM make more sense in less reporting processes.  
 KP use of word disappointing should be did not make clear. Change  
 the wording does not address. PG to amend.

Approving with PG amendment to item 7

**11. ANY OTHER BUSINESS**  
**CLL HYDE NOT AVAILABLE AT NEXT MEETING.**  
 Meeting finished at: 4.55

**DATES OF FUTURE MEETINGS**

Date

Time

Venue

