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Health, Wellbeing and Local Government Committee

The Health, Wellbeing and Local Government Committee is appointed by the National Assembly for Wales to consider and report on issues affecting health, local government and public service delivery in Wales. In particular, as set out in Standing Order 12, the Committee may examine the expenditure, administration and policy of the Welsh government and associated public bodies.

Powers

The Committee was established on 26 June 2007 as one of the Assembly’s scrutiny committees. Its powers are set out in the National Assembly for Wales’ Standing Orders, particularly SO 12. These are available at www.assemblywales.org

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Chair’s Foreword

All too often we hear that the system that exists to ensure the safety and protection of children has failed. Local Safeguarding Children Boards were set up to ensure that the organisations in each local authority area co-operate so that the system does not fail and the welfare of children is protected, and the Committee decided to look at the performance and effectiveness of these Boards in achieving this core aim.

During the course of the Inquiry, we heard evidence of weaknesses in joint working arrangements between LSCBs and other local partnerships; shortcomings in the current arrangements for funding LSCBs; a disconnect between the strategic work of LSCBs and the knowledge and awareness of front-line practitioners; variation across Wales in LSCBs’ effectiveness to protect vulnerable groups of children; problems with information sharing across agencies; and a lack of meaningful participation by children and young people in the work of LSCBs.

The recommendations in our report cover areas such as partnership working, information sharing and funding, and we hope that they will lead to an improved, co-ordinated service and that the health and welfare of our children and young people can be more effectively safeguarded.

On behalf of the Committee, I would like to express my gratitude to all those who contributed to this inquiry, and I commend it to the Minister for Health and Social Services and to the National Assembly for Wales.

Chair, Health, Wellbeing and Local Government Committee
November 2010
The Committee's Recommendations

Recommendation 1. We recommend that the Welsh Government should ensure that guidance clarifies where accountability lies between partnerships for the range of issues along the safeguarding spectrum, from child protection to broader safeguarding issues. (Page 29)

Recommendation 2. We recommend that the Welsh Government should ensure that guidance clarifies the specific focus of LSCBs and their role in holding other partnerships to account, and also addresses the issue of differing safeguarding thresholds held by agencies. (Page 29)

Recommendation 3. We recommend that the Welsh Government should ensure that LSCB guidance addresses the over-reliance on Social Services Departments and re-states the responsibility of all organisations at national, regional and local levels to working effectively together to safeguard and protect children. (Page 29)

Recommendation 4. We recommend that the Welsh Government should seek to address current inconsistency in the use of terminology. (Page 29)

Recommendation 5. We recommend that the Welsh Government should promote a more collaborative approach between LSCBs. (Page 29)

Recommendation 6. We recommend that the Welsh Government should ensure that guidance strengthens the current ‘duty to co-operate’ and reviews whether existing guidance is sufficiently robust in respect of the powers or LSCBs to intervene where required. Regulations should also be reviewed if required. (Page 29)

Recommendation 7. We recommend that the Welsh Government should ensure that individual agencies and LSCBs prioritise awareness-raising of the role of LSCBs amongst frontline staff. Further to this, the Welsh Governments should review the adequacy of current systems in communicating information from LSCBs to frontline staff and vice versa. (Page 29)
**Recommendation 8.** We recommend that the Welsh Government should review the financial and human resource costs associated with undertaking Serious Case Reviews and should consider the potential of revising funding arrangements to fund SCRs from a central budget. (Page 30)

**Recommendation 9.** We recommend that the Welsh Government should consult on developing further guidance in respect of partnerships, to cover: the role of all partnership bodies and their relationship to, and involvement in, the work of LSCBs; how partnerships must work together to deliver effective safeguarding of children in their area and clarifying their individual accountability in respect of the broad spectrum of issues relevant to safeguarding children; clarifying the role of LSCBs in holding other partnerships to account in respect of their safeguarding responsibilities; and whether Youth Offending Team Management Boards should be included within any new guidance on partnership working and take into account the responsibilities held by Probation, Prison Service and Police through the Multi Agency Public Protection Arrangements (MAPPA). (Page 42)

**Recommendation 10.** Children and Young People’s Partnership Guidance should be revised to specifically require CYPPs to establish their safeguarding priorities jointly with LSCBs. (Page 43)

**Recommendation 11.** We recommend that the Welsh Government should consider amending the *Local Safeguarding Children Boards (Wales) Regulations 2006*, to strengthen the requirements to include agencies other than those named in the Children Act 2004 in the membership of LSCBs, specifically the Chair of CYPP and potentially the chairs of other partnerships. (Page 43)

**Recommendation 12.** We recommend that the Welsh Government should implement the recommendation of the LSCB Review Group which stated that the Welsh Government should consult on revised guidance on the information sharing responsibilities and duties of partner agencies, including the potential for use of performance indicators. (Page 46)

**Recommendation 13.** We recommend that LSCBs should work collaboratively to share good practice in relation to information sharing. LSCBs should also share good practice in how such procedures are effectively promoted to front-line staff. (Page 46)
**Recommendation 14.** We recommend that the Welsh Government should, as a matter of urgency, consult on a national funding formula for LSCBs based on percentage contributions and taking into account the non-devolved nature of some of the LSCB member agencies and also the issue of in-kind contributions. In order to achieve this, the Welsh Government should consider amending current guidance to specify that agencies ‘will contribute’ rather than ‘may contribute’. (Page 49)

**Recommendation 15.** We recommend that the Welsh Government should consult with stakeholders regarding the feasibility and benefits of ‘beacon LSCBs’ who would play a lead role in developing the LSCB approach to specific groups of vulnerable children. (Page 52)

**Recommendation 16.** We recommend that the Welsh Government should request that the CSSIW, as part of the new joint inspection arrangements, review the effectiveness of LSCBs in meeting the needs of specific groups of vulnerable children. (Page 52)

**Recommendation 17.** We recommend that Welsh Government Guidance on partnerships should require LSCBs and CYPPs to have complimentary joint programmes of work in respect of specific vulnerable groups of children. (Page 53)

**Recommendation 18.** We recommend that the Welsh Government should produce specific guidance for LSCBs on disability. (Page 53)

**Recommendation 19.** We recommend that the Welsh Government should issue guidance which requires LSCBs to meaningfully involve children and young people as relevant in the work of LSCBs. (Page 54)

**Recommendation 20.** We recommend that the Welsh Government should ensure that LSCBs prioritise working co-operatively with CYPPs and individual LSCB member agencies to maximise the range of existing resources to develop participatory methodologies with children who have experience of the child protection and safeguarding systems, as well as children and young people generally. Good practice should be shared between authorities. (Page 54)
1. Introduction

1. The Committee agreed to conduct an inquiry into Local Safeguarding Children Boards to ensure that relevant organisations in each local authority area co-operate to safeguard and promote the welfare of children.

Terms of reference

2. The Committee agreed the terms of reference for the inquiry on 21 January 2010. They were:

“An inquiry into whether Local Safeguarding Children Boards (LSCB’s) are performing effectively and consistently across Wales in strengthening arrangements for protecting and promoting the welfare of children with a focus on the:

- appropriateness of existing Welsh Government Policy and Guidance as relevant to LSCBs;
- appropriateness of the scope and focus of LSCB responsibilities;
- membership of LSCBs with reference to both the role of statutory partners and also the voluntary sector and smaller / specialist organisations;
- arrangements for funding LSCBs;
- the relationship of LSCBs to other local partnerships, including Children and Young People’s Partnerships; Community Safety Partnerships; Local Service Boards; the planned Integrated Family Support Teams;
- the effectiveness of LSCBs in promoting the protection and welfare of specific groups of vulnerable children such as children with disabilities, asylum seeker and trafficked children, black and minority ethnic children;
- the effectiveness of LSCBs in their specific role with regard to promoting the information sharing responsibilities and duties of LSCB partner agencies; and
- the effectiveness of LSCBs in involving children and young people in their work.”
Methods

3. The inquiry was held between February and June 2010, and a call for evidence was issued on 18 February 2010. Sixteen submissions were received, which can be found at Annex A.

4. Fourteen sets of witnesses were invited to give oral evidence during four Committee meetings. A list of meeting dates, details of the witnesses who appeared, written papers provided to the Committee, and links to transcripts are provided at Annexes B and C.

5. Agendas, papers and transcripts for each meeting are available in full on the Committee’s pages on the National Assembly for Wales’ website, which can be accessed at http://www.assemblywales.org/bus-home/bus-committees/bus-committees-scrutiny-committees/bus-committees-third-hwlg-home/bus-committees-third-hwlg-agendas.htm
2. Background

Local Safeguarding Children Boards: an overview

6. Part 3 of the Children Act 2004 required each local authority in Wales to establish a Local Safeguarding Children Board (LSCB) to replace Area Child Protection Committees. Subsequently established in 2006, the purpose of a LSCB is to ensure that relevant organisations in each local authority area co-operate to safeguard and promote the welfare of children.

7. LSCBs bring together representatives from each of the main agencies and professionals responsible for helping to protect children from abuse and neglect. It is intended that the statutory footing of the boards should improve their influence over strategic decisions and provide them with more senior management commitment than was the case with previous arrangements within Area Child Protection Committees.

8. LSCBs were designed to be the vehicle for moving from a narrower focus on child protection to a broader safeguarding agenda. These functions include the responsibility for undertaking Serious Case Reviews.

Purpose

9. The Children Act 2004 defines the objectives of a Local Safeguarding Children Board as:

- to co-ordinate what is done by each person or body represented on the Board for the purposes of safeguarding and promoting the welfare of children in the area of the authority by which it is established; and
- to ensure the effectiveness of what is done by each such person or body for those purposes.

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1 The creation of LSCBs followed a recommendation made by Lord Laming in his report on The Victoria Climbie Inquiry 2003.
3 LSCBs have a statutory requirement to undertake a Serious Case Review where abuse or neglect is known or suspected in the death or serious harm of a child. The review aims to identify steps to prevent similar harm occurring.
Welsh Government Guidance issued in 2006 *Safeguarding Children: Working Together Under the Children Act 2004* states in respect of LSCBs that:

“4.15 The focus for Safeguarding Boards should remain the protection of children from abuse and neglect. Policies and practice should therefore be primarily targeted at those children who are suffering, or at risk of suffering significant harm.

“4.16 Ensuring that effective policies and working practices are in place to protect children and that they are properly co-ordinated remains a key role for Safeguarding Boards. Only when these are in place should Boards look to their wider remit of safeguarding and promoting the welfare of all children.”

**Composition of LSCBs**

10. The Children Act 2004 specifies the statutory partners of a local authority that must be represented on each Safeguarding Board. A children’s services authority (i.e. local authority) must take ‘reasonable steps’ to ensure that the LSCB includes representatives of ‘relevant persons and bodies’ as may be prescribed by the Welsh Government in regulations.

11. The *Local Safeguarding Children Boards (Wales) Regulations 2006* prescribe that a partner agency official must have a sufficiently senior status be a member of the Board. The Act makes provision for representatives of other relevant persons or bodies to be represented on LSCBs following consultation with Board partners.

**Funding**

12. Welsh Government Guidance states that, to function effectively LSCBs need to be supported with adequate and reliable resources. Section 33 of the Children Act states that statutory partners⁴ may make payments towards expenditure incurred by, or for purposes connected with, an LSCB, either directly, or by contributing to a fund out of which payments may be made.

13. Statutory partners may also provide staff, goods, services, accommodation or other resources for purposes connected with an

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⁴ Or in the case of prisons, either the Secretary of State or the contractor
LSCB. The budget for each LSCB and the contribution made by each member organisation should be agreed locally.

**Welsh Government Review**


15. In May 2008, the Deputy Minister for Health and Social Services approved the recommendations of the report and agreed to undertake a consultation with LSCBs and other interested parties on revised guidance and regulations based on the review recommendations.

**Care and Social Services Inspectorate Wales (CSSIW) Review**

16. In October 2009, the Care and Social Services Inspectorate Wales (CSSIW) published a report on Safeguarding and Protecting Children in Wales: the review of Local Authorities and the Local Children Safeguarding Boards. The review identified the challenges faced by LSCBs, stating that:

   “There is also no clear relationship between the effectiveness of LSCBs and the quality of practice and services in safeguarding and protecting children.”

17. The review also found that, whilst some LSCBs had made ‘significant progress’ in establishing effective joint arrangements, a few had only made ‘limited progress’. The report noted that ‘many LSCBs were not effectively discharging their functions as set out in the guidance’.

18. Other issues identified were LSCB funding levels; the impact of NHS reforms (as outlined in the section on NHS reorganisation below); the lack of clarity about the scope of LSCBs’ responsibilities in relation to safeguarding; and that ‘frontline practitioners and team managers were often unaware of the LSCBs role in co-ordinating policy and practice’.

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5 Care and Social Services Inspectorate Wales, *Safeguarding and Protecting Children in Wales: the review of Local Authorities and the Local Children Safeguarding Boards*, October 2009
NHS Reorganisation

19. The 2009 CSSIW report⁶ found that ‘there was widespread concern expressed about the impact of NHS reforms on the ability of Local Safeguarding Children Boards to secure continuity of representation from the NHS’.

20. The Children's Commissioner for Wales Annual Review 2008-09⁷ notes the impact of the NHS re-organisation on the safeguarding agenda stating:

“I am particularly concerned about the ability of the newly enlarged Local Health Boards to undertake their roles on Local Safeguarding Children Boards (LSCBs)...Recent cases of child deaths have highlighted the important role of health providers in identifying child injuries. I am therefore concerned that the recent consultation on the unification of public health services across Wales is not sufficiently robust in relation to the role of the National Public Health service in Wales in safeguarding children.”

Integrated Family Support Teams (IFST)

21. The Children and Families (Wales) Measure⁸ makes provision for implementing an Integrated Family Support Team (IFST) model. The IFST model consists of statutory, multi-disciplinary partnerships that aim to strengthen support to vulnerable children and families through reconfiguring services towards more targeted support delivered by multidisciplinary professional teams.

22. Each local authority must establish an Integrated Family Support Board. During Stage 1 consideration of the Measure (as proposed), some witnesses outlined concerns about the proposed governance arrangements of IFSTs and how IFS boards would fit strategically with existing boards and partnerships, such as Local Safeguarding Children Boards. The plan is for the three ‘Pioneer IFST areas’⁹ to be launched in

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⁶ Care and Social Services Inspectorate Wales, Safeguarding and Protecting Children in Wales: the review of Local Authorities and the Local Children Safeguarding Boards, October 2009
⁷ Children’s Commissioner for Wales, Children’s Commissioner for Wales Annual Review 2008-09
⁸ Children and Families (Wales) Measure (as passed)
⁹ Newport; Wrexham; Merthyr Tydfil/Rhondda Cynon Taff (Consortium)
spring 2010 and for Wales-wide implementation to take place 2013 - 2015.
3. Scope and Role of LSCBs

Introduction

23. Local Safeguarding Children Boards (LSCBs) were designed to be the vehicle for moving from a narrower focus on child protection to a broader safeguarding agenda. A range of views has been expressed as to whether the current scope and focus of LSCB responsibilities are clear, appropriate and achievable.

Focus

24. The Director of NSPCC Cymru stated that lack of prescriptive guidance has resulted in some LSCBs focusing tightly on child protection:

“LSCBs have responsibility for safeguarding and child protection but, quite rightly, the Assembly Government has been quite clear that they must focus on the child protection element first and foremost rather than trying to move out into the wider coverage. However, it has not been prescriptive, so what we find is that some LSCBs focus very tightly on the child protection element of their responsibilities and some of the other wider safeguarding responsibilities are undertaken by the children and young people partnership groups and the community safety groups...

“and there is not always very clear reporting...on how those safeguarding elements of the work are being undertaken. So, we would like to see that being very prescriptive, so there is real clarity around reporting back on how those safeguarding activities are being carried out.”

25. The CSSIW stated that,

“few safeguarding boards were found to have extended their remit beyond child protection.”

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11 Health, Wellbeing and Local Government Committee 13.5.10, oral evidence
12 Health, Wellbeing and Local Government Committee 13.5.10, written submission from Care and Social Services Inspectorate Wales
26. Similarly, the Wales Probation Trust acknowledged that many frontline probation staff,

"would still view child protection as the key issue, rather than the wider role."  

27. Barnardo’s Cymru indicate that LSCBs are functioning reactively rather than proactively and state that many LSCBs struggle to respond to the range and breadth of responsibilities that fall to them.

28. Detective Superintendent Pam Kelly, representing Welsh police forces, stated,

"the safeguarding agenda is so vast, it is difficult for agencies to know what is really expected of them and what safeguarding means in Wales."  

29. The Chief Executive and former Chair of Children in Wales told the Committee that some LSCBs have found it difficult to get to grips with the wider safeguarding agenda, which includes areas such as safe play and road safety, and suggested a curtailed role for LSCBs, focusing on the core business of child protection and placing responsibility for the broader safeguarding agenda with Local Service Boards.

30. The Local Health Boards and Nurse Directors recommended,

"that Local Safeguarding Children Boards refocus their agenda on child protection and safeguarding the most vulnerable children whilst holding other partnerships to account for driving forward and delivering the wider safeguarding agenda."

31. In terms of the ‘on the ground’ impact of LSCBs, the Children’s Commissioner suggested an expansion of the current role to include a more practical, multi-agency focus in respect of issues such as training.

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13 Health, Wellbeing and Local Government Committee 29.4.10, oral evidence
14 Health, Wellbeing and Local Government Committee 29.4.10, oral evidence
15 Consultation response, HWLG(3)-SCB021 Local Health Boards & Nurse Directors
Reliance on Social Services Departments

32. Some witnesses stated that there is an imbalance as to how agencies are fulfilling their responsibilities in respect of safeguarding and child protection and said that there is still too much reliance on, and expectation of, Social Services Departments.

33. The Children's Commissioner for Wales commended the CSSIW review, ‘Safeguarding and Protecting Children in Wales: the review of Local Authorities and the Local Children Safeguarding Boards’ for its key message that,

“too much reliance and expectation [is] being placed on local authority social services.”\(^{16}\)

34. The Chief Executive of the NSPCC corroborated this view,

“we need to be absolutely clear that although the legislation says that every organisation has to be responsible for safeguarding, our experience is that very often that does tend to be shifted to social services.”\(^{17}\)

Terminology and Thresholds

35. In his oral evidence, the Children’s Commissioner suggested that

“some agencies are talking at odds with each other when they talk about safeguarding and child protection.”\(^{18}\)

He added that there needs to be a clearer understanding of the difference.

36. Wrexham LSCB stated in written evidence that,

“there is a need to ensure that we do not allow safeguarding and child protection to become synonymous.”\(^{19}\)

37. The NSPCC also said that the terminology and interpretation of ‘child protection’ should be looked at:

\(^{16}\) Care and Social Services Inspectorate Wales (2009) *Safeguarding and Protecting Children in Wales: the review of Local Authorities and the Local Children Safeguarding Boards*

\(^{17}\) Health, Wellbeing and Local Government Committee 13.5.10, oral evidence

\(^{18}\) Health, Wellbeing and Local Government Committee 13.5.10, oral evidence

\(^{19}\) Consultation response, HWLG(3)-SCB011 Wrexham Safeguarding Children Board
“One area that you could look at...is the terminology and the interpretation of child protection and safeguarding”.20

38. Detective Superintendent Pam Kelly raised the overlapping issue of thresholds, outlining concerns of the police forces that, whilst child protection thresholds are the same for all agencies, safeguarding thresholds vary, which is perceived to be a problem in respect of the effective functioning of LSCBs.

39. The NSPCC held a similar view:

“There is another key issue...to do with the interpretation of child protection and safeguarding thresholds and not having a consistent understanding that staff are confident in using. You may find that thresholds for child protection differ across local authorities, and that can be very confusing, particularly for staff at the grass-roots level, namely the staff who are working with the vulnerable children and families. If those staff are confused about where the thresholds for child protection lie, then you have a problem.”21

40. The Children’s Commissioner for Wales said:

“The thresholds for triggering a child protection referral and concern about abuse and neglect are so open to interpretation that you see different thresholds operating across Wales, and we really need to sort that out.”22

Local Focus and Regional Collaboration

41. There were mixed views on the proposal for regional LSCBs. The Committee heard that there were two joint LSCBs operating in North Wales and that there was further development of this collaboration agenda across other authorities.

42. Some witnesses questioned the wisdom of having LSCBs in each local authority, citing the risk of duplication (and associated costs) and also the pressure that it places on agencies to field appropriate levels of representation, in particular where the boundaries of large agencies are not coterminous with LSCBs.

20 Health, Wellbeing and Local Government Committee 13.5.10, oral evidence
21 ibid
22 ibid
43. Some evidence suggested that the creation of regional LSCBs could be a way of overcoming these difficulties. In its written evidence, Children in Wales stated that there is scope for organisations to work together and find economies of scale, and suggested, “it may be opportune to consider reducing the overall number of LSCBs”.^{23}

44. The NSPCC stated that, “although the whole principle of looking at local need and discretion is a good one, when you are talking about consistency in terms of safety it has not, in our experience, worked out terribly well.”^{24}

45. Action for Children indicated that opportunities for economies of scale were being missed and that, as an organisation, it remains unconvinced about the need for 22 LSCBs in Wales. Barnardo’s stated that having so many LSCBs was a hindrance to agencies and organisations sharing learning.

46. Other witnesses and consultees opposed the concept of enforced regionalisation due to concerns that it would dilute the ability of LSCBs to respond to local issues and needs, thus leading to less effective and responsive strategic approaches.

47. The importance of local knowledge regarding child protection cases was stressed. Concerns were also raised that, where two LSCBs conduct their business through a shared structure, the size of the agenda, the administration of numerous sub-groups and limitations in cascading information can be challenging.

48. CSSIW stated that LSCBs need to connect with their local communities to ensure that they ‘own’ the responsibility for the safety of that community.

49. The WLGA and ADSS supported this view and suggested that the shortcomings associated with having LSCBs in each authority could be overcome by improved collaboration at a local level rather than forced

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^{23} Health, Wellbeing and Local Government Committee 10.6.10, written submission from Children in Wales

^{24} Health, Wellbeing and Local Government Committee 13.5.10, oral evidence
regionalisation. Parry Davies of the Association of Directors for Social Services Cymru said,

“co-ordinating business support arrangements across local authorities...could give the best of all worlds, in that you would have economies of scope, scale and capability, because it is a specialist role to support LSCBs, while at the same time ensuring a local focus. My feeling is that if regional local safeguarding children boards were to be established, it would not be long before something similar would be created at the local level to ensure a proper focus on safeguarding and child protection.”

50. Newport LSCB gave examples of current regional collaboration, for example the ongoing work on sexual exploitation.

LSCBs’ Executive and Scrutiny Role

51. The Children Act 2004 defines the objectives of a Local Safeguarding Children Board as:

“To co-ordinate what is done by each person or body represented on the Board for the purposes of safeguarding and promoting the welfare of children in the area of the authority by which it is established; and

To ensure the effectiveness of what is done by each such person or body for those purposes.”

52. A number of the written consultation responses, in particular from LSCBs themselves, identify a perceived ‘structural weakness’ whereby the LSCBs have a combined executive and scrutiny function.

53. There was substantial evidence on the confusion and the inherent tensions resulting from the combined executive and scrutiny role. This is exacerbated by some blurring of the boundaries between the role and responsibilities of individual LSCB member agencies and the responsibility of the collective LSCB board, for example in terms of communicating policy and guidance to frontline staff.

25 Health, Wellbeing and Local Government Committee 27.5.10, oral evidence
26 Children Act 2004
54. Witnesses suggested that current legislation appeared to have put the Boards in the position of having the line management responsibility and executive responsibility for the quality of services provided by public service bodies in the safeguarding arena, which places them in the position of having responsibility without power, which is potentially a dangerous weakness in the safeguarding system.

55. Concerns were also raised that the LSCB is made up of senior professionals representing their respective agencies and that it is not an organisation in its own right. There is a belief that there should be a clearer expectation that respective agencies and local authorities take responsibility for raising awareness and implementing policy and guidance and that the role of the LSCB is to oversee, scrutinise and challenge the respective agencies and/or local authorities to ensure these requirements are fully implemented and embedded in practice. Torfaen LSCB said,

“there is a lack of clarity regarding where responsibility lies for safeguarding children within the authority – with individual agencies, or with the LSCB?”

56. The example of Serious Case Reviews was cited to illustrate the tension and confusion between the executive and scrutiny role. The chair of the LSCB is often a senior manager from the Social Services Department, and questions were raised as to how effectively Social Services managers can fulfil the role of LSCB chair in commissioning and delivering an SCR, the findings of which are often critical of the role Social Services has played.

57. The required liaison and partnership working needed to deliver the executive function is seen as making effective scrutiny and challenge more difficult. One LSCB indicated that there is an inherent tension in working under a partnership arrangement and fulfilling a scrutiny and challenge role, particularly as the process for this is not clearly stipulated within the guidance.

58. It was also suggested that the scrutiny and intervention powers are insufficient, and there was a suggestion that the Welsh Government should strengthen policy and guidance to increase the scrutiny powers of LSCBs.

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27 Consultation response, HWLG(3)-SCB008 Torfaen County Borough Council
59. Carmarthenshire LSCB called for more robust powers to intervene as a multi-agency body where areas for improvement are identified through scrutiny. Gwynedd and Anglesey LSCB also questions,

   “whether the ‘duty to co-operate’ request is sufficient within current guidance.”

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Frontline Professionals

60. Concerns were raised about the perceived disconnect between the strategic work of LSCBs and the knowledge and awareness of frontline practitioners.

61. In its paper to the Committee, CSSIW stated that:

   “Frontline practitioners and team managers were often unaware of the LSCB’s role in coordinating policy and practice.”

29

62. It went on to suggest that frontline practitioners’ lack of awareness of LSCBs raised broader concerns regarding social work recruitment processes, given that the role of LSCBs is outlined in the key Welsh Government guidance.

63. The CSSIW evidence stated that it was,

   “quite surprising to learn that you could go through social work training and be employed by an authority as a social worker protecting children, and yet you would not know what an LSCB does or what it is about.”

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64. One of the written consultation responses from a practising independent social worker with experience of significant child protection work indicated that there were few opportunities for frontline practitioners to engage with LSCBs.

65. The Children’s Commissioner stated that:

   “While it is essential that LSCBs work at a strategic level, there are concerns that the discussions and outcomes from the

28 Consultation response, HWLG(3)-SCB014 Gwynedd and Anglesey LSCB
29 Health, Wellbeing and Local Government Committee 13.5.10, written submission from Care and Social Services Inspectorate Wales
30 Health, Wellbeing and Local Government Committee 13.5.10, oral evidence
LSCBs are not always disseminated to the practitioners working at a local level.”

66. One of the implications, he suggested, is that direct learning from Serious Case Reviews is not always disseminated to frontline practitioners. The Children’s Commissioner suggested that such a lack of knowledge by frontline workers was compounded by the wider problems relating to management, supervision, caseloads and training.

**Monitoring and Inspection**

67. The Business Manager of Newport Safeguarding Children Board stated,

“I have seen a lot of business plans that are very much about the ‘doing’, so the LCSBs are the 'doing' entity. In fact, the LSCBs should be about monitoring, evaluating and scrutiny.”

68. The NSPCC also stated that consistent auditing is required, as partnerships are not always consistent in reporting back to the LSCB:

“We also need to look at auditing in terms of how that is carried out. I know that some local children safeguarding boards undertake audits of how organisations are fulfilling their safeguarding responsibilities. I am not aware of any of the 12 LSCBs that the NSPCC is on undertaking that work. When I have seen it done, it is very comprehensive and it highlights gaps in practice and knowledge around safeguarding that the LSCB can then look at in terms of training plans”.

69. Some witnesses suggested that improvements were required in the current LSCB performance monitoring arrangements. Specifically it was noted that when LSCBs have looked at performance indicators they predominantly use data that monitors the performance of Social Services Departments, which results in LSCBs reviewing the performance of Social Services rather than their own progress.

70. It was suggested that LSCBs should be designing their own local indicators, which could be used as a measure of how all the agencies

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31 Health, Wellbeing and Local Government Committee 13.5.10, written submission from Children’s Commissioner for Wales
32 Health, Wellbeing and Local Government Committee 27.5.10, oral evidence
33 Health, Wellbeing and Local Government Committee 13.5.10, oral evidence
work together and that it would be helpful to have guidance on what might be considered appropriate joint performance indicators.

71. The LSCB self-assessment and improvement tool (SAIT) was generally welcomed and regarded as giving clearer direction to LSCBs. One witness suggested that there had been limited scrutiny from the Welsh Government in relation to areas for improvement arising from these self-assessment processes. The CSSIW however outlined the development of a new joint inspection process, stating that ‘the intention therefore had been to develop a programme for the inspectorates to evaluate the effectiveness of LSCBs, in 2010, utilising a multi-agency self audit and development tool’. They also state that ‘a significant project to be taken forward would be the development of a shared inspection framework of LSCBS and safeguarding across the Children and Young People’s Partnerships’.

**Serious Case Reviews (SCRs)**

72. LSCBs have a statutory requirement to undertake a Serious Case Review where abuse or neglect is known or suspected in the death or serious harm of a child. The review aims to identify steps to prevent similar harm occurring.

73. The CSSIW report on SCRs of October 2009 found a sharp rise in the number of Serious Case Reviews in the last two years. There were 17 cases subject to review in April 2007 and 34 in April 2008—an increase of 100 per cent. It is estimated that there are currently 50 to 60 cases in the system, which are either being reviewed or are awaiting review.

74. During the course of the Committee Inquiry, many concerns were raised about SCRs, which went much further than the LSCB Inquiry terms of reference. Concerns raised included a lack of consistency in the way in which SCRs are requested by LSCBs; the limited shared learning and reflection arising from the findings of SCRs; the time spent managing the production of SCRs; and the time delay between the harm to the child and the subsequent publication of the SCR.

75. The Deputy Minister indicated that there are two current reviews underway in respect of SCRs. The first is a review of the structure of

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34 *Improving Practice to Protect Children in Wales: An examination of the role of the Serious Case reviews.*
SCRs and the second will look back at the SCRs undertaken over the last two years to gather the key learning points.

76. In terms of SCRs as they relate to the Committee LSCB Inquiry, concerns were raised about the considerable workload related to the SCR process and the time associated with commissioning and managing the reviews.

77. The NSPCC and the witness representing the Welsh police forces both cited the rising costs associated with SCRs. Local Health Boards and Nurse Directors suggested that as SCRs often require expert independent chairs and overview writers, significant additional expense can be incurred.

78. They also state that, as the need for SCRs cannot be predicted, such costs may not be budgeted for. They recommended that consideration is given to how this could be met by a central budget held by Welsh Government, for example.

**Welsh Government Policy and Guidance as relevant to LSCBs**

79. Evidence to the Committee suggests that the current Welsh Government guidance *Safeguarding Children: Working Together under the Children Act 2004* does, in general, provide a good framework for LSCBs.

80. It is regarded as easily accessible, appropriate and providing clear statutory guidance in respect of key areas of LSCB functioning, such as LSCB membership; agencies’ duty to co-operate and work together; and the individual roles of agencies in safeguarding and promoting the welfare of children.

81. One witness suggested that current guidance leads to considerable variation across Wales. The forthcoming review of guidance, confirmed by the Deputy Minister, is considered timely. A consultation process that actively involves relevant professionals would be welcomed.

82. Whilst, in general, existing guidance was perceived to be appropriate, evidence indicates that some aspects of guidance and policy do need updating to reflect changes that have occurred since the launch of the ‘Working Together’ guidance, such as those in the structures of the NHS and other agencies.
83. Evidence also suggests that guidance needs to be strengthened in certain areas, notably funding arrangements and partnership working and possibly the powers to act in the face of non co-operation by some agencies.

84. Several witnesses, specifically LSCBs, indicated that too much additional and lengthy guidance is being published and that this detracts from progressing the core areas of LSCBs’ work. Some witnesses did identify areas specific to LSCBs where additional guidance is needed, for example the relationship between LSCBs, coroners and post mortem testing; the ability/power of LSCBs to identify concerns about independent practitioners operating with professional accreditation, for example in counselling services; and the updating of Safeguarding Children: Working together under the Children Act 2004 to provide appropriate advice on the application of the Safeguarding Vulnerable Groups Act.

85. The National Deaf Children Society Cymru recommends that new guidance be issued for LSCBs on how to ensure safeguarding arrangements meet the needs of disabled children and young people and that disability equality duties are met.

**Deputy Minister’s View**

86. On the reliance on Social Services Departments, the Deputy Minister stated,

“we must accept that the responsibility lies with local agencies and not just social services. The situation where social services are the fallback has to end. So, there is work to do there.”

87. On the issue of whether it would be better to have regional LSCBs or whether the local focus should be retained, the Deputy Minister told the Committee,

“The line that we have taken in Wales is not to be prescriptive and to allow local decision makers to decide what best serves their area.”

and that,

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35 Health, Wellbeing and Local Government Committee 10.6.10, oral evidence
“the responsibility to establish that structure and to see to its initial effectiveness lies with local agencies, but that is not to say that the Welsh Assembly Government does not have a role to play, because we do.”36

88. The Deputy Minister stated that, in some areas, such as Conwy and Denbighshire, and Anglesey and Gwynedd, boards have merged and that:

“We have to see whether that merger works and whether that is best for the process.”37

89. The Deputy Minister indicated that LSCBs should collaborate and share resources where appropriate:

“If there is a piece of work that can be done in Conwy and in Swansea or Neath Port Talbot or wherever, resources could be shared in that way and the result of that work could be shared...

“An example of a piece of work is the national protocol on the trafficking of children...A piece of work such as that can be shared and should be.”38

Committee’s View

90. We feel that some LSCBs focus tightly on child protection and give safeguarding less of a focus, and that clarification is needed on the role and focus of LSCBs. We believe that work needs to be done to ensure that the distinction between the terms ‘safeguarding’ and ‘child protection’ is clear to all working in the relevant agencies.

91. We believe that there is still too much reliance on, and expectation of, Social Services Departments. It is the responsibility of all organisations at national, regional and local levels to work effectively together to safeguard and protect children.

92. We believe that the local focus of LSCBs is important but that resource and information sharing would give the best of both worlds, and that the Welsh Government should promote a more collaborative approach between LSCBs.

36 Health, Wellbeing and Local Government Committee 10.6.10, oral evidence
37 ibid
38 ibid
93. We believe that work needs to be done to raise awareness of LSBs among frontline staff in relevant agencies.

Recommendations

Recommendation 1: We recommend that the Welsh Government should ensure that guidance clarifies where accountability lies between partnerships for the range of issues along the safeguarding spectrum, from child protection to broader safeguarding issues.

Recommendation 2: We recommend that the Welsh Government should ensure that guidance clarifies the specific focus of LSCBs and their role in holding other partnerships to account, and also addresses the issue of differing safeguarding thresholds held by agencies.

Recommendation 3: We recommend that the Welsh Government should ensure that LSCB guidance addresses the over-reliance on Social Services Departments and re-states the responsibility of all organisations at national, regional and local levels to working effectively together to safeguard and protect children.

Recommendation 4: We recommend that the Welsh Government should seek to address current inconsistency in the use of terminology.

Recommendation 5: We recommend that the Welsh Government should promote a more collaborative approach between LSCBs.

Recommendation 6: We recommend that the Welsh Government should ensure that guidance strengthens the current 'duty to cooperate' and reviews whether existing guidance is sufficiently robust in respect of the powers or LSCBs to intervene where required. Regulations should also be reviewed if required.

Recommendation 7: We recommend that the Welsh Government should ensure that individual agencies and LSCBs prioritise awareness-raising of the role of LSCBs amongst frontline staff. Further to this, the Welsh Governments should review the adequacy of current systems in communicating information from LSCBs to frontline staff and vice versa.
Recommendation 8: We recommend that the Welsh Government should review the financial and human resource costs associated with undertaking Serious Case Reviews and should consider the potential of revising funding arrangements to fund SCRs from a central budget.
4. Membership of, and representation on, LSCBs

Membership of LSCBs

94. The *Children Act 2004* specifies the statutory partners of a local authority who must be represented on each Safeguarding Board. Evidence was received both in terms of whether current levels of representation were satisfactory and also on the appropriateness of the specified statutory membership of LSCBs.

95. Some LSCBs indicated that securing appropriate levels of representation and attendance by Board Members in LSCB meetings presents a challenge. Whilst some evidence from the specified statutory partners indicated that LSCBs are well represented at the statutory level, with appropriate levels of seniority, regular attendance and satisfactory deputising arrangement in place.

96. Newport LSCB said, in their written evidence:

   “Securing appropriate levels of participation by Board Members in LSCB meetings remains a challenge. Changes in agency representation on the Board and lack of attendance can make it difficult to maintain a shaped vision to sustain progress and development. It can also limit the establishment of relationships, trust and effective networking and operation.”  

97. Concerns were raised about the capacity of regional organisations such as those in the areas of health, probation and the police in fielding appropriate levels of representation. In their written evidence, Caerphilly LSCB said:

   “Regional services such as Health and the Police find maintaining senior representation challenging due to the sheer number of partnerships within local authority areas.”

98. The level of staffing requirement to attend the range of LSCB sub-groups was also raised.

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39 Health, Wellbeing and Local Government Committee 27.5.10, written submission from Newport Safeguarding Children Board
40 Health, Wellbeing and Local Government Committee 29.4.10, written submission from Caerphilly Safeguarding Children Board
99. The CSSIW confirmed that some LSCBs have better membership and representation arrangements than others. In general, the current specified membership and the subsequent attendance of these agencies was perceived to be satisfactory. The exception to the effectiveness of these current arrangements is that of the voluntary sector and also potentially the membership of key personnel from other local partnerships.

100. CSSIW said, in their written evidence:

“All boards had a record of clear and regular attendance by all partners and were making good progress in coordinating services and assuring quality through joint performance management systems and training. Other boards had fluctuating membership and attendance, often accompanied by uncertainties about the business arrangements for the board.”41

101. The issue of membership overlaps with the concerns raised about effective joint working with other local partnerships such as Children and Young People’s Partnerships and Community Safety Partnerships. (see Chapter 5 on partnerships). It was suggested that the chair of each of these partnerships should be specified members of the LSCB.

102. However, it was also suggested that there is a danger in increasing the number of prescribed membership as that this could result in too many people being ‘around the table’. Where the involvement and participation of other agencies is perceived as useful (such as adult social services and adult health services), this could potentially be facilitated locally rather than through any changes in the current guidance.

**NHS Reorganisation**

103. The balance of evidence suggests that at present there are no major issues emerging regarding representation arising from NHS reorganisation.

104. The Committee heard that a number of agencies, notably the NSPCC and the Children’s Commissioner for Wales, had initially expressed concerns about the potential impact of NHS reforms on the

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41 Health, Wellbeing and Local Government Committee 13.5.10, written submission from Care and Social Services Inspectorate Wales
effectiveness of the service to deliver its responsibilities in respect of child protection:

“We have consistently found the input of colleagues from health extremely valuable and this is one of the reasons why we have consistently expressed our concern at the lack of clarity around child protection in the recent re-organisation of the NHS in Wales.”

105. The Children's Commissioner for Wales Annual Review 2008-09 notes the impact of the NHS re-organisation on the safeguarding agenda stating:

“I am particularly concerned about the ability of the newly enlarged Local Health Boards to undertake their roles on Local Safeguarding Children Boards (LSCBs). […] Recent cases of child deaths have highlighted the important role of health providers in identifying child injuries. I am therefore concerned that the recent consultation on the unification of public health services across Wales is not sufficiently robust in relation to the role of the National Public Health service in Wales in safeguarding children.”

106. Concerns were raised in evidence that LSCBs would not secure appropriate representation from the NHS. Health Inspectorate Wales (HIW) suggested that there are capacity issues in fielding representation and that they have stated that the new Local Health Boards need to clarify as a matter of priority the arrangements that they have in place to ensure that they support and contribute to LSCBs on an ongoing basis.

107. The NSPCC raised concerns regarding designated nurses covering ‘five or six’ LSCBs. On balance the evidence suggests that, to date, it is too soon to draw any conclusions regarding the impact of NHS reform on LSCBs.

108. Following the re-organisation of NHS Wales and the publication of the CSSIW and HIW inspectorate reports in respect of child protection and safeguarding of October 2009, the Minister for Health and Social Services asked Professor Sir Mansel Aylward to look at arrangements

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42 Health, Wellbeing and Local Government Committee 13.5.10, written submission from NSPCC Cymru/Wales
that support safeguarding work both within Public Health Wales and the NHS. It is envisaged that the review groups will report in Autumn 2010.

109. In regard to the engagement of the wider health services, HIW stated that their review found the input of GPs to LSCBs to be minimal and said that they would be following this up as part of their future work. The NSPCC raised concerns regarding the input of adult mental health services.

Voluntary sector and smaller / specialist organisations

110. Concerns were raised about the effectiveness of communication with the voluntary sector and smaller community groups. In respect of engaging the voluntary sector, the NSPCC said that the size of the task ‘should not be underestimated’ and highlight the difficulties associated with cascading information to other voluntary sector groups.

111. Barnardo’s Cymru stated:

“Our experience is of an inconsistent approach to engagement with the voluntary sector across LSCBs. Some Boards do not include voluntary sector representation at any level…there are very real barriers to negotiating membership of the LSCB for the voluntary sector in many areas.”

112. In respect of third sector representation, Children in Wales said:

“This is a critical issue when considering safeguarding in its widest sense and also safeguarding in relation to particular aspects e.g. young carers, mental health, disabled children etc.”

113. Other examples were provided of the impact a potential lack of representation might have on particular groups of children. This was due to a perception that the smaller organisations that often champion their needs were not being represented on LSCBs, such as voluntary sector groups working with disabled children and faith groups.

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43 Consultation response, HWLG(3)-SCB003 Barnardo’s Cymru
44 Health, Wellbeing and Local Government Committee 10.6.10, written submission from Children in Wales
114. Some LSCBs had put mechanisms in place, which they believed to work well, for example Caerphilly LSCB has a representative from Gwent Association of Voluntary Organisations who facilitates two-way communication between the LSCB and smaller voluntary sector groups.

115. It was noted however that not all County Voluntary Councils (CVCs) have a children’s worker and therefore any recommendation around including a CVC as a statutory LSCB representative may not be possible to implement. Barnardo’s Cymru said that,

“the process of including a voluntary sector representative organisation with responsibility for communicating to and from the wider voluntary sector in a local authority area is very limited in terms of effectiveness and impact”. 45

116. They went on to state that,

“the local voluntary sector umbrella organisations often lack the expertise in comparison with voluntary sector children’s social care providers.” 46

Role of LSCB chair

117. Evidence highlighted both the strengths and weaknesses in having an independent chair. Where agencies made the case for the chair of the LSCB to be independent, the rationale was based on the belief that this would increase the authority of the chair and also increase the perception of transparency and neutrality whilst avoiding possible conflicts of interest.

118. Witnesses suggested that, in some cases, the LSCB chair could be a senior member of the Social Services Department and could also be responsible for overseeing a Serious Case Review into a case where their own agency might be perceived to have shortcomings.

119. The Children’s Commissioner stated that the chair should be independent in order to have the higher status required to hold others to account. He acknowledged the challenges of securing an independent chair for each LSCB. He stated that,

45 Consultation response, HWLG(3)-SCB003 Barnardo's Cymru
46 ibid
“guidance from the Welsh Government on these roles and functions would help to ensure a consistent approach across Wales”.

120. However others made the case that having an independent chair was unrealistic in terms of sourcing sufficiently skilled and experienced people. The ‘considerable costs’ of paying for an independent chair was also raised.

121. Others pointed out that it is the skills, experience and knowledge of the chair that are important, not simply their independence. Rhondda Cynon Taf LSCB cite their experience of appointing an independent chair stating that whilst it was a positive step in facilitating the change in culture, it,

“became increasingly difficult to maintain the profile of the LSCB in the local strategic partnership arena when the Chair was not employed in any other local capacity, and had no strong local or regional links within RCT”. 47

122. In their experience, having an independent chair resulted in difficulties for the ‘LSCB to affect any kind of meaningful change or carry influence in the safeguarding agenda’.

Deputy Minister’s View

123. In relation to the role of the Chair, the Deputy Minister said that this was,

“a matter for LSCBs to decide.”48

124. She went on to say that the Government’s review would cover the issues raised in evidence.

Committee’s View

125. The Committee feels that LSCBs should ensure that relevant agencies should be involved in the membership of LSCBs, and that mechanisms should be put in place to ensure effective interaction and communication between LSCBs and interested voluntary organisations.

47 Consultation response, HWLG(3)-SCB007 Rhondda Cynon Taff Safeguarding Children Board
48 Health, Wellbeing and Local Government Committee 10.6.10, oral evidence
126. In relation to the issue of an independent Chair, the Committee feels that this should be given further consideration and is content that it will be addressed as part of the Government review.
5. Partnerships/ Working Together to Safeguard Children and Young People

Relationship of LSCBs to other local partnerships

127. The Safeguarding Children: Working Together under the Children Act 2004 document did not attempt to prescribe how agencies should manage relationships between LSCBs and other partnership organisations.

128. Most witnesses highlighted the need for clearer guidance from the Welsh Government on the relationship between LSCBs and other strategic partnerships, in particular Children and Young People’s Partnerships.

129. The risks associated with the current position were perceived to be the danger of safeguarding issues ‘falling between’ the remits of existing partnerships; the duplication of work across partnerships (and associated costs); the lack of coherence and read-across in respect of safeguarding priorities between local partnerships; and the time wasted at a local level trying to unpick and clarify roles and responsibilities.

130. ACPO stated that clearer guidance was essential,

“otherwise key areas of work involving high risk issues could be missed at a local level.”

131. Detective Superintendent Pam Kelly told Committee:

“The point that all of my colleagues who work in public protection and who head public protection in the Welsh police services have raised is that local governance is cloudy. There are local safeguarding boards, local service boards, community safety partnerships, children and young people’s partnerships, substance misuse meetings; where do they all fit and who should local safeguarding children boards report to?”

132. Public Health Wales cited substance misusing families, children as carers, bullying, internet safety and domestic violence as examples of issues where there is,

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49 Consultation response, HWLG(3)-SCB019 Association of Chief Police Officers
50 Health, Wellbeing and Local Government Committee 29.4.10, oral evidence
“failure to acknowledge which partnership should be taking the lead.”\textsuperscript{51}

133. The CSSIW report stated that there is currently a ‘plethora’ of arrangements, carrying the risk of confusion,

“particularly when the boundaries of the different key partner agencies are not co-terminus.”\textsuperscript{52}

134. The Assistant Chief Inspector of the Care and Social Services Inspectorate Wales said that the boundaries become blurred in terms of responsibilities and that:

“In some areas, you find children and young people partnerships taking responsibility for safeguarding and leaving child protection to the LSCBs, with a different arrangement applying in some other areas.”\textsuperscript{53}

135. The need for improved accountability and clearer governance arrangements was suggested to set out where partnerships are accountable to the LSCB in relation to safeguarding. Conwy and Denbighshire LSCB stated that:

“Currently, the LSCB seems to have rather less power and influence than some other partnerships, there perhaps needs to be some power to require certain actions.”\textsuperscript{54}

136. Children in Wales identified the need for:

“Clarity about which is the overarching partnership”\textsuperscript{55}

and recommended that Local Service Boards should be given responsibility to ensure that all partnerships prioritise the wider safeguarding agenda.

137. Carmarthenshire LSCB’s written evidence indicated that it considered that LSCBs should have the strategic lead in the most

\textsuperscript{51} Health, Wellbeing and Local Government Committee 27.5.10, written submission from Public Health Wales
\textsuperscript{52} Safeguarding and Protecting Children in Wales: the review of Local Authorities and the Local Children Safeguarding Boards
\textsuperscript{53} Health, Wellbeing and Local Government Committee 13.5.10, oral evidence
\textsuperscript{54} Health, Wellbeing and Local Government Committee 10.6.10, written submission from Health Inspectorate Wales
\textsuperscript{55} Health, Wellbeing and Local Government Committee 10.6.10, written submission from Children in Wales
serious areas of child protection, with the CYP, Community Safety and Health, Social Care and Wellbeing Partnerships taking the lead in the broader safeguarding areas. However, it saw the LSCB having a monitoring role in working with the partnerships in these areas. It stated that:

“The accountabilities for each element of safeguarding and promoting the welfare of children should be agreed between the LSCB and each of the partnerships.”

Children and Young People’s Partnerships

138. Evidence suggests particular difficulties arising from the pivotal relationship between LSCBs and CYPPs. Conwy and Denbighshire LSCBs raised specific concerns regarding the coherence between LSCBs and CYPPs, citing an example where they perceived that CYPP safeguarding priorities had been set without consultation with the LSCB.

139. Barnardo’s Cymru stated that:

“At the local level there is often a perception that statutory services and child protection sit with the LSCB while wider work including prevention and early intervention lies with the CYPP.”

Consistency

140. The Interim Director of Local Delivery at the Wales Probation Trust said,

“the issue is that there is no consistency across the 22 authorities about the way in which safeguarding boards interact with children and young people’s partnerships, community safety partnerships, and so on.”

141. The Chief Executive of NSPCC Cymru voiced concerns about the lack of consistency in the partnership working:

“You have the 22 local authorities, and you have discretion around where some of these tasks are held. For organisations

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56 Consultation response, HWLG(3)-SCB010 Carmarthenshire Safeguarding Children Board
57 Consultation response, HWLG(3)-SCB003 Barnardo's Cymru/Wales
58 Health, Wellbeing and Local Government Committee 29.4.10, oral evidence
that span more than one local authority, of course, you also have those differences to contend with, you have to ask: is this sitting with the children and young people partnership or, in this particular area, is the LSCB carrying out these responsibilities? So, although the whole principle of looking at local need and discretion is a good one, when you are talking about consistency in terms of safety it has not, in our experience, worked out terribly well.”

142. The Youth Justice Board told us that the effectiveness of Youth Offending Teams' engagement with LSCBs is likely to be variable across Wales, as some are not yet well-versed enough in safeguarding. It also told us that it is undertaking an evaluation at present and that, once it has reported, there should be evidence on how effective LSCBs are in promoting the protection and welfare of vulnerable children in the youth justice system.

Legislation

143. One of the LSCB Business Managers who gave oral evidence to Committee said that she would like to see LSCBs having the authority to direct the priorities of their partners. She said:

“I touched on the power of the safeguarding children board to set the priorities for the children and young people’s plan, and for the health and social care wellbeing board, the community safety partnership and the local safeguarding children board to decide the safeguarding priorities for the area or areas, and for those priorities to have a certain authority, which at the moment they do not have. It is a process of negotiation...the regulations in ‘Working Together to Safeguard Children’... do not say that the LSCB must be listened to, so the children and young people’s partnership has felt, up to now, that it can go ahead and set its priorities independently, instead of asking the LSCB what the priorities are.”

144. Albert Heaney, Chair of Caerphilly LSCB, said that he would want to see legislation stating that partnerships must work together,

“the guidance and documents that will state what should be in our plans [must] have a cross-cutting effect, not a fragmented

59 Health, Wellbeing and Local Government Committee 13.5.10, oral evidence
60 Health, Wellbeing and Local Government Committee 27.5.10, oral evidence
effect. That is the crucial agenda that we would want this committee to consider, ensuring that when we have new legislation and new guidance it will say that partnerships must work together and must deliver effective health, social care and wellbeing across a wide area.”

145. The Chief Executive of Health Inspectorate Wales was of the same view. When asked by the Chair which was the most important priority in his view, he stated,

“it would be to make it a statutory requirement to regulate this area to ensure that all the partners fully participate in the LSCBs”.

Minister’s View

146. The Deputy Minister acknowledged that there were issues around the effectiveness of joint working with other partnerships, such as the CYPP and the community safety partnerships and the health and wellbeing partnerships and said that proposals for improvements in this area were being taken forward.

Committee’s View

147. We feel that the role and responsibilities of LSCBs and their partnership arrangements are not sufficiently clear at present and, as such, further guidance should be developed.

Recommendation 9: We recommend that the Welsh Government should consult on developing further guidance in respect of partnerships, to cover: the role of all partnership bodies and their relationship to, and involvement in, the work of LSCBs; how partnerships must work together to deliver effective safeguarding of children in their area and clarifying their individual accountability in respect of the broad spectrum of issues relevant to safeguarding children; clarifying the role of LSCBs in holding other partnerships to account in respect of their safeguarding responsibilities; and whether Youth Offending Team Management Boards should be included within any new guidance on partnership working and take into account the responsibilities

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61 Health, Wellbeing and Local Government Committee 29.4.10, oral evidence
62 Health, Wellbeing and Local Government Committee 10.6.10, oral evidence
held by Probation, Prison Service and Police through the Multi Agency Public Protection Arrangements (MAPPA).

Recommendation 10: Children and Young People’s Partnership Guidance should be revised to specifically require CYPPs to establish their safeguarding priorities jointly with LSCBs.

Recommendation 11: We recommend that the Welsh Government should consider amending the Local Safeguarding Children Boards (Wales) Regulations 2006, to strengthen the requirements to include agencies other than those named in the Children Act 2004 in the membership of LSCBs, specifically the Chair of CYPP and potentially the chairs of other partnerships.
6. Information Sharing

**LSCB Role in Promoting Information Sharing**

148. The role of LSCBs include developing procedures to co-ordinate what is done by each representative body for the purposes of safeguarding and promoting the welfare of children within the area of the Board, including procedures in relation to information sharing. Information sharing was agreed to be a critical aspect of safeguarding children as highlighted in the findings of numerous Serious Case Reviews.

149. Within this context, the continuing existence of problems with information sharing was acknowledged. Many agencies stated that frontline staff still lacked clarity about what information could and could not be shared.

150. Reasons given included staff lack of awareness and confidence to share information appropriately; the differing thresholds between agencies for triggering child protection referrals; and also the challenges presented by the different IT systems utilised by different agencies.

151. Health Inspectorate Wales identified a number of areas, “where information sharing is a particular issue for staff and where we feel greater support and training is needed for those on the front line”. 63

152. Some consultees referred to work that LSCBs had undertaken in respect of information sharing. The Wales Probation Trust indicated that information sharing is good in many LSCBs, and that well-established protocols are in place, such as substance misuse services, adult mental health services, and child and adult mental health services.

153. In their written evidence, Wrexham LSCB said that,

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63 Health, Wellbeing and Local Government Committee 10.6.10, written submission from Health Inspectorate Wales
“across Wales a number of information sharing protocols exist for LSCBs…it would be useful to harmonise these into an all Wales approach”.

154. The NSPCC concurred with this view in their oral evidence. The NSPCC also stated that,

“information sharing has been highlighted in reviews of child deaths over a number of years and we have yet to really make a breakthrough on this.”

155. A number of consultees referred to the recommendation made by the Welsh Government LSCB Review Group Report in 2008, which said that the Welsh Government should consult on revised guidance on the information sharing responsibilities and duties of partner agencies. This recommendation was perceived to remain valid in the current context.

156. The Children’s Commissioner advised that there is a need for performance indicators around information sharing with associated inspection mechanisms, stating that legislation does exist but guidance and key performance indicators are needed.

**Deputy Minister’s View**

157. In her oral evidence the Deputy Minister referenced the Wales Accord for the Sharing of Personal Information (WASPI) and outlined that work was being undertaken by the Welsh Government with regard to information sharing. The Deputy Minister indicated that, in her view,

“the protocol would be a good way of moving forward in order that we have national consistency in what we share and do with information”.

**Committee’s View**

158. The Committee feels that information sharing is a critical aspect of safeguarding children, and that improvement is needed in this area.

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64 Health, Wellbeing and Local Government Committee 13.5.10, written submission from NSPCC Cymru/Wales
65 The purpose of the Wales Accord on the Sharing of Personal Information (WASPI) is to provide a framework for service-providing organisations directly concerned with the well being of an individual to share information between them in a lawful and intelligent way.
66 Health, Wellbeing and Local Government Committee 10.6.10, oral evidence
It became clear during the course of the inquiry that there are continuing problems with information sharing between agencies, and the LSCBs’ role in impacting on this issue is limited.

**Recommendation 12:** We recommend that the Welsh Government should implement the recommendation of the LSCB Review Group which stated that the Welsh Government should consult on revised guidance on the information sharing responsibilities and duties of partner agencies, including the potential for use of performance indicators.

**Recommendation 13:** We recommend that LSCBs should work collaboratively to share good practice in relation to information sharing. LSCBs should also share good practice in how such procedures are effectively promoted to front-line staff.
7. Funding

Introduction

159. As detailed in the Background chapter, Welsh Government guidance states that, to function effectively, LSCBs must be supported with adequate and reliable resources and that statutory partners\(^\text{67}\) may make payments towards expenditure incurred by, or for purposes connected with, an LSCB. Statutory partners may also provide staff, goods, services, accommodation or other resources for purposes connected with an LSCB.

Funding arrangements

160. The budget for each LSCB and the contribution made by each member organisation is currently agreed locally. Most witnesses indicated that the current funding arrangements are a major concern and that a swift resolution is needed to the perceived shortcomings in the arrangements.

161. The Chair of Caerphilly LSCB told the Committee that, to operate effectively, LSCBs have to have security of funding:

“The crucial thing is to go back to the legislation, which says 'may' contribute. That goes to the heart of the matter…

“…my request would be…to move us from 'may' contribute to 'will' contribute, or for the Welsh Assembly Government to fund the core element directly…

“We have to be champions of safeguarding arrangements, and to do that we have to ensure that the funding arrangements are secure for the safeguarding boards.”\(^\text{68}\)

162. Wrexham LSCB recommended that:

“An exercise into identifying the real (taking into consideration all aspects including the rising costs of serious case reviews) cost of running an effective LSCB should be commissioned”.\(^\text{69}\)

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\(^{67}\) Or in the case of prisons, either the Secretary of State or the contractor

\(^{68}\) Health, Wellbeing and Local Government Committee 29.4.10, oral evidence

\(^{69}\) Consultation response, HWLG(3)-SCB011 Wrexham Safeguarding Children Board
163. The Welsh Government LSCB Review Group Report recommended that the Welsh Government should consult on a funding model for LSCBs in Wales. The Review Group found that the main costs of LSCBs continue to fall on Social Service Departments. In the light of the available evidence, the Review Group reported that a minimum funding requirement of £100,000 per annum is required for an LSCB.

**Funding Formula**

164. The Committee was told that a great deal of time was spent negotiating the funding input from LSCB member agencies and that there were significant variations in the financial contributions of some national agencies, such as the Police and NHS. A level of frustration was expressed about the time spent on these negotiations. The Chief Executive of NSPCC Cymru stated,

“one of the greatest frustrations that I have around this is that after 25 years of working in child protection and safeguarding...we do not have a formula. When I think of the hours and of all that professional resource spent discussing and debating funding contributions at different LSCBs, it is heartbreaking. The discussion just goes round in circles.”

165. Detective Superintendent Pam Kelly echoed this, saying,

“unless there is a funding formula at a policy or guidance level around contributions, we will be going round in circles, as we have done for about five or six years, on ensuring that the LSCBs have the funding that they need to complete the work that needs to be done.”

166. The witnesses from the WLGA said that funding needs to be addressed and that a clear consensus had been expressed in a local government policy seminar that a funding formula was required. She said,

“there was a clear consensus that a formula basis would be best, and that although some of the agencies, such as the police and the probation service, were non-devolved, Wales being small enough and with our being able to have excellent discussions and partnerships, even where it was not devolved,

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70 Health, Wellbeing and Local Government Committee 13.5.10, oral evidence
71 Health, Wellbeing and Local Government Committee 29.4.10, oral evidence
those agencies would be willing to contribute to a discussion about how we came to a voluntary formula."\textsuperscript{72}

167. The Wales Probation Trust raised the issue of in-kind funding and said that any future funding formula should not only be about financial contributions.

168. The majority of consultees made the case for the Welsh Government issuing a prescribed funding formula in which agencies are compelled to contribute, moving away from the voluntary contributions required under current arrangements. It was acknowledged that there are practical difficulties in the Welsh Government undertaking this role where the powers of some of the LSCB member agencies are non-devolved. The WLGA felt this could be overcome though negotiation with the relevant national agencies. A ring-fenced grant from the Welsh Government was also suggested.

\textit{Deputy Minister’s View}

169. The Welsh Government’s Director of Children’s Health and Social Services informed the Committee that funding issues will be considered by the Wales Safeguarding Forum:

“Several pieces of work, such as the recommendations on the funding model, the funding formula, and the issues around money, are being picked up and are in the work programme of the safeguarding forum.”\textsuperscript{73}

\textit{Committee’s View}

170. The Committee believes that, in order for LSCBs to operate effectively, their funding arrangements need to be secure.

171. The Committee accepts that the creation of a funding formula is the best way to ensure that all partnership agencies make an equitable contribution to the work of the LSCB.

Recommendation 14: We recommend that the Welsh Government should, as a matter of urgency, consult on a national funding formula for LSCBs based on percentage contributions and taking into account the non-devolved nature of some of the LSCB member agencies.

\textsuperscript{72} Health, Wellbeing and Local Government Committee 27.5.10, oral evidence
\textsuperscript{73} Health, Wellbeing and Local Government Committee 10.6.10, oral evidence
agencies and also the issue of in-kind contributions. In order to achieve this, the Welsh Government should consider amending current guidance to specify that agencies ‘will contribute’ rather than ‘may contribute’.
8. Protection of specific groups

Protection of Specific Groups of Vulnerable Children

172. Evidence suggested that the role LSCBs play in protecting specific groups of vulnerable children needs improvement and the effectiveness of the current role varies considerably across Wales. It was suggested that at present, priority groups were selected by reviewing local need and were informed by the analysis of a range of local information. It was stated that LSCBs cannot 'do it all'.

173. Issues raised in evidence included the LSCB’s role in protecting very small numbers of children affected by significant issues such as forced marriage and child trafficking; the LSCB’s role in respect of specific groups of children affected by more prevalent issues such as neglect; and the LSCB’s role with regard to children and young people with disabilities.

174. A wide range of other groups of potentially vulnerable children needing the attention of LSCBs was identified in the evidence, such as children in the youth justice system (including those in custody and those at risk of custody); children of prisoners; privately fostered children; children excluded from school; children of parents with mental health problems; deaf children; and asylum seeker and refugee children.

175. National Deaf Children Society Cymru called for clarification as to whether LSCBs were covered under disability equality duties in the Disability Discrimination Act 2005. They recommended that LSCBs should monitor how public bodies promote equality in the safeguarding arrangements they make for deaf children.

176. The Wales Probation Trust suggested that whilst on paper the issue of addressing the needs of vulnerable children was impressive,

“with protocols in place to cover a large number of specific groups...they tend to be over-wordy, and...not well known to or well understood by many practitioners.”

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24 Health, Wellbeing and Local Government Committee 29.4.10, written submission from Wales Probation Trust
177. Evidence suggested that the progress of LSCBs was patchy with regard to the protection of such vulnerable groups of children and it was suggested that an all Wales approach could support LSCBs in being more effective. Some LSCBs were perceived to have more expertise in dealing with safeguarding issues relating to specific groups of vulnerable children such as asylum seeker or trafficked children, as a result of having a higher number of such children within the authority.

178. Wrexham LSCB suggested that improved effectiveness could be achieved through the introduction of a consultant or beacon LSCB role to support other LSCBs if and when they needed advice on particular issues, for example trafficked children. It was suggested that undertaking an LSCB beacon role would be dependent on additional resources being made available to facilitate the process.

179. It was also suggested by a range of consultees that improved joint working between LSCBs and children and young people’s partnerships could enhance capacity and ensure a strategic response to the safeguarding of specific vulnerable groups. It was also suggested that it was important to ensure that the right representation exists on subgroups of the LSCBs, in the development of protocols to respond to the needs of these groups of vulnerable children.

**Deputy Minister’s View**

180. In relation to ensuring the protection of specific groups of vulnerable children, the Deputy Minister indicated in her oral evidence that she would be looking to the Wales Safeguarding Forum to take this forward.

**Recommendation 15:** We recommend that the Welsh Government should consult with stakeholders regarding the feasibility and benefits of ‘beacon LSCBs’ who would play a lead role in developing the LSCB approach to specific groups of vulnerable children.

**Recommendation 16:** We recommend that the Welsh Government should request that the CSSIW, as part of the new joint inspection arrangements, review the effectiveness of LSCBs in meeting the needs of specific groups of vulnerable children.
Recommendation 17: We recommend that Welsh Government Guidance on partnerships should require LSCBs and CYPPs to have complimentary joint programmes of work in respect of specific vulnerable groups of children.

Recommendation 18: We recommend that the Welsh Government should produce specific guidance for LSCBs on disability.
9. Involving Children and Young People

Participation of children and young people

181. Whilst recognised by the majority of consultees as an integral element of LSCBs’ work, it was recognised that the meaningful participation of children and young people in the work of LSCBs was an area where significant improvement was needed.

182. There has been limited progress to date in this aspect of LSCB work. Whilst references were made to work in Caerphilly and Merthyr Tydfil, it was suggested that progress in some other authorities was inconsistent. Swansea LSCB stated that:

“There appears to be a culture of doing ‘to’ children as opposed to listening to the voice of the child and doing ‘with’ children.”

183. Authorities cited the lack of resources and expertise as a barrier in taking this forward. In authorities where work with children and young people had been undertaken, this was done utilising existing participation mechanisms such as local authority youth fora; groups of looked-after children and young people; or collaborative work with the CYPP Participation Workers.

184. Reference was made to work that had created ‘junior LSCBs’. Children in Wales suggested that LSCB participatory work,

“is very under developed for children involved in the child protection process’ which they suggest ‘requires particular staff skills and proper resources’.

Recommendation 19: We recommend that the Welsh Government should issue guidance which requires LSCBs to meaningfully involve children and young people as relevant in the work of LSCBs.

Recommendation 20: We recommend that the Welsh Government should ensure that LSCBs prioritise working co-operatively with

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25 Consultation response, HWLG(3)-SCB018 Swansea Safeguarding Children Board
26 Health, Wellbeing and Local Government Committee 10.6.10, written submission from Children in Wales
CYPPs and individual LSCB member agencies to maximise the range of existing resources to develop participatory methodologies with children who have experience of the child protection and safeguarding systems, as well as children and young people generally. Good practice should be shared between authorities.
Annex A - Witnesses

The following witnesses provided oral evidence to the Committee on the dates noted below. Transcripts of all oral evidence sessions can be viewed in full at


**Thursday 29 April 2010**

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<thead>
<tr>
<th>Witness</th>
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<tr>
<td>Albert Heaney</td>
<td>Chair of Caerphilly Safeguarding Children Board</td>
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<td>Zarah Newman</td>
<td>Co-ordinator of Caerphilly Safeguarding Children Board</td>
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<tr>
<td>Marie Lebacq</td>
<td>Chief Officer of Wrexham Safeguarding Children Board</td>
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<tr>
<td>Liz Rijnenberg</td>
<td>Interim Director of Local Delivery, Wales Probation Trust</td>
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<td>Detective Superintendent Pam</td>
<td>Representative of Welsh Police Forces</td>
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**Thursday 13 May 2010**

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<tr>
<td>Greta Thomas</td>
<td>Director of NSPCC Cymru/Wales</td>
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<td>Keith Towler</td>
<td>Children’s Commissioner for Wales</td>
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<td>Imelda Richardson</td>
<td>Chief Inspector of CSSIW</td>
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<tr>
<td>Jonathan Corbett</td>
<td>Assistant Chief Inspector of CSSIW - Service Regulation &amp; Inspection</td>
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<tr>
<td>Sue Williams</td>
<td>Head of the Youth Justice Board for Wales</td>
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<tr>
<td>Steve Dobson</td>
<td>Head of Wales Workforce Development and Social Care</td>
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Thursday 27 May 2010

Beverlea Frowen  Director of Social Services and Health Improvement, Welsh Local Government Association

Parry Davies  Joint Policy Lead for Children and Families, Association of Directors for Social Services Cymru

Liz Best  Business Manager, Newport Safeguarding Children Board

Gabrielle Heeney  Business Manager, Conwy and Denbighshire Safeguarding Children Board

Dr Hywel Williams  Designated Doctor

Lin Slater  Designated Nurse

Thursday 12 June 2010

Catriona Williams  Chief Executive of Children in Wales

Christine Walby OBE  Former Chair of Children in Wales

Catrin Williams  Executive Director of Children and Family Court Advisory and Support Service Cymru

Dr Peter Higson  Chief Executive, Healthcare Inspectorate Wales

Mandy Collins  Deputy Chief Executive and Head of Service Review, Healthcare Inspectorate Wales

Gwenda Thomas AM  Deputy Minister for Social Services

Rob Pickford  Director of Social Services Wales

Julie Rogers  Director of Children's Health and Social Services
### Annex B - Written evidence

The following people and organisations provided written evidence to the Committee in support of oral evidence. All written evidence can be viewed in full at [http://www.assemblywales.org/bus-home/bus-committees/bus-committees-scrutiny-committees/bus-committees-third-hwlg-home/business-hwlg-inquiries/hwlg3_lscb/hwlg3-scb-papers.htm](http://www.assemblywales.org/bus-home/bus-committees/bus-committees-scrutiny-committees/bus-committees-third-hwlg-home/business-hwlg-inquiries/hwlg3_lscb/hwlg3-scb-papers.htm)

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<td>Marie Lebacq</td>
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<td>Liz Rijnenberg</td>
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<td>Welsh Local Government Association</td>
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<td>Liz Best</td>
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<td>Gabrielle Heeney</td>
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<td>Catriona Williams</td>
<td>Children in Wales</td>
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<td>Dr Peter Higson</td>
<td>Healthcare Inspectorate Wales</td>
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<td>Mandy Collins</td>
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<td>Gwenda Thomas, Deputy</td>
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<td>Minister for Social Services</td>
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Annex C - Consultation Responses

The following people and organisations provided written evidence to the Committee as part of its public consultation. All consultation responses can be viewed in full at: http://www.assemblywales.org/bus-home/bus-committees/bus-committees-scrutiny-committees/bus-committees-third-hwlg-home/business-hwlg-inquiries/hwlq3_lscb/hwlq3-scb-consultationresponses.htm

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Action for Children  
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ACPO Cymru  
Care and Social Services Inspectorate Wales  
LHBs and Nurse Directors  
The Church in Wales  
Powys Local Safeguarding Children Board