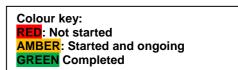


Ref. No.	Resp. Officer	Due Date	Actions	Evidence	Progress
1					
1.1	Maria Selby, CYPS, Helen Sinclair, CYPS, Ali Davies, YJS (EIP)	Feb 22	Review all assessment documents to ensure they support:  1. A robust and balanced analysis of need and risk, including impact and context.  2. Capturing the voice of the child(ren), parents and family.  3. A strengths-based outcomes focused approach.		
1.2	Maria Selby, CYPS Nune Aleksanyan, CYPS	Nov 21	Ensure assessments are shared with children and families in a timely manner		
2				Outcomes	
2.1	Maria Selby, CYPS	Feb 22	Develop an Outcomes focused Practice guide for Children's Services, including YJEIS.		
3			Voice (	of the Child/Fami	ily
3.1	Helen Sinclair, CYPS Supt. Mark Brier, SWP PPPMG, WGSB	Jan 22	Work with Children and Families to consider how their voices are captured and recorded in cases of extra familial harm and develop a more consistent approach to the recording of views within referrals and occurrences		
3.2	Victoria Smith, Helen Sinclair, Gemma Hargest , CYPS	Nov 21	Develop a robust approach to promoting the use of independent advocacy with children and families, so they have a better understanding of its function and the added value the use of advocacy could bring		24/09/21: Meeting was held on the 21/09/21 with the Team Managers with NYAS Advocacy Provider to raise awareness of advocacy
4			Referrals/R	eports/Communi	ication
4.1	Quality Practice Strategic Group, CYPS	Dec 21	Undertake a review of existing policies and procedures to ensure there is a robust process in place for providing a timely response to professionals on the decision of reports/referrals made into the Service.		
4.2	Supt. Mark Brier	Jan 2022	SWP to develop consistent and quality submissions by officers, ensuring mechanisms in place to promote a minimum standard of information required		
4.3	Supt. Mark Brier	Dec 2021	SWP to enhance review process within referral unit, by introducing standing operating procedure aligned with College of Policing Practice		
4.4	Supt. Mark Brier	Jan 2022	SWP to identify training required for staff within referral units, carry out a gap analysis and ensure development evidenced in supervision portfolios		







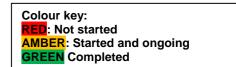


Ref. No.	Resp. Officer	Due Date	Actions	Evidence	Progress
4.5	Lead Nurse School Nursing Service & Looked After Children	October 2021 Complete	SBUHB to ensure adequate resources are in place to support timely communications relating to CLA		Completed All Admin post vacancies have been filled in the LAC Health team
5				Planning	
5.1	Maria Selby, CYPS, CYPS Ali Davies, YJS (EIP)	March 25 <sup>th</sup> 2022	Review all existing plans across Children Services and YJS (EIP) and consider purpose and function (Personal Outcomes, Co-Production, Contingency, Safety, Sharing etc.).		
5.2	Rachel Dixon, CYPS Joint Strategic Training Group, Safeguarding Board	Subject to the completion of 5.1	Work with partners to ensure a shared responsibility is adopted for the implementation and review of Plans		
5.3	Rachel Dixon, CYPS Joint Strategic Training Group, Safeguarding Board	Subject to the completion of 5.1	Develop a more co-ordinated approach with partners, to ensure professionals and children & families do not become overwhelmed in the delivery of multi-agency services		
5.4	QPSG, CYPS Amanda Turner, YJS	Bi-annual	Plan(s) to be evaluated and routinely dip sampled/audited. Standing agenda item bi-annual		
6				Meetings	
6.1	Ali Davies and YJS Management Group, YJS (EIP)	December 2021	YJS to review the number of meetings, briefings and action plans in place		14/09/21: The plans commented on were the annual Youth Justice Plan, the Gap Analysis and the Inspectorate Action Plan, (post disaggregation). The Post Inspection Action Plan can now be signed off and focus on the GAP Analysis Action Plan
6.2	Ali Davies, YJEIS	Completed October 2021	Request to the YJEIS Management Board to review the frequency and duration of the Board meetings from bimonthly to quarterly		Responses will be collated 14/10/21, consensus received from the group for meetings to move to quarterly, to be ratified by Chair of the Board
6.3	WGSB	Jan 2022	Escalation of professional differences protocol to be reviewed with consideration of the informal challenge/pathway to be revised		
6.4	CYPS Team Managers, Quality Practice Strategic Group, CYPS Police	annually	<ul> <li>Ensure the quality of Strategy Meetings:</li> <li>Minutes is more specific to the concerns and agreed actions are clearly identified recorded. Standing audit item</li> <li>Used more consistently to shape and adapt children's plans and improve the co-production of these with young people</li> <li>- Ensure appropriate membership</li> </ul>		
6.5	Lead Nurse School Nursing Service & Looked After Children/ Nurse Director Primary, Community & Therapy Service Group	Complete Oct 2021	Importance of attendance at Safeguarding meetings and the need to complete reports prior to Case Conference and share with families is included and will be reiterated in Safeguarding Training		Completed All School Nurses have returned from redeployment and have be reallocated their caseloads and made aware of their Safeguarding responsibilities







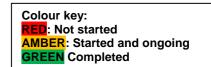


Ref. No.	Resp. Officer	Due Date	Actions	Evidence	Progress
6.6	Lead Nurse School Nursing & Looked After Children/ Head of Nursing PCT Services Group	Complete Oct 2021	To ensure all Case Conferences are attended if staff were to be redeployed again, a team of SCPHN nurses would need to remain in the service to ensure the HB were able to fulfil attending all statutory Safeguarding meetings. SOP will formalise this.		Completed The School Nursing Service SOP has been updated to reflect the formal agreement that sufficient SCOHN nurses would remain in the service to cover all case conferences should another deployment happen.
6.7	Ali Davies and YJS ( EIP) Management Group, YJS	Feb 2022	To review all YJEIS meetings, frequency, structure, ToR's, and ensure that meetings held are consistent and covering the correct agenda items and how meetings fit in existing pathways across the directorate and partnership		YJS (EIP) now only have risk review meetings and on high risk cases and any other case identified where it would be beneficial to do so
6.8	Deanne Martin, Probation	19/11/21	Conference invites and minutes are not always received timely by Probation Practitioners – Review the processes for invite and minute sharing between Children's Services and Probation		
7			Response to harm outs	side the family h	
7.1	Chris Frey-Davies, CYPS Sam Jones, Education Safeguarding Rhian Lovell, Deputy PDU Head	Mar 22	Increase awareness of Contextual Safeguarding across the Partnership (CSP, Probation, YJS (EIP) Children and Adult Services, Health, Education).		December 21 presentation to be given to CSP Presentation to be agenda'd with VAWDASV Presentation to YJS (EIP) January 22 Briefing to all Swansea/NPT probation practitioners during staff development day Dec 21
7.2	Rachel Dixon, Training Joint Training Strategic Group, Safeguarding Board	Feb 22	Investment in relevant (joint) staff training (intra/extra) across the partnership.		
7.3	Chris Frey-Davies, CYPS YJS (EIP) Police Probation Barnardos/Better Futures	Nov 21	Develop a consistent and a shared framework for understanding of risk outside the family home:  1. Evaluate toolkit and thresholding document to support decision-makers to respond effectively and consistently to harm outside of the family home		Toolkit shared with Swansea CMET for consideration and adoption as a regional toolkit
		Mar 22	<ol> <li>Develop a multi-agency protocol for CCE cases with multi-agency partners</li> <li>Agenda at Policy, Practice and Procedure Management Group.</li> <li>SWP to Participate at strategic and tactical</li> </ol>		CFD part of county lines research advisory group (3 x docs) to develop national guidance  3 – complete – Safeguarding board has escalated the need for a consistent response to EFH with WG and All Wales Chairs
7.4	Chris Frey-Davies, CYPS	Oct 21  Dec 21	level in any subsequent working groups Revise existing MISPER pathway to ensure Return Home Interviews are fully utilised.		Guidance developed for foster carers, guidance being drafted for practitioners and parents
7.5	Chris Frey-Davies, CYPS	Subject to completion of 8.3	Further develop, refine and clarify existing pathways for responding to harm outside the family home.		
7.6	West Glamorgan Safeguarding Board Policy Group	Mar 22	Develop a practice guide on the use of language and labelling across the partnership.		









Ref. No.	Resp. Officer	Due Date	Actions	Evidence	Progress
7.7	Supt. Mark Brier, SWP Probation	Completed	Review and develop current use of disruption tactics and perpetrator profiles. SWP to ensure distinct disruption strategy is recorded and maintained in all cases to support Safeguarding and Investigative strategies		Completed - Home Office Toolkit in use, Joint Intelligence Programme (JIP) embedded in NPT and Swansea. The JIP, alongside other structures/processes such as MAPPA and IOM, supports Probation, SWP and Prisons to work jointly with a focus on disrupting organised crime through intelligence gathering, information sharing and multi agency working across the partnership.
7.8	Ian Rees, CYPS PPPG, WGSB	Feb 22	Continue to support Gypsy, Roma and Traveller communities through the GRT Forum. This work should be extended to other marginalised groups across the LA (BAME, LGBTQIA+) Equalities and Diversity (ED) to be a standing agenda item for all local and partnership meetings i.e. PPPMG, Corporate Safeguarding, etc		
7.9	Nune Aleksanyan CYPS	Feb 22	Further strengthen the front door MA arrangements (CAMHS, Probation etc).		
7.10	Chris Frey-Davies, CYPS	Dec 21	Ensure children placed by other authorities across the LA are protected.		Policy for responding to concerns stemming from independent care homes is currently in draft and will be presented to All Wales Safeguarding Leads in Nov 21.  Responding to independent care homes escalated to the board and CIW and will be further escalated to All Wales Chairs
7.11	Sam Jones, Education Safeguarding	31/10/21	<ul> <li>In order to address concerns that schools do not always share important information when a vulnerable pupil transfers:</li> <li>Education Leisure and Lifelong Learning Directorate have a policy for the retention and transfer of records.</li> <li>Policy to be reviewed and then recirculated with a reminder of the importance of transferring records to ensure continuity for children.</li> <li>Transfer of records can be added to DSP training</li> </ul>		Discussed at Safeguarding Education Group on 6 <sup>th</sup> October 2021 about the need to transfer records between schools
7.12	Ali Davies, YJS ( EIP) Amanda Turner, YJS	Nov 26 <sup>th</sup> 2021	Embed expertise about exploitation and the contextual safeguarding concept in to practice and ensure there is full understanding across professional groups – To Embed the Community Risk Profiling Meetings and Triangulation Meetings into YJEIS practice		14/09/21: These meetings have begun, progress will be monitored
7.13	Ali Davies, YJEIS Amanda Turner, YJS	30/09/21 Completed	Community Risk Profiling Meetings must include all relevant agencies, membership and remit of the group to be reviewed		Reviewed and confirm the relevant agencies are included.
7.14	Deanne Martin, Probation	27/10/21	Probation Practitioners need greater awareness of NRM and referral routes via First Responders - Further First Responders Training identified for nominated Probation Staff on 27/10/21		Training scheduled for 27/10/21
7.15	Deanne Martin, Probation	13/12/21	Probation Practitioners need greater awareness of NRM and referral routes via First Responders – Probation Practitioner Briefing		







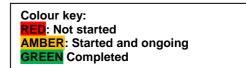


Ref. No.	Resp. Officer	Due Date	Actions	Evidence	Progress
7.16	Supt. Mark Brier	Mar 2022	SWP to have identifiable resource to own disruption strategies to CCE		
7.17	Interim Assistant Director of Nursing (Corporate)/Head of Nursing (Safeguarding)	March 2022	Prompt access to Safeguarding training will be balanced against the current challenges with staffing, and in line with the COVID recovery plans, the Health Board will work towards prioritising staff access and study time to complete this training. A paper presenting proposals to achieve Level 2 Safeguarding training compliance across all staff will be prepared for discussion and agreement at the Management Board. This will consider potential actions, responsibilities and timescales for achievement and mechanisms to monitor progress.		
7.18	Corporate Safeguarding Team, SBUHB	Dec 2021	Level 3 Exploitation Training Study Day to be reintroduced		In Progress Level 3 Exploitation training days arranged across the HB from November 2021. Flyer circulated to all HB staff and training advertised on Intranet. Bulletin to be circulated to staff to highlight the recommencement of this training
7.19	Head of Nursing Safeguarding	Sept 2021	All Wales Safeguarding Best Practice Supervision Guidance to be circulated to all relevant staff groups		Completed All Wales Safeguarding Best Practice Supervision Guidance circulated September 2021
7.20	Head of Nursing Safeguarding/Extended Safeguarding Team/Service Group Leads	Sept 2021	Assurance to be sought from Extended Safeguarding Team/ Service Group Leads that staff are accessing Safeguarding Supervision as per Wales Safeguarding Best Practice Supervision Guidance		Completed Assurance received from lead managers School Nursing, LAC Health, Health Visiting, Emergency Department (ED) and Minor Injuries Unit (MIU) that staff have access to and engage in regular Safeguarding Supervision
7.21	Corporate Safeguarding Team/Extended Safeguarding Team	March 2022	Safeguarding Supervision training to be arranged for SBUHB staff in Corporate and Extended Safeguarding Team		In Progress National Safeguarding Team (NST) contacted to request Safeguarding Supervision training. NST advised they no longer facilitate this training NST forwarded Safeguarding Supervision Training package Meeting held October 7th with Heads of Safeguarding in Cwm Taf Morgannwg UHB and Cardiff & Vale UHB to develop Safeguarding Supervision Training day
7.22	Corporate Safeguarding Team/ Lead Nurse ISH	Dec 21	Safeguarding Supervision dates to be arranged for Integrated Sexual Health (ISH) staff and Safeguarding Supervision promoted in ISH mandatory Study Day 08.10.21		In Progress
7.23	Corporate Safeguarding Team/Extended Safeguarding Team	May 2022	Annual Audit of Safeguarding Supervision to continue and findings reported to Safeguarding Committee		In Progress Annual Safeguarding Supervision Audit completed in 2021 and reported to Safeguarding Committee 14th August 2021 Annual Safeguarding Audit to be completed in 2022 and reported to Safeguarding Committee









8	Multi-Agency Public Protection Arrangements (MAPPA)				
Ref. No.	Resp. Officer	Due Date	Actions	Evidence	Progress
8.1	SMB	Dec 21	Clarifying the MAPPA role and how the process is used in cases of Criminal Exploitation. To be taken to SMB in November to consider:  • All partners are familiar with process • Suitability of referrals and thresholds • MAPPA awareness briefing to partners		
9				Services	
9.1	Ali Davies, YJEIS Amanda Turner, YJS (EIP)	Oct 21	Some early intervention services had waiting lists due to reduced face-to-face activity during the pandemic, this to be monitored and reduction in early intervention waiting lists to be evidenced		
9.2	SBUHB Assistant Director of Strategy & Partnerships	Dec 21	The (Child & Adolescent Mental Health Service) CAMHS is provided by Cwm Taf Morgannwg (CTM) UHB, as part of a Service Level Agreement. The assessment process and audit of non-attendance will be placed on the agenda for the SBUHB / CTMUHB CAMHS Commissioning Meeting on 27th October to agree this audit being carried out by end of December 2021.		In Progress SBUHB and CTMUHB have a regular monitoring processes in place regarding a range of performance factors, including non-attendance for appointments. This information shows that non-attendance has reduced over the past year, thought to be linked to use of a mixture of face-to-face and online modalities for appointments. Further discussion with CTM UHB to be held in October.
9.3	Lead Nurse Sexual Health	Dec 21	All Sexual Health staff to have timely access to Safeguarding alerts (including Child Protection Registration information)		In Progress All Sexual Health Staff have access to Patient Administration System (PAS) which contain Safeguarding alerts Lead Nurse Sexual Health to ensure all staff have awareness of access to PAS Safeguarding Alerts on PAS included in staff annual mandatory Study Day 8.10.21
10			Improve initial respo	nse to missing o	, , ,
10.1	DI Bartholomew, Strategic Public Protection Department (SPDD)	Mar 2022	Further training to be delivered – Including specific reference to College of Police guidance on Frequent or Planned Absences.		
10.2	Supt. Mark Brier, SWP	Mar 2022	Monitoring and compliance – Supervisory review of all PPNs and OELS to ensure robust initial assessment and additional specialist review to ensure risks appreciated with clear escalation process in the event they are not.		
10.3	DI Bartholomew, Strategic Public Protection Department (SPDD)	Mar 2022	NAIRA Team to be trained on Contextual Safeguarding and research process enhanced and agreed to include review of personal dossiers and nominal research reports		



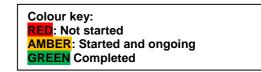




**Probation Service** 

### JICPA Joint Action Plan

14<sup>th</sup> October 2021 version 1



This action plan has been agreed across the partnership following receipt of the final JICPA report dated 19<sup>th</sup> September 2021. Whilst agreed in principle by the partnership the action plan will be subject to individual organisational governance structures/scrutiny oversight and therefore will be updated accordingly. This plan will be subject to partnership review through the Quality Practice Management Group of the Safeguarding Board on a quarterly basis. The plan will also be the subject to additional scrutiny through other partnership meetings for example, YJS (EIP) Management Board, NPT Corporate Safeguarding, Health Safeguarding Scrutiny Committee, SMB, etc.