

Health and Adult Social Care Scrutiny Board

**Thursday 30 March, 2017 at 3.00 pm
in Committee Room 1 at the Sandwell Council House, Oldbury**

Agenda

(Open to Public and Press)

1. Apologies for absence.
2. Members to declare:-
 - (a) any interest in matters to be discussed at the meeting;
 - (b) the existence and nature of any political Party Whip on any matter to be considered at the meeting.
3. Minutes of the meeting held on 16 February, 2017.
4. Findings of Vice-Chair's Work Stream on Female Genital Mutilation.
5. Updates from the Chair and Vice-Chairs.

J Britton
Chief Executive
Sandwell Council House
Freeth Street
Oldbury
West Midlands

Distribution:

Councillor Y Davies (Chair);
Councillor Jarvis (Vice-Chair);
Councillor Lloyd (Vice Chair);
Councillors Downing, Edis, Hevican, Millard, S Jones, Shaeen and White.

**Agenda prepared by Scrutiny Unit
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Agenda Item 1

Health and Adult Social Care Scrutiny Board

Apologies for Absence

To receive any apologies for absence received from the members of the Board.

Agenda Item 2

Health and Adult Social Care Scrutiny Board

Declaration of Interests

Members to declare:-

- (a) any interest in matters to be discussed at the meeting;
- (b) the existence and nature of any political Party Whip on any matter to be considered at the meeting.

Minutes of the Health and Adult Social Care Scrutiny Board

**16th February, 2017 at 3.00pm
at the Sandwell Council House, Oldbury**

Present: Councillor Y Davies (Chair).
Councillors Jarvis and Lloyd (Vice-Chairs);
Councillors Downing, Edis, Hevican, S Jones,
Millard, Shaeen and White.

In Attendance: Bill Hodgetts (Sandwell Healthwatch).

1/17 **Minutes**

Resolved that the minutes of the meeting held on 8th December, 2016 be approved as a correct record.

2/17 **Sandwell Safeguarding Adults Board Annual Report 2015/2016**

Sandwell's Safeguarding Adults Board's Chair and Business Manager presented the Board's annual report for 2015/2016.

Established under the Care Act 2014, the Board's role was to oversee the quality of the safeguarding activities carried out by the Council and partner agencies. The work of the Board was managed by three sub-groups – Protection, Quality and Excellence and Prevention.

Members received a summary of the Board's achievements and progress against its priorities for 2015/2016. From the presentation and questions by members the following points were highlighted:-

- Throughout 2015/16 there was an increase in safeguarding "concerns" but an overall reduction in the number that progressed to "enquiry" stage, which demonstrated that information and training was having a positive impact in terms of challenging reports to ascertain whether there was in fact a safeguarding issue or an issue that could be resolved through better care management.

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- The number of acts of neglect and omissions, which included medicines mismanagement, had reduced following the delivery of training.
- Methods for seeking service user feedback on the quality of the safeguarding journey had been improved by involving service users throughout their journey.
- “Concerns” and “enquiries” were dealt with at the pace of the customer so not all were completed before the end of a reporting period.
- Intelligence was now being gathered on four additional categories of abuse - domestic abuse, sexual exploitation, modern slavery and self-neglect.
- The Sandwell Hub, funded by Public Health, had been re-launched in May 2015, which led to an increase of 40% in referrals in the following 12 month period.
- Level 1 Safeguarding Training had been delivered to all staff, governing body members and GP practices (100 GP sites and 170 CCG staff).
- The Board had adopted the now widely used ‘See Something, Do Something’ campaign, and developed a short film to accompany the campaign.
- The Board was launching a website at the end of March 2017, following a recommendation from scrutiny in 2015/2016.
- West Midlands Ambulance Service continued to refer a high number of safeguarding “concerns” however only a low percentage of these progressed to “enquiries”. Work was therefore being done across the region to develop ambulance crews’ understanding of adult safeguarding and what constituted a “concern”.
- The Operations Manager, via an in-house tracker database, ensured that Adult Social Care monitored repeat incidents as well as trends. This data was used to ensure that the safeguarding team worked robustly with the quality team and commissioning teams to ensure that there was a co-ordinated approach.
- An updated “concern” form had been launched in July 2016 which reflected all appropriate risks assessments, rationale for decision making and the location of abuse.
- One Serious Case Review had been completed with an action plan, which was currently awaiting publication.
- Multiple categories of abuse could often be identified within the same “enquiry” and were reflected in the figures.

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- The highest type of abuse during 2015/2016 was physical abuse with ‘other-known to individual’ being the source of risk, which was the same in 2014/2015. This reflected the circumstances of individuals living in shared accommodation or residential settings.
- Sandwell recorded all types of “concern” and “enquiry”, giving a more accurate picture of real events. Not all authorities recorded in this way, which was why Sandwell’s figures appeared higher in comparison.
- Provider related issues were managed via the Council’s Escalation Panel and through the commissioning body.
- It was difficult to collect data on the prevalence of informal care arrangements, however, the Board worked closely with Trading Standards on publicity on spotting the signs of financial abuse.

In response to a question by the Scrutiny Board Chair, the Chair of the Safeguarding Adults Boards reported that he felt that the performance of the Board had improved significantly in recent years and he was satisfied that there was strong leadership in place to drive the Board’s work.

Members requested that future annual reports show the number of victims as well as the number of concerns/enquiries. It was also felt that the annual report could have been submitted to the Scrutiny Board earlier.

The Board welcomed the report and noted the following key priorities for 2016/2017:-

- Develop a service user engagement plan in partnership with Healthwatch.
- Facilitate a campaign with Sandwell Safeguarding Children’s Board and Domestic Abuse Safety Partnership building on the Think Family model.
- Work with partners to develop a self-assessment audit tool to enable the Board to review and consider the quality of its practice.
- Ensure Making Safeguarding Personal is imbedded in practice.
- Review the Safeguarding Adults Review process and ensure all agencies refer cases appropriately.
- Review Position of Trust policies and procedures with partners.

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Resolved:-

- (1) that the Sandwell Safeguarding Adults Board Business Manager be requested to include the number of victims as well as the number of “concerns”/”incidents” in future reports;
- (2) that the Sandwell Safeguarding Adults Board’s Business Manager be requested to submit the Board’s annual report for 2016/2017 to Scrutiny by December 2017.

3/17 **Updates from the Chair and Vice-Chairs**

The Board noted progress on the work streams being led by the two Vice-Chairs.

The Chair reported that, at the meeting of the Budget and Corporate Scrutiny Board held on 15th February 2017, she had raised concerns about the ending of the Community Offer initiative, which she would be discussing with the Director - Adult Social Care, Health and Wellbeing.

(Meeting ended at 4.17pm)

Contact Officer: Stephnie Hancock Democratic Services Unit 0121 569 3189
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Health and Adult Social Care Scrutiny Board

30 March, 2017

Findings of Vice Chair's Work Stream on Female Genital Mutilation

1. Summary

- 1.1 During the development of its 2016/2017 work programme the Health and Adult Social Care Scrutiny Board decided to look at female genital mutilation. Increased media attention of the issue in recent years prompted scrutiny to look into the matter to:-
- Identify the scale of the problem in Sandwell.
 - Ascertain what is being undertaken by the Council and partners to address the issue.
 - Identify whether, and where, any improvements can be made to any work already being done.
- 1.2 Councillor Ann Jarvis, Vice-Chair of the Board took the lead on this work stream.
- 1.3 It became clear early on that there is already a lot of work taking place to tackle female genital mutilation, as detailed below in this report. As much of this work is in its infancy the review focussed on seeking assurances in relation to the effectiveness of the existing work and allowing it to embed. It is therefore recommended that overview and scrutiny consider an update report on progress with the work undertaken by partners in relation to female genital mutilation in 2017/2018.

2. Recommendations

The Board is invited to consider the draft recommendations as set out in Appendix 1.

Interim Director – Resources
Darren Carter

Contact Officer
Stephnie Hancock
Scrutiny Officer
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3. Strategic Resource Implications

Any implications arising from the recommendations set out in this report will be explored by the relevant directors and will be the subject of a future report to Cabinet, should the recommendations be agreed.

4. Legal and Statutory Implications

- 4.1 Female genital mutilation is illegal in the UK and is a form of child abuse. The Female Genital Mutilation Act 2003 made it a criminal offence to perform the procedure. The Serious Crime Act 2015 has also strengthened legislation on female genital mutilation and added measures to protect girls and women from undergoing the procedure.
- 4.2 There is Multi-Agency Statutory Guidance on female genital mutilation (2016).

5. Implications for the Council's Scorecard Priorities

The recommendations arising from this work support the Council's Scorecard Priority of Great People.

6. Background Details

6.1 West Midlands Regional Task Force

- 6.1.1 In June 2015 West Midlands Police and Crime Panel published a report into tackling female genital mutilation in West Midlands. The Panel found much that is going on that is positive across the region but different areas and organisations were at different places in the journey – some just setting out, with others having long established multi-agency working. The report and its nine recommendations can be viewed here <http://westmidlandspcp.co.uk/wp-content/uploads/2015/06/WMPCP-Tackling-FGM-in-the-West-Midlands.pdf>.
- 6.1.2 The report found that community engagement is critical to tackling female genital mutilation and highlights the crucial role that councils, health organisations and schools need to play.
- 6.1.3 A West Midlands Regional Task Force was established to take forward the report's recommendations.

6.2 “Sandwell Stopping FGM Group”

6.2.1 Previously in Sandwell female genital mutilation was discussed in the Domestic Abuse Strategic Partnership, which is a Priority Group under the Safer Sandwell Partnership (Sandwell’s Local Police and Crime Board). However, in response to the increased media attention of the issue, the Domestic Abuse Strategic Partnership determined that a separate sub-group was required and so the “Sandwell Stopping FGM Sub-Group” was established in October 2015.

6.2.2 The Group’s terms of reference and 2017-2018 action plan are aligned to the work and priorities of the West Midlands Regional Task Force and are attached as an appendix (Appendix 2). The Group is chaired by a representative from Sandwell and West Birmingham Clinical Commissioning Group, who is also a member of West Midlands Police’s Regional Task Force. The Vice-Chair is an officer of the Council. Representatives from the following organisations/areas also sit on the group:-

Black Country Women’s Aid
Domestic Abuse Services (Sandwell MBC)
Homes & Communities (Sandwell MBC)
Home Office
West Midlands Police
Schools
Sandwell & West Birmingham Hospitals Trust
Maternity Services
School Nursing
Sexual Health
Health Visiting
Sandwell Children’s Social Care
Rights Equality Sandwell
Voluntary and Community Sector

6.2.3 The Group recognises that it is still in its infancy; however it is making excellent progress and has received widespread praise for its contribution towards the Task Force’s objectives. Some of the key achievements to date are:-

- [Sandwell Policy and Procedures to address Female Genital Mutilation](#) were developed by members of the SSFGM group, which cover both adults and children. The procedures provide professionals, practitioners and anyone working with adults, children and young people with an understanding of female genital

mutilation and what action they should take to safeguard girls and women who they believe may be at risk or have already undergone female genital mutilation. The procedures were launched at the annual Safeguarding Children Board Conference (July 2016) by the chair of the SSFGM. Conference delegates (150 multi-agency professionals from across Sandwell) also heard directly from a survivor of female genital mutilation as she bravely recounted her very personal experience of this form of abuse.

- Rights Equality Sandwell recruited and trained 10 community champions, in partnership with Birmingham Women's Aid to support community engagement work.
- Through the Domestic Abuse Strategic Partnership an Artemis e-learning module has been developed which is available for all council staff, members, and partners.
- Letters have been sent annually to all Sandwell schools before the risk period of summer holidays to assist in awareness raising.
- The Group is liaising with Birmingham City Council around adopting an educational package to raise awareness of female genital mutilation in primary schools. This has been benchmarked by OFSTED as best practice and is currently being rolled out to all schools in Birmingham.
- The Multi Agency Safeguarding Hub (MASH) database has been amended to capture female genital mutilation as an indicator.
- Updates to Children's Services MASH live database have been made to enable the collection of data on Female Genital Mutilation.
- An information pack was distributed to all Sandwell GP practices in July 2016, which included professional and legal responsibilities as well as signposting victims for support.
- Questions relating to female genital mutilation have been added to the audits required under Section 175 of the Education Act 2002, which requires the governing bodies of maintained schools and further education institutions to make arrangements to ensure that their functions are carried out with a view to safeguarding and promoting the welfare of children. This will ensure accountability by agencies, their executives and boards and has resulted in an increased awareness and understanding within social care and schools.
- Questions relating to female genital mutilation have been added to the audit process required under Section 11 of the Children Act 2004, which places duties on a range of organisations and individuals to ensure their functions, and any services that they contract out to others, are discharged having regard to the need to safeguard and promote the welfare of children audits. This will ensure accountability by agencies, their executives and boards and

- has resulted in a raised awareness and understanding within social care and schools.
- Sandwell's Domestic Abuse Strategic Partnership board has worked with Sandwell Children's and Adult's Safeguarding Boards to coordinate all domestic abuse related training to ensure that gaps in training are identified and addressed and training is easily accessible via one training plan. Female genital mutilation training in Sandwell incorporates best practice as defined by the regional task force to ensure the following core elements are included: the law surrounding female genital mutilation, spotting the signs, relevant communities/ethnicities affected, types of female genital mutilation, avoidance of stigmatisation, risk assessment and post risk assessment follow up, roles and responsibilities of staff whilst focussing on safeguarding children and vulnerable adults, understand referral pathways. All partners are encouraged to access multi agency training provided by the Domestic Abuse Strategic Partnership and Safeguarding Boards including the domestic violence and abuse and female genital mutilation e-learning package developed by the Council. Guidance has also been issued to Sandwell social care and schools.
 - The Council has provided six monthly update reports to the West Midlands Police and Crime Panel inquiry into tackling female genital mutilation.

6.3 Prevalence

- 6.3.1 Data collection is widely recognised as a major challenge in tackling female genital mutilation on a local, regional and national basis. It is generally considered that girls born to mothers who have been cut are the children most at risk. Risk and prevalence varies across regions, reflecting the location of practicing communities.
- 6.3.2 Due to Sandwell straddling Birmingham under the auspices of Sandwell and West Birmingham Clinical Commissioning Group, it has proven difficult to extract Sandwell specific health data in relation to the prevalence of female genital mutilation. Mapping of the problem has therefore to date been based upon the location in Sandwell of the communities known to practice.
- 6.3.3 Efforts are therefore currently focussed in the town of Smethwick and in particular the ward of Soho and Victoria, where there is a high proportion of residents from practicing communities. In 2014 the Council assessed and mapped data from the school census identifying over 260 girls from practicing countries in Sandwell (Appendix 3).

6.3.4 In late 2016 the Safer Sandwell Partnership Police and Crime Board commissioned the partnership analyst from West Midlands Police to develop a problem profile for Sandwell. The analyst is currently working with members of the Sandwell Stopping FGM group to collate data from the following sources:-

Midwifery Services
Research Sandwell
Children's Social Care
Sandwell Women's Aid
Health and Social Care Information Centre
Community Health Services
Education
Public Health
Police
Black Country Women's Aid

6.3.5 The problem profile is expected to be completed in April 2017.

6.4 Health Implications

6.4.1 There are a number of significant short-term and long-term health implications for victims for FGM:-

- Severe pain.
- Excessive bleeding.
- Shock.
- Genital tissue swelling.
- Infections.
- Human immunodeficiency virus (HIV).
- Urination problems.
- Impaired wound healing.
- Death.
- Psychological consequences.
- Chronic Infections of the genitals, reproductive tract and urinary tract.
- Painful urination.
- Menstrual problems.
- Keloid scarring.
- Female sexual health problems.
- Obstetric complications.
- Obstetric fistula.
- Perinatal risks.

6.4.2 The Department of Health has issued guidelines for health professionals in dealing with female genital mutilation.

6.4.3 Currently Sandwell and West Birmingham Clinical Commissioning Group does not commission any services to support victims. A monthly ante-natal clinic for vulnerable women is held at Birmingham City Hospital, where women who have undergone female genital mutilation are referred. It is important to note this is not a service specially commissioned for this. It has not been possible to secure a meeting with the consultant who runs this clinic to ascertain further information and desktop research has also been unsuccessful. It is estimated however that around 20 women who have undergone female genital mutilation attend the clinic each month. The Sandwell Stopping FGM Group has requested data directly from Sandwell and West Birmingham Hospitals NHS Trust in relation to attendance at this clinic. Further work needs to be undertaken to source and cleanse the data in order to understand the number of Sandwell residents who attend the clinic.

6.5 Community Approach

6.5.1 The West Midlands Police and Crime Panel's report found that community engagement is critical to tackling female genital mutilation and highlighted the crucial role that councils, health organisations and schools need to play.

6.5.2 The Service Level Agreement that the Council holds with Rights Equality Sandwell has been amended to include female genital mutilation focussed work, which will include the following:-

- consulting with community groups to identify best approaches in targeting specific groups within communities; mothers, girls, males and faith leaders;
- developing of an understanding of whether different approaches are needed;
- promoting awareness of it through community events in partnership with other agencies and community groups;

6.5.3 As well as raising community awareness overall and working with girls and women, work with boys and men is a key factor in tackling female genital mutilation from a community engagement standpoint, however there are limited resources with which to undertake such work.

6.5.4.10 community champions have been recruited and trained in partnership with Birmingham and Solihull Women's Aid to support community engagement work. However, further development work is needed equip

these volunteers with sufficient knowledge and skills to undertake the community engagement required. External funding is being sought to deliver some of this work in partnership with Ileys Community Association, the Somali Women's Association and Brushstrokes.

- 6.5.5 The West Midlands Police and Crime Panel's report identified that councillors can play a vital role in tackling female genital mutilation by giving a high profile to policy interventions as decision makers; making FGM a priority for action across the partnership, engaging with local people in their communities as ward councillors and as scrutineers investigating the work that the Council and partners are doing and suggesting improvements.
- 6.5.6 Through the Domestic Abuse Strategic Partnership an Artemis e-learning module has been developed for all staff and members. All elected members in Sandwell are encouraged to complete all modules. Data shows that to date only five elected members have completed the Artemis module on Domestic Violence and Abuse, which covers Female Genital Mutilation.
- 6.5.7 The Sandwell Stopping FGM Group is working with a local women's community group to raise awareness of the issue within Sandwell. Saturday morning women's health sessions which include awareness on female genital mutilation are being arranged and a community led event which will include awareness raising has been planned for Saturday 8th July 2017.
- 6.5.8 Discussions to deliver holistic education sessions regarding female health including female genital mutilation to young people in Sandwell schools are currently underway. These sessions will be delivered on a collaborative basis with voluntary sector agencies, community groups and community sessions.

Useful Information

- Sandwell Council's Domestic Abuse Website has further information on FGM. You can access the FGM page via this [link](#)
- The Local Government Association (LGA) has produced useful guidance for councillors on FGM, which includes information on how councils can contribute to addressing FGM. This document can be accessed via the link below: http://www.local.gov.uk/documents/10180/5854661/L14-567+FGM+guidance+for+councillors_09.pdf/7196465e-4b63-4b58-b527-a462f5b5cc9d

Recommendations

1. that the work of the Domestic Abuse Strategic Partnership's Sandwell Stopping Female Genital Mutilation Group be endorsed, along with the Group's 2017/2018 Action Plan;
2. that the Cabinet Member for Public Health and Protection be requested identify funding to support the delivery of the Stopping FGM Group's 2017/2018 Action Plan and associated work to enhance the long term sustainability of community interventions to tackle female genital mutilation in Sandwell, including:-
 - raising community awareness
 - engagement work with boys and men
 - engagement and support work with girls and women
 - the production and circulation of appropriate awareness raising materials
 - developing and supporting community champions
 - the holding of an event to launch the Joint Policy of the Adult Safeguarding Board, Children's Safeguarding Board, Health and Wellbeing Board, Safer Sandwell Partnership and Domestic Abuse Strategic Partnership on tackling female genital mutilation
3. that Sandwell and West Birmingham Clinical Commissioning Group be asked to consider commissioning health specific services including psychological support for victims of Female Genital Mutilation;
4. that all elected members be encouraged to undertake the Artemis training module on Domestic Violence and Abuse, which covers female genital mutilation;
5. that awareness raising materials in relation to tackling female genital mutilation be circulated across the partnership and to include libraries and community centres in Sandwell;
6. that consideration be given to a rewards package to recognise the to the contribution of the community champions in supporting the work to tackle female genital mutilation in Sandwell;

Sandwell Stopping Female Genital Mutilation (FGM) Group

Terms of Reference

Vision

Sandwell Stopping Female Genital Mutilation (FGM) subgroup will provide leadership, oversight, support and challenge to prevent the practice of FGM in Sandwell.

The FGM group will aim to achieve this by:

- **Prevention**
Raised awareness and prevention work on FGM with agencies professionals, community groups, faith groups and education/youth services.
- **Protection**
Supporting agencies to improve the identification and protection of females at risk of FGM and those who have undergone FGM.
- **Engaging the Community**
Ensure pro-active community empowerment work is undertaken with communities and engage with community organisations to identify and train community champions to raise awareness of FGM and associated support services within communities

Role

The Sandwell Stopping FGM group will:

- Increase our local understanding of the scope, nature and profile of FGM as it affects Sandwell residents and communities.
- Develop a multi-agency action FGM policy for Sandwell which provides guidance for frontline professionals, community groups, faith groups and education/youth services.
- To undertake actions to address identified issues in partnership with health services, communities, schools and other agencies.
- To raise awareness amongst agencies and communities affected of FGM and its impact on victims, families and communities.
- To influence the provision of FGM training and develop protocols/policies within Sandwell.
- To engage with regional FGM Task Group and apply its guidance, recommendations and procedures.
- To engage with community organisations to identify and train community champions to raise awareness of FGM and associated support services within communities.

Structure, Membership & Accountability

Sandwell Female Genital Mutilation reports principally and directly to the SANDWELL Domestic Abuse Strategic Partnership (DASP) but will provide updates to the Sandwell Safeguarding Children's Board.

Membership of the strategic group includes representation from the following:

Sandwell MBC
Sandwell and West Birmingham Hospitals Trust
Sandwell and West Birmingham CCG (Chair)
Sandwell Women's Aid
Birmingham Solihull Women's Aid
West Midlands Police
Rights Equality Sandwell
Public Health Sandwell
Education
Voluntary & Community Sector Organisations
UK Visa and Immigration

Meetings

Regularity of Meetings

The group will meet as regularly as necessary to carry out its function. Routinely this will be bi-monthly.

Papers/reports/agenda

Papers will be circulated in advance of the meeting and items can only be tabled at the meeting with explicit permission of the Chair and then only in exceptional circumstances.

Special meetings

A meeting can be convened outside of the scheduled meetings, with the permission of the Chair.

Conflicts of interest

All members of the group or sub-groups must declare any conflict of interest where necessary.

Action/decision between meetings

Appropriate actions between meetings can be taken in consultation with the Chair of the group on urgent matters regarding the delivery of the programme. Such actions shall be reported to the next meeting of the group.

Review of Terms of Reference

The Sandwell Female Genital Mutilation Group will review its terms of reference as appropriate and in response to changing circumstance.

Sandwell Stopping Female Genital Mutilation (SSFGM) Action Plan 2017-2018

RAG Rating Key

RED	Action/output has not started. Action is not going to reach proposed timescale.
AMBER	Work has started on action and is ongoing and is due to meet proposed timescale.
GREEN	Action has been implemented; action has met its deadline and is ongoing or action has been completed.

FEMALE GENITAL MUTILATION

Ref	FGM Regional Task Force Recommendation	Sandwell Objective	Action Taken	Owner	Timescale	Update/RAG Rating
1.1	To ensure consistency in dealing with female genital mutilation and implement relevant procedures developed by the West Midlands FGM Task Force - such as clear and consistent common FGM risk assessment.	To ensure the regional FGM taskforce's remit and themes are applied in Sandwell.	Adopt best practice around data collection, policies, training and engaging and supporting communities to end FGM.	Imran Varachhia / Marie Kelly	Ongoing	Amber
		Consider regional FGM procedures developed by Safeguarding Boards for implementation in Sandwell	Regional procedures circulated electronically for comment to SSFGM members and following feedback make recommendations to DASP.	Imran Varachhia / Marie Kelly	September 2017	Amber
1.1a			FGM policy to be developed for Sandwell & West Birmingham CCG for use	Marie Kelly	April 2017	Amber

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		<p>within primary care to ensure a consistent patient focused approach is applied.</p> <p>To ensure consistency across member practices when recording FGM cases by providing read codes to enable effect reporting.</p> <p>New patient registration form to be rolled out to all Sandwell GP practices to ask new patients about FGM at initial consultation and record within patient records.</p> <p>All partners to develop their own internal policies and procedures in relation to FGM, which will include FGM risk assessment tool.</p> <p>Distribute a letter/resource pack to all GP practices in Sandwell requesting GP's to be particularly vigilant in identifying potential indicators of FGM as the summer holidays are a heightened risk period for girls being</p>	<p>Marie Kelly</p> <p>Marie Kelly</p> <p>SSFGM</p> <p>Marie Kelly</p>	<p>Sept 2017</p> <p>June 2017</p> <p>Oct 2017</p> <p>June 2017</p>	<p>Amber</p> <p>Amber</p> <p>Not Started</p> <p>Amber</p>
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			taken abroad for FGM.			
1.2	The West Midlands FGM Task Force brings together key leads in strategic and operational roles from partnership agencies such as Councils, schools and health organisations (including NHS Trusts) to ensure FGM is recognised as a priority and to drive forward a consistent approach to tackling FGM.	Strengthen the FGM group membership to ensure key representation from Local Authority, Children's Social Care, Schools, Health, Police, local authority, Voluntary and Community Sector	Membership revised to include relevant agencies: from Sexual Health Services, Black Country Partnership and Health Visiting Service. Explore whether sexual health staff enquire regarding FGM during consultations (cervical, STI screening and contraceptive consultations) Gaining consent to share information with GPs.	Marie Kelly/ SMBC Domestic Abuse Services Coordinator - Imran Varachhia Marie Kelly	May 2017 May 2017	Amber Amber
Ref	FGM Regional Task Force Recommendation	Sandwell Objective	Action Taken	Owner	Timescale	RAG Rating
2.1	Build understanding and data on prevalence of FGM	Explore the issue of FGM in Sandwell and provide an evidence-based estimate of FGM prevalence	FGM problem profile commissioned through SSP. Work undertaken by partnership analyst using multi-agency data	Imran Varachhia	April 2017	Green
2.1b		Explore ethnicity data	Liaise with commissioning	Marie Kelly	April 2017	Amber

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		for asylum seekers residing in Stone Road/Attwood House from FGM practising countries	manager from SWBCCG who holds contract for service			
2.1c		To ensure MASH Database captures FGM as an indicator	FGM indicator added to CSC system	Melanie Barnett/Imran	April 2017	Green
2.2	Work with West Midlands Police, local authorities, health organisations and third sector to ensure pro-active community empowerment work is undertaken with communities from practicing countries including appropriate men and women's groups.	Consult with community groups to identify best approaches in targeting specific groups within communities; mothers, girls, males and faith leaders.	RES/Community champions have had ongoing consultation/engagement with community groups (Ileys, Brushstrokes, Yemeni and Somali Women's group etc) to utilise knowledge and experience around FGM to build community links.	Rights & Equality Officer, Sandwell MBC – Parmjit Panesar	July 2017	Amber
		Develop an understanding of different approaches which are needed to engage with community organisations. Capacity-build members to become community champions and raise awareness of FGM and associated support services.	RES in conjunction with community champions and other voluntary sector organisations to scope and identify appropriate community/faith leaders to consult and engage with communities who practice FGM.	Rights & Equality Officer, Sandwell MBC – Parmjit Panesar	July 2016	Red

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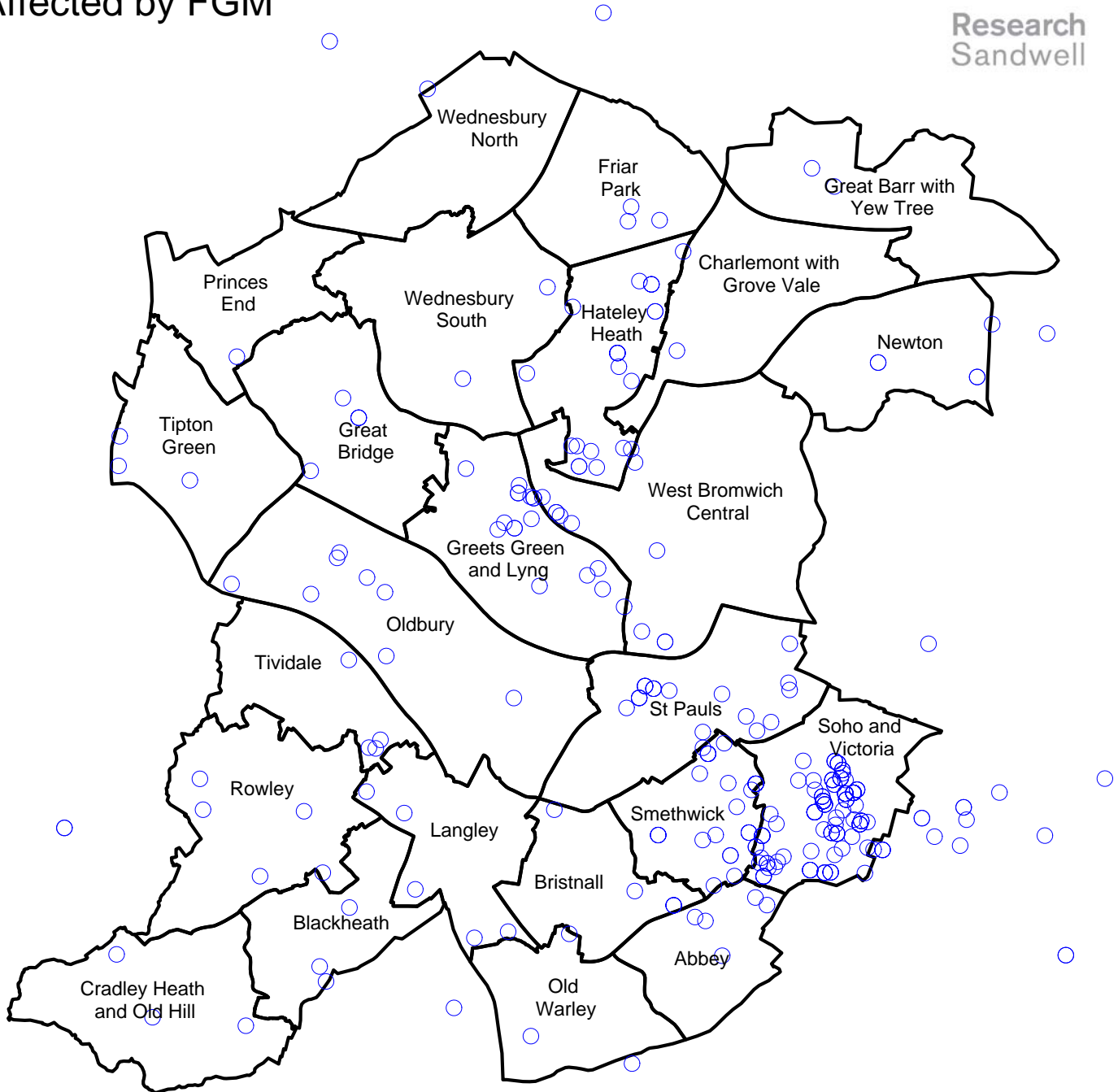
2.3	Coordinate training of FGM across partner agencies in Sandwell	<p>To develop an FGM training strategy for Sandwell to ensure FGM training is available to frontline staff so that they are able to recognise the signs/risks of FGM and understand referral pathways.</p> <p>Consideration to review existing training – for future delivery following evaluation of S175 and S11 audits.</p>	<p>SSFGM to work with DASP/SSCB/ASB Learning & Development Sub Groups to ensure appropriate FGM training is included in available training catalogues.</p> <p>SSFGM to work with DASP/SSCB/ASB Learning & Development Sub Groups to review training evaluations periodically and update accordingly.</p>	<p>SSFGM</p> <p>SSFGM</p>	<p>September 2017</p> <p>April 2018</p>	<p>Amber</p> <p>Amber</p>
2.4	Recognise the crucial role that schools, nurseries and colleges can play in engaging with parents and encourage these establishments to play an active role in educating, preventing and referring.	<p>Raise awareness within schools, nurseries and colleges to play an active role in educating, preventing and referring FGM.</p>	<p>Meeting to be arranged for DSL's in Sandwell to adopt OFSTED approved FGM lesson plan and toolkit developed by Hazel Pulley, Chair of FGM Task Force and headteacher at Parkfield's Primary School. Currently being rolled out across Birmingham Local Authority. Initial pilot to be undertaken within Smethwick Primary Schools with a view to future roll out to all Primary Schools</p>	<p>Marie Kelly /Mel Gee/Ella Saville-Boss</p> <p>Imran Varachhia</p>	<p>April 2017</p> <p>June 2017</p>	<p>Amber</p> <p>Amber</p>

[ILO: UNCLASSIFIED]

		<p>in Sandwell.</p> <p>Distribute a letter/resource pack to headteachers in all Sandwell Schools asking all teachers to be particularly vigilant in identifying potential indicators of FGM as summer holidays are a heightened risk period for girls being taken abroad for FGM. Schools have a vital role to play in identifying potential victims and supporting those who have become victims have a vital role to play in identifying potential victims and supporting those who have become victims.</p> <p>Work with IRISE international to arrange delivery of sessions with 'pilot' session delivery commencing in May 2017 in Smethwick with formal delivery starting in September 2017. Offer to form part of the 'Project 12' offer to all Secondary schools in Sandwell.</p>	Imran Varachhia	September 2017	Amber
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Female Pupils Attending Sandwell Schools with Languages Associated with Countries Affected by FGM



Female Pupils Attending Sandwell Schools and Resident in Sandwell with Languages Associated with Countries Affected by FGM

Ward	Count	Ward	Count
Soho and Victoria	112	Great Bridge	4
Smethwick	23	Newton	4
Hateley Heath	21	Tipton Green	3
St Pauls	19	Blackheath	3
Greets Green and Lyng	17	Cradley Heath and Old Hill	3
West Bromwich Central	10	Friar Park	3
Oldbury	8	Old Warley	2
Abbey	5	Wednesbury South	2
Langley	5	Great Barr with Yew Tree	2
Rowley	5	Princes End	1
Bristnall	4	Charlemont with Grove Vale	1
Tividale	4	Wednesbury North	0
Within the Borough	261		

Source: Sandwell School Census Jan 2014

Key

- Pupil Residential Location
- Sandwell Ward

Research Sandwell, Improvement and Efficiency, Sandwell MBC

Data Source: Sandwell School Census - Jan 2014, Children & Young Peoples Services, Data Intelligence Unit

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Agenda Item 5

Health and Adult Social Care Scrutiny Board

30 March 2017

Updates from Chair and Vice-Chairs

The Board will receive updates from the Chair and the two Vice-Chairs on the work they have undertaken and meetings attended outside of the Board.