

HARINGEY CHILDREN'S TRUST

PROTOCOL AND TERMS OF REFERENCE

1. INTRODUCTION

- 1.1 This protocol sets out the terms of reference, priorities, membership and operational arrangements for the Haringey Children's Trust (HCT).
- 1.2 While the protocol is not intended to be legally binding, the partner agencies have all individually agreed the protocol and the establishment of the HCT.
- 1.3 The HCT is a statutory partnership with a shared commitment to improving the outcomes for children and young people in Haringey.

2. GOVERNANCE ARRANGEMENTS

- 2.1 The HCT has been established in recognition of the duties imposed on the partner agencies by the Children Act 2004 and the "Every Child Matters" (ECM) framework in order to secure the integrated delivery of children's services by the partner agencies. Section 10 of the Act creates a specific duty to co-operate in making arrangements to improve the well-being of children in the Borough.
- 2.2 The aim of the HCT is to provide strategic leadership for all Haringey's children's services covering all aspects of partnership working and the delivery of frontline services. The HCT is set up to co-ordinate and ensure the effectiveness of children's services and to improve outcomes for all children and young people.
- 2.3 The HCT is not a separate organisation or legal entity in its own right. Each partner agency represented on the HCT retains its own legal responsibilities and its own existing lines of accountability for service delivery. But each partner is committed to working cooperatively to improve the lives of children and young people in Haringey.
- 2.4 The HCT Board will be the main decision-maker for the HCT and comprise representatives of all the partner agencies.
- 2.5 The HCT Board will be responsible for the strategic planning of services for children and young people, the delivery of commissioning arrangements across the partnership and directing the agenda and forward planning for the HCT. This is provided for in section 7 below. The HCT Board will also establish a Partnership Group who will act in an advisory capacity and participate in the planning and review of the delivery of services to best meet need. This is provided for in section 8 below.

2.6 The HCT Board will also establish Delivery Groups to facilitate multi-agency delivery of the outcomes in the Children's and Young People's Plan (CYPP) in a framework to be agreed by the HCT Board. This is provided for in section 9 below.

2.7 The HCT has adopted the Nolan Committee's seven principles of public life. All representatives and partner agencies will have regard to these principles in the work of the HCT. These principles are:

- (1) Selflessness
- (2) Integrity
- (3) Objectivity
- (4) Accountability
- (5) Openness
- (6) Honesty
- (7) Leadership

3. VISION

3.1 HCT is committed to delivering high quality, joined up and inclusive services for children and young people, enabling them to have the opportunity to achieve their potential so that they become confident adults. The vision of HCT is that:

Haringey is a place where children and young people thrive and achieve.

4. TERMS OF REFERENCE

4.1 The terms of reference of the HCT Board are as follows:

- (i) to be responsible for the strategic planning of services for children and young people;
- (ii) to be responsible for the delivery of commissioning arrangement across the partnership;
- (iii) to direct the agenda and forward planning for the HCT;
- (iv) to develop and publish a child and family-centred outcome led vision for all children and young people in a Children and Young People's Plan which incorporates all partners' strategies related to children and young people;
- (v) to manage and monitor the implementation of the Children and Young People's Plan;
- (vi) to liaise with the Partnership Group, Delivery Groups, Local Safeguarding Children Board, the Health and Wellbeing Board and the Community Safety Partnership;

- (vii) to improve outcomes for children and young people in Haringey, looking particularly at reducing the gap between those who experience the best and poorest outcomes and the impact of disadvantage experienced by many children and their families in Haringey.
- (ii) to put in place robust arrangements for inter-agency governance and performance measurement of all the outcomes for children and young people;
- (iii) to develop integrated strategy, joint planning and commissioning and pooled and aligned budgets to deliver the Children and Young People's Plan;
- (iv) to deliver child safeguarding services through integrated processes, and effective multi-agency working underpinned by shared language and shared processes;
- (v) to develop and promote integrated frontline delivery of services organised around the needs of the child, young person or family rather than professional or institutional boundaries; and
- (vi) to secure and promote the voice of children, young people and families.

4.2 These terms of reference are subject to review by the HCT Board after 12 months from the agreement of this protocol.

5. MEMBERSHIP OF THE HCT BOARD

5.1 The membership of the HCT Board comprises the following partner agencies;

- (i) The London Borough of Haringey¹
 - Lead member for Children's Services / Chair of Trust
 - Leader of the Council
 - Director of Children's Services
 - Director of Public Health
 - Deputy Director, Early Intervention & Prevention
 - Assistant Director for Safeguarding
 - Assistant Director for School Improvement
- (ii) The Metropolitan Police (Haringey Borough Commander)
- (iii) The Haringey Clinical Commissioning Group
 - Head of Children's Commissioning
 - Lead GP
- (iv) The Probation Service
- (v) Schools and Colleges
 - Head Teacher, Special Schools
 - Head Teacher, Primary Schools

¹ There is a proposal for a Senior Leadership Review in Haringey Council and as consequence membership at Deputy and Assistant Director level may change.

- Head Teacher, Secondary Schools
 - Principal, College of Haringey, Enfield and North East London
- (vi) The Youth Offending Service
- (vii) The Mental Health Trust
- (viii) Community Health Services
- (ix) The Voluntary Sector
- (x) The Local Safeguarding Children Board (LSCB)(Ex-Officio). The Independent Chair of the LSCB.

5.2 The Chair of the HCT Board will be the Cabinet Member for Children and Young People's Services.

5.3 The HCT Board will elect a Deputy Chair to undertake all the functions of the Chair in the event that the Chair is absent or unable to perform them for any reason.

6. MEETINGS OF THE HCT BOARD

6.1 Meetings of the HCT Board will take place on 6 occasions in the year in accordance with a calendar agreed annually in advance. The Chair may agree to summon additional meetings if necessary or may cancel meetings depending on the volume of business.

6.2 Quorum. HCT Board meeting will have a quorum if [3] accredited representatives are present including at least one of each of the following:

- (i) the Chair or Deputy Chair of the HCT
- (ii) an officer of Haringey Council, and
- (ii) a representative of at least one partner agency.

6.3 Representatives of non-partner agencies or other specialists who are not members of the HCT may be invited by the Chair to attend meetings for specific items or purposes.

6.4 Advance consultation with partners on all significant decisions or proposals is expected. Draft reports or papers should be circulated to other partners for comment 7 days before presentation to the Board.

6.5 The agenda and all written reports/papers for each meeting will be forwarded to the Chair for clearing at least 7 clear working days before the meeting.

6.6 With permission of the Chair in cases of genuine urgency, a report or paper may be considered by the HCT Board if it is impracticable to comply with paragraphs 6.4 and 6.5 above.

6.7 All representatives on the HCT Board will declare any personal interest they may have in any agenda item or other matter under discussion at the start of the meeting. This would include any case where there was a real possibility of personal gain for a representative or the representative's family or close friends. It would not include interests of a strategic or general professional kind or the publicly known/accessible interests of a partner agency. Unless the representative decides to leave voluntarily, the Chair will determine

whether the representative must leave the meeting for that item. The test is whether an informed and objective observer would reasonably regard the personal interest as so significant that it would be likely to prejudice the representative's judgement of the public interest.

- 6.8 Whenever possible decisions of the HCT Board will be reached by consensus. If necessary, and in the discretion of the Chair, a disputed decision will be put to the vote by those representatives present. In the event of a tied vote the Chair will have a casting vote.
- 6.9 A full minute must be kept to record all decisions or actions agreed by the HCT Board and the reasons for them.
- 6.10 The Chair has the right to determine all questions relating to the procedure and conduct of meetings.
- 6.11 The public and media have no right to attend meetings but, in the discretion of the Chair, they may be allowed to attend part or all of a meeting. There is a presumption that meetings will be open to the public unless it would not be in the public interest to permit this.
- 6.12 When required by the sensitive nature of the matter under discussion, the Chair will indicate that oral or written information must be treated as confidential by all representatives at the meeting. Confidential information shall only be released to those persons within a partner agency having a genuine need to know and must not be released into the public domain.
- 6.13 It is the responsibility of each representative on the HCT Board to be clear about the scope of the decision-making powers delegated to them by their partner agency and to make this known when relevant at meetings of the HCT Board.
- 6.14 When decisions of the HCT Board require a further formal decision, or ratification, by a partner agency to become legally effective, it will be the responsibility of the relevant representative to ensure that the matter is duly referred on to the formal decision-making body of the partner agency and to report the outcome to the HCT Board.

7. The Partnership Group

- 7.1 The Partnership Group will act in advisory capacity and participate in the planning and review of the delivery of services to best meet need.
- 7.2 The Partnership Group will to act as a sounding board when developing /reviewing services and policies affecting children and young people.
- 7.3 The membership of the Partnership Group will comprise the following:
 - (i) members of the HCT Board; and
 - (ii) such stakeholders as will be determined by the HCT Board.

7.4 The Partnership Group will be subject to the rules of procedure for the HCT Board as set out in paragraphs 6.4 to 6.14 above except that meetings of the Partnership Group will not generally be open to the public or media.

7.6 The Partnership Group would meet twice annually. These meetings will take the place of the HCT Board meetings and vice versa.

8. The Delivery Groups

8.1 The Delivery Groups will facilitate multi-agency delivery of the outcomes in the Children's and Young People's Plan (CYPP) in a framework to be agreed by the HCT Board.

8.2 The Delivery Groups will be chaired by a member of the HCT Board and lead on involving children, young people and their families in developing delivery plans for each outcome. They will report to the HCT on a regular basis.

9. FINANCE

9.1 The HCT will influence the way in which funding available to partner agencies is used to improve outcomes for children and young people and their families.

9.2 The HCT will make plans for the integration and alignment of budgets including, where appropriate, the use of prescribed arrangements under section 75 of the National Health Service Act 2006 for the procurement of staff, goods and services.

10. SPECIFIC UNDERTAKINGS BY PARTNER AGENCIES

10.1 Partner agencies commit themselves to meet the obligations set out below to the best of their ability and in the manner most appropriate for each agency:

- (i) Taking responsibility for developing, publishing and monitoring the Children and Young People's Plan (CYPP);
- (ii) Ensuring that the "duty to co-operate" is understood and acted upon within each partner agency;
- (iii) Ensuring that the needs assessment that informs the CYPP is regularly reviewed with particular attention paid to those children in need of protection;
- (iv) Ensuring that all assessments of need for children and their families include evidence from all the professionals involved in their lives and must include direct contact with the child;
- (v) Representing their agencies and bringing experience and knowledge about other sectors and organisations subject to the primary duty to act in the interest of children and young people;
- (vi) Ensuring that all staff within their agency who have contact with children are aware of their safeguarding responsibilities and are supported to carry out any designated role with regard to partnership work including integrated working, CAF, area based projects and sharing information;
- (vii) Ensuring that actions to support the HCT are firmly embedded within their agency and that for all staff who work with children there are

adequate skills, training and professional development in understanding child development and recognising potential signs of abuse and neglect;

- (viii) Ensuring that there is multi-agency training in place to create a shared language and understanding of local referral procedures, assessment, information sharing and decision-making across all services who work to protect children;
- (ix) Ensuring that their agency makes an appropriate contribution to the resourcing of the delivery of the CYPP;
- (x) Ensuring that partners consistently apply the Information Sharing Guidance for Practitioners 2008;
- (xi) Ensuring that appropriate consultation takes place with parents and other stakeholders on the work of the HCT;
- (xii) Ensuring that reports, policies, procedures and decisions of the HCT are disseminated effectively within their agencies;
- (xiii) Contributing to the development of robust and effective monitoring and performance arrangements;
- (xiv) Committing to attend a minimum number of meetings and to nominate a named deputy, who has sufficient seniority to discharge the role, to attend the balance of the meetings in the year;
- (xv) Actively supporting the work of the HCT in undertaking any necessary research or additional work;

11. REVIEW

- 11.1 This Partnership Protocol, including the membership of the HCT, will be subject to annual review by the HCT Board.

Next review due: September 2014