

# BDSCB Annual Report 2015/16



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# Message from the Independent Chair

I am pleased to present to you the Barking & Dagenham Safeguarding Children Board Annual Report for 2015-16. The report is a retrospective look at the work of the BDSCB.

The BDSCB is responsible for coordinating local agencies in safeguarding children and has a responsibility for closely scrutinising the safeguarding work undertaken with children in Barking & Dagenham in order to identify areas for improvement. The report outlines the progress that has been made in relation to the objectives that we set for ourselves in 2015-16; highlights key achievements and challenges that the Board has faced and it also sets the scene for the work that we will do during 2016-17.

There have been changes in personnel, locally within Health, Police and the Council and significant changes in the delivery of Probation services nationally and locally. Continued budget pressures for all agencies have challenged partners' priorities and it is the Board's task to ensure that safeguarding remains a priority locally. The aim to 'deliver more for less' and make best use of contributions from partner agencies continues to be a challenge. As a Board we recognise that keeping children safe requires a culture, across all agencies, where staff are open to challenge and new ideas.

I am a member of the London Group of Local Children's Safeguarding Board Chairs. As a group of chairs we are disappointed that the Metropolitan Police continues to choose to fund partnership safeguarding in London 45% less than all the other large urban Metropolitan Police Forces in England. Safeguarding is a complicated and demanding partnership arrangement that needs appropriate resourcing if it is to be effective. If LSCB's are to be able to carry out their statutory duties they need proper support.

The guidelines we adhere to (Working Together 2015) makes it clear that funding arrangements for safeguarding should not fall disproportionately and unfairly on one or more partners. In London this burden does fall unfairly upon Local Authorities because the Metropolitan Police does not provide rational or reasonable levels of funding to LSCB's.

The safeguarding structures are due to change soon and when they do there will still be a need to resource whatever arrangements are put in place. The Police are a key partner in the future arrangements for safeguarding and we ask that the Metropolitan Police and the Mayor's Office for Police & Crime increase their funding to a level which is fair to the other partners and which will assist in keeping London's children safe.

We re-looked at how the agenda for the Board was structured and introduced a 'themed' session at each Board, where we were able to focus on specific areas of safeguarding work. The areas that we have considered during the themed sessions have been: Finance & Business Planning; Child Death Overview Panel; Faith and Culture; Young People's Takeover Day; and the Voice of the Child.

In December 2015, the Government asked Alan Wood to undertake a review of LSCBs, SCRs and CDOPs. The review was submitted in March 2016 and the Government responded in May 2016 accepting the recommendations of the review. I will be working with partners to embed the changes once they are agreed through Parliament in 2017.

I am privileged to work with partners who share my commitment in ensuring that children and young people are safer as a result of our collective actions and are open and willing to analyse their performance to ensure it improves outcomes for children and young people.

To conclude, I would like to thank members of the Board, and all the frontline practitioners and managers for their commitment, hard work and effort in keeping children and young people safe in Barking & Dagenham.



Sarah Baker, LSCB Independent Chair

# WHAT IS THE BDSCB?

The BDSCB is the key statutory body overseeing multi-agency child safeguarding arrangements across the London Borough of Barking & Dagenham

Governed by the statutory guidance in Working Together to Safeguard Children 2015 and the Local Safeguarding Children Board (LSCB) Regulations 2006, the BDSCB comprises senior leaders from a range of different organisations.

The Board has two basic objectives set out in the Children Act 2004:

- \*to co-ordinate the safeguarding work of agencies and
- \*to ensure that this work is effective.

The Independent Chair

The Independent Chair of the BDSCB is Sarah Baker who is supported by a Board Manager. The Chair is tasked with ensuring the Board fulfils its statutory objectives and functions. Key to this is a culture of transparency, challenge and

improvement across all partners with regards to their safeguarding arrangements.

The Chair is accountable to the Chief Executive of the London Borough of Barking & Dagenham and the Director of Children's Services.

Whilst unable to direct organisations, the BDSCB does have the power to influence and hold agencies to account for their role in safeguarding the welfare of children and young people.

## PARTNER AGENCIES

All partner agencies across Barking & Dagenham are committed to ensuring the effective operation of BDSCB. This is supported by a signed Compact by each

partner agency that set out their agreement to the fundamental principles of the BDSCB. Members of the Board hold a strategic role within their organisations and are able to speak with authority, commit to matters of policy and hold their organisation to account.

## RELATIONSHIP WITH OTHER BOARDS

There is a clear expectation that LSCBs are influential in the strategic arrangements that impact upon and improve performance in the care and protection of children. There is also a clear expectation that this is achieved

through robust arrangements with key strategic bodies across the partnership. During 2015/16, engagement continued with the Children’s Trust Board, Safeguarding Adults Board (SAB), the Health and Wellbeing Board and Community Safety Partnership.

## BOARD MEMBERSHIP & ATTENDANCE

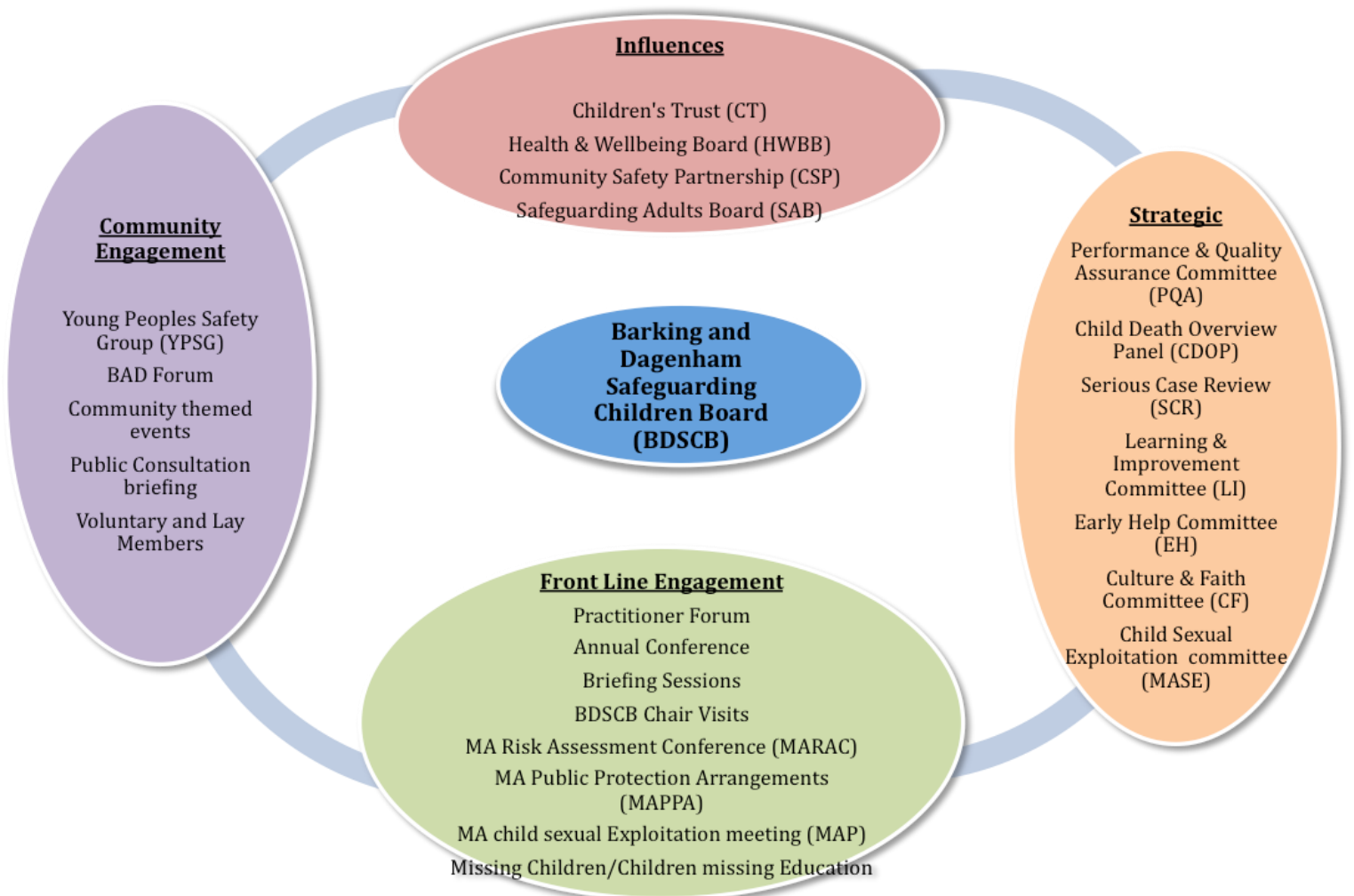
The Board met six times, during the 2015/16 and had a membership made up of representatives from all statutory partners and others concerned with safeguarding children. The attendance rates by agency for 2015/16 to the full Board meetings are set out below:

### Membership

Name	No of seats	% of attendance
Independent Chair	1	100
LBBB Chief Executive	1	17
Lead Member	1	83
Children’s Services	6	100
Adult Services	1	100

Name	No of seats	% of attendance
Housing	1	33
Legal	1	50
Public Health	1	83
NHS England	1	0
CCG	4	83
BHRUT	1	100
NELFT	1	83
Primary schools	2	50
Secondary schools	2	50
Further Education	1	67
Police	2	100
Probation - CRC	1	100
Probation NPS	1	33
Voluntary Sector	1	50
Faith Sector	1	50
CAFCASS	1	33
Fire Service	1	33
LAS	1	100

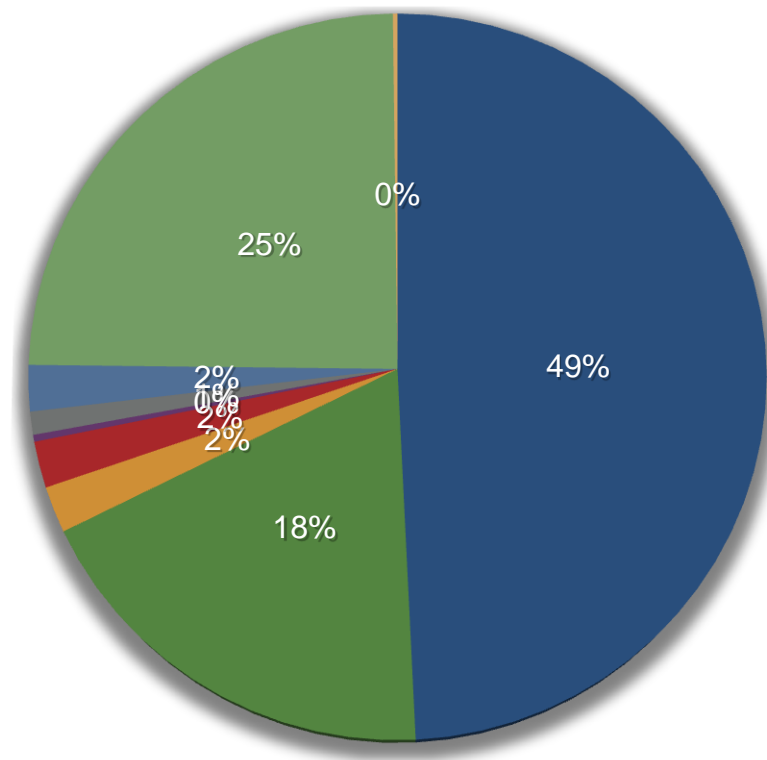
# Structure



# Financial Arrangements

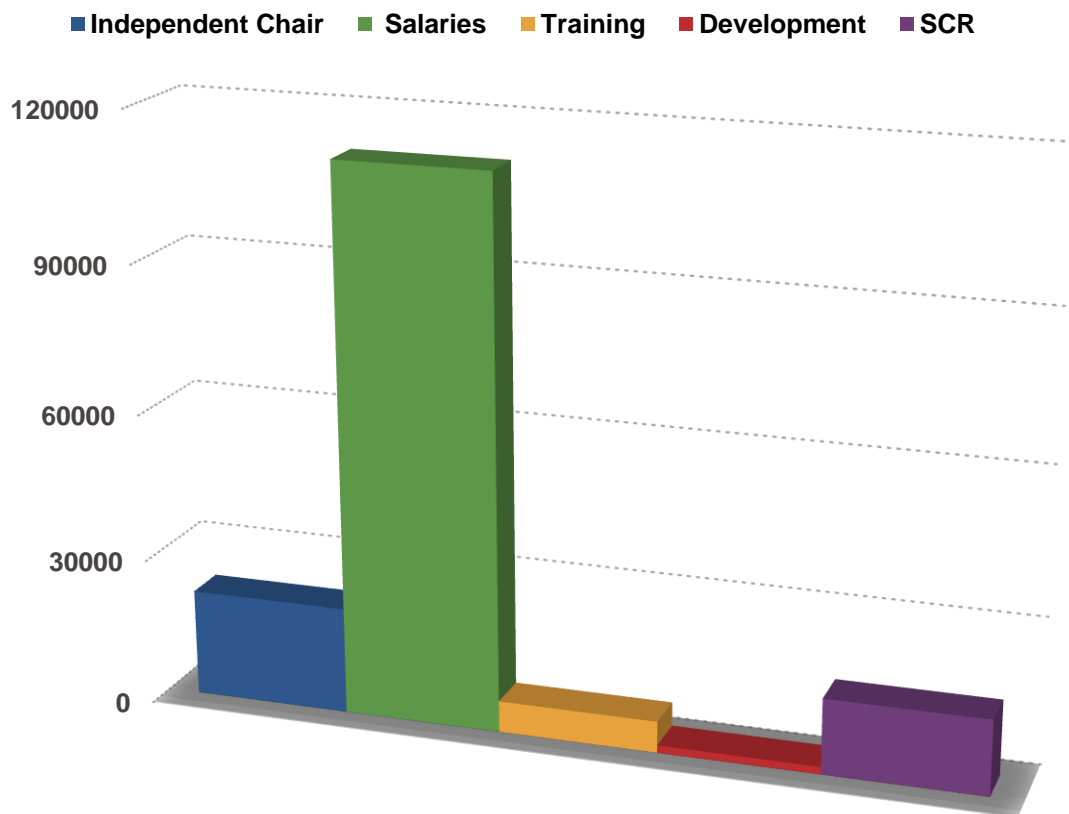
Partner agencies continued to contribute to the BDSCB's budget for 2015/16. Contributions totaled £206,737, with Barking & Dagenham Council contributing 49% of the total agency funding in addition to staff time and venues for meetings. Charges for non attendance at training events provided an additional income of £5,500.

- LBBDD
- CCG
- BHRUT
- NELFT
- CAFCASS
- Probation/CRC
- Met Police
- Schools Forum
- Fire Brigade





There was increased expenditure of £15,460 arising from Serious Case Review costs. An under spend of £44,770 was carried forward from the previous financial year making the total income available to the Board of £251,507. This income ensured that the overall cost of running the BDSCB was met.





# What our Lay Member says

“

As the Lay Member role within the Board continues to embed and develop, I have enjoyed my role and felt a deeper understanding of its expectations. I have continued to work with vulnerable groups within the Borough, promoting the work of the Board. I have delivered a powerpoint presentation plus a CSE video resource to 30 parent carers on CSE, and the Prevent agenda and on the work of the LSCB.

I have also presented to the parent carer group information on FGM and facilitated a discussion about this difficult topic. It was good to be part of such an open debate and promotion of safeguarding children and young people from harmful practices.

I had the pleasure of attending the Borough's 50th Anniversary Event and took the opportunity to network on behalf of the BDSCB, handing out information to local people. Many of the local people I met had not realised an LSCB existed and knew little of its work. Providing information was a great way to promote the BDSCB's work into the community.

I have set up a link for Young Carers with the new Youth Zone and some of those young carers have been involved in the branding process and have taken pivotal roles in steering this fantastic resource for young people. In addition I worked with colleagues to set up training for Young Carer's staff, CSE and Prevent training was delivered by the Metropolitan Police. As a result of this training the 'Young Carers of B&D' added the link to CEOP to their website providing access to safe and secure information.

Young Carers also benefitted from 'Sexting & Cyber Bullying' training and information on 'Project Violet'. I have also raised awareness on the important subject of Private Fostering with staff working with vulnerable families and the process for reporting.

It was good to see some of our young people being in charge of an LSCB meeting and contributing to the formation of the agenda and taking on lead roles in the meeting itself. Everyone was reminded about ensuring we capture the views of young people about keeping safe.

I have been able to ask questions and add my thoughts to a Serious Case Review and take forward some of the learning.

I look forward to the coming year with the increasing challenges and my continuation as BDSCB Lay Member.



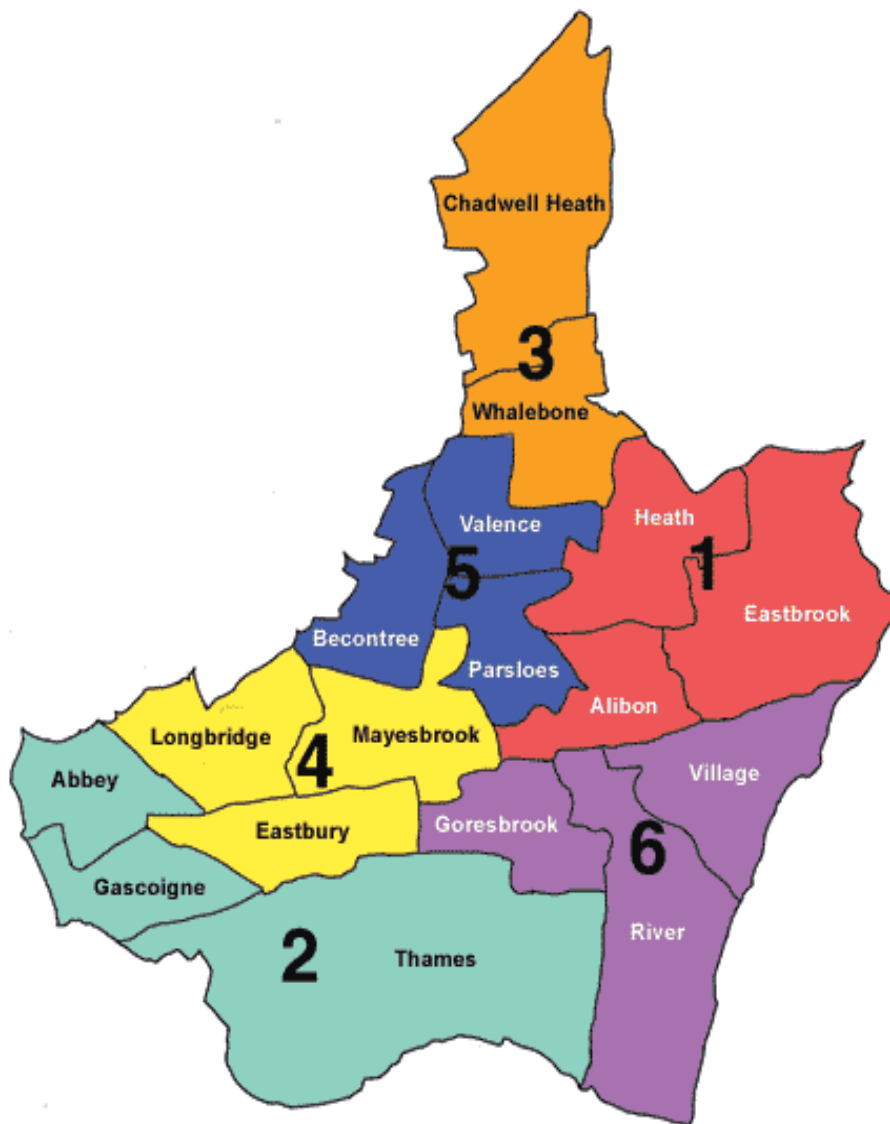
# Local Context - what life is like for a child in Barking & Dagenham

Barking & Dagenham is located in the East of London and has a population of 207,292, of which 61,793 are under 18. The child population in Barking & Dagenham is increasing by around 2-3% each year. The borough has a predominantly white British population, with 49% of the residents from a non white ethnic group. Black Africans are the largest minority ethnic group at 17% of the overall population.

White British school aged children make up 26% of the population and 13% are White Other, predominantly Eastern European groups. The remaining 61% are from other minority ethnic groups with Black African making up the biggest group at over 23%.

Barking & Dagenham has 44 primary schools, 10 secondary schools, 2 special schools and 1 pupil referral unit. 5.7% of Barking & Dagenham's 16 to 18 year old cohort were not in Education, Employment or Training (NEET), compared to London (3.4%) and England (4.7%) averages.

Barking & Dagenham is a borough with high areas of deprivation and poverty and these factors alongside domestic violence impact significantly on social care. Barking & Dagenham has the 6th highest level of child poverty in England and across London is ranked 4th 'worst' for children aged under 16 and 6th 'worst' for children aged under 18. Domestic violence and abuse continues to be a significant issue in Barking & Dagenham. During 2015/16 there were 2,568 offences which represent an increase of 5.4%. Barking & Dagenham recorded the highest rate of domestic abuse offences across London in 2015/16 - 27.2 recorded incidents per 1,000 population.



The average property in Barking & Dagenham costs around £310,000 which is over 12 times the average household income of £25,499. This makes home ownership unaffordable for many residents. The majority of households presenting as homeless will live in private rented accommodation.

Market rents have been rising much faster than household incomes, particularly for those families on benefits. Private rents have increased by 25% over the last two years, outstripping both inflation and Local Housing Allowance rates. This has led to difficulties for low income households accessing or sustaining affordable tenancies in the private rented sector and consequently significantly increased the number of households presenting as homeless.

There is only a 3% turnover in council housing every year, which severely limits the amount of council housing available to re-house homeless households.

The largest single factor for households becoming homeless is loss of private rented sector tenancy. The second largest factor is parental/household 'ejection'. Overcrowding and non-violent relationship breakdown were the most significant causes followed by violent breakdown which is usually associated with domestic violence, anti social behaviour or gun crime.

# Safeguarding 'Snapshot'

## 2015/16

- 61,793 Total Number of children (0-18) in the Borough
- 30% of total population
- 2,064 children & young people open to children's social care
- 1,189 Child in Need cases
- 130 children identified as being at risk of CSE
- 41 incidents of children & young people missing from care
- 18% of children in receipt of free school meals
- 90 incidents of missing from home
- 11,393 contacts into MASH - a 34% increase
- 3,255 referrals (29%) - a decrease of 20%
- 16.6% re-referrals within 12 months of a previous referral
- 2,530 statutory social work assessments completed - reduction of 14%
- 1,184 child protection investigations
- 325 Initial Child Protection Conferences

- 253 Child Protection Plans decreased from 353 in 14/15
- Increase in CP medicals from 113 (2014/15) to 196 (2015/16)
- 457 Looked After Children
- 176 Care Leavers aged over 18
- 5393 Domestic Abuse Notifications in the year
- 185 Allegations against staff working with children & young people
- 45 Private Fostering Notifications



# Effectiveness of Safeguarding Arrangements in Barking & Dagenham

In 2015/16, alongside population growth and in the context of a high population of children and young people aged between 0-17 years, there has been a decline in safeguarding and looked after children numbers.

The activity and performance information for the financial year 2015/16 demonstrates a reduction in numbers, although the number of contacts made from partner agencies increased. There has been a fall in the number of social care referrals, the total number of statutory cases, the number of assessments completed, the number of child protection plans and looked after children.

## **The MASH**

The Multi Agency Safeguarding Hub (MASH) acts as a single point of contact for referrals to both Early Help Services and Children's Social Care (CSC). The MASH screens activities and ensures all contacts are progressed as a referral if the threshold for a statutory social work assessment is met.

In 2015/16 the number of contacts increased to 11422 which was a real time increase of 34%. The increase was in part due to a rise in the number of Police Merlins. However, there was a 21% decrease in referrals at year end, 3222 compared to 4084 in 2014/15. The monthly average was 269 during the year as compared to 340 average during 2014/15. Following contact the MASH aims are that only those children meeting thresholds for statutory assessments are progressed as referrals to Children's Social Care. The assessment will determine what services to provide and what action to take.

Barking & Dagenham's referral rate per 10,000 children aged 0-17 has fallen from 691 to 544. This is in line with the national average of 548, below our statistical neighbours (715) but above the London rate of 478. The percentage of contacts

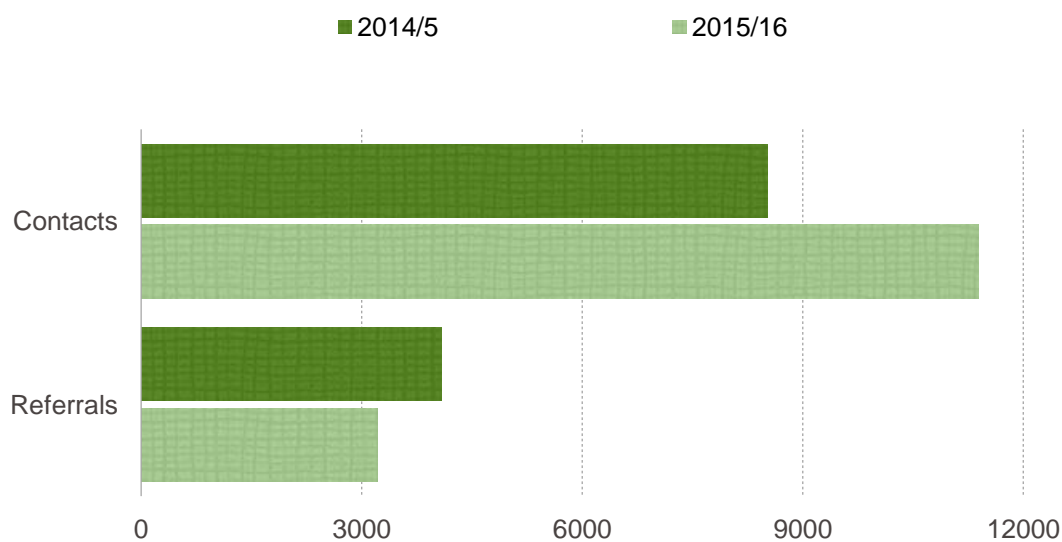


progressing to a referral has decreased from 48% in 2014/15 to 28% in 2015/16. Whilst the number of repeat referrals has remained similar at year end 2015/16 to the previous year at 16.6% the number of cases decreased from 688 to 534.

The significant increase in the rate of contacts and the conversion to referrals, reinforces the importance of the 'strong front door'. The gate keeping role of MASH ensures an appropriate response but this may not always be from Children's Social Care.

The high number of contacts not progressing to referral has continued to merit attention and work regarding the quality of information provided by partner agencies and this remains an important practice issue going into 2016/17.

The significant volume of Merlins (contacts from the Police) has led to positive collaborative working between Children's Social Care, Police and Early Help services. In particular where there are concerns around low level domestic abuse, arrangements are now in place to visit and offer support at a Tier 2 level before considering a referral.



## Children in Need

The number of Children in Need cases has reduced by 12% (291) at year end when compared to year end 2014/15. The numbers of Children in Need on social worker

caseloads has been high and some cases have received less oversight than would be expected as social workers have prioritised Child Protection and court work. Identification of this led to the successful Children in Need project team, consisting of a team manager and social workers working with Children in Need cases to move on including step down to Tier 2 services. In some cases there has been targeted involvement from Troubled Families workers.

## **Children on a Child Protection Plan**

The number of children made subject to a child protection plan has reduced compared to year end 2014/15 from 353 to 253, a reduction of 28%.

The rate of child protection enquiries (section 47) in 2015/16 was 206 per 10,000. An audit has concluded that the threshold for section 47 is appropriate and whilst higher than statistical neighbours, London and national rates, children are safe and risk is identified and managed. This area of practice will be subject to further scrutiny and constructive discussion. Analysis shows that in 29% (355 children) of the cases where a S47 enquiry was begun, the children were assessed as not being at risk. Possible questions that the BDSCB will test out in audits in the coming year could be:

- ➔ Is the application of threshold being appropriately applied?
- ➔ are referrals and risk being framed by referring agencies appropriately
- ➔ are there alternative solutions to avoid escalation to S47 such as the input of universal or early help services?

100% of Initial Child Protection Conferences take place within 15 days of the strategy meeting where the decision was taken to convene an enquiry. This means that children receive a timely service when safeguarding concerns are apparent.

The total number of cases considered at initial child protection conferences in the 2015/16 period was 328 which is a rate per 10,000 of 55. There has been a positive reduction from 76 per 10,000 during 2014/15.

There were 10 children (2.4%) who remained on plans for longer than 2 years, lower than the national and statistical averages and 24 children (7.8%) that became subject of a plan for the second time.

The number of multi agency Core Groups meeting within timescale is 84% and is a positive increase when compared to 2013/14 when performance was below 40%.

The profile of children subject to a Child Protection Plan shows a high proportion of younger children aged 9 and under. This emphasises the need for early intervention and prevention work in pregnancy and early years settings.

There has been an increase in the number of males subject to a child protection plan in 2014/15 51% were male, in line with the local population. During 2015/16 this has risen to 60%. 49% of children subject to a child protection plan are white British. This is an increase on 46% reported in 2014/15 and in context of a declining white British local population, which is currently 33% for under 18's.

Analysis of the types of abuse resulting in child protection plans highlights emotional abuse and neglect as the two largest categories used in the borough. 50% of plans are due to emotional abuse, linked to the rate of domestic violence. The percentage of children on plans due to neglect increased to 35% during the year.

## **Looked After Children**

The number of Looked after Children at year end is 418, compared to 457 in 2014/15, a decrease of 9% making the rate per 10,000 71 (from 77). This above the national (60) and London (52) rates but in line with similar areas (69).

The number of children taken into care as a result of police protection has been very high in previous years and was identified as an area for improvement following the Ofsted inspection in 2014. Positive and focused partnership work between the Police and Children's Social care has led to a reduction in numbers during the year to 54, representing 25% of all admissions into care. This compares to 69 in 2014/15 and 134 in 2013/14

## **Children at Risk of Child Sexual Exploitation (CSE)**

Multi agency work to identify children and young people who may be at risk of child sexual exploitation continues to be a priority for the BDSCB and partner agencies.

- 130 children were flagged as at risk of or subject to CSE - an increase of 37%
- 5th highest number of incidents in London according to police data
- 88% of the children and young people were female, a slight increase
- 81% were teenagers, a slight decrease
- 56% were white British, a 5% decrease
- 25% of victims had been reported missing with a high incident of repeated missing reports, a 5% increase
- 33% open to Children's Social Care

There is no national or regional dataset for CSE so at present there is no mechanism for comparing Barking & Dagenham's performance against other areas. The locally produced Problem Profile will be updated and collate information across a range of agencies. At year end the CSE data collected showed:

## **Children Missing from Home, Education & Care**

Children missing from home, care and education are a priority for the BDSCB. The partnership response is steered by a multi agency missing children group and the development of a revised strategy.

The Local Authority maintains a database that records all instances of missing children. Data is recorded via Police MERLINS of children reported missing for 24 hours or more. The financial year end 2015/2016 figures for missing children are as follows:

- LBBD all under 18s: 213 children with 490 instances of being reported missing for 24 hours or more
- LBBD LAC/CP: 78 children with 200 incidents (includes our LAC placed out of borough)

Of these:

- LBBD all under 18s at risk of CSE: 28 children with 82 missing incidents
- LBBD LAC at risk of CSE: 18 children with 44 missing incidents
- Return interviews completed: 45

Whilst data for 2014-15 shows that there were only 239 missing instances relating to 125 children, it is only since April 2015 that data for LAC who are placed in our borough from other LAs has been counted. The borough's systems and partnerships to safeguard missing children have been strengthened through the MASE and CSE committee. This has resulted in a rise in the number of LAC being identified as being at risk of CSE. This should however be viewed as positive.

## **Elective Home Education**

Data for the numbers of resident children and young people of statutory school age who are home educated in Barking and Dagenham for the 2015-16 is as follows:

<b>April 2015</b>	<b>110</b>	<b>October 2015</b>	<b>166</b>
<b>May 2015</b>	<b>127</b>	<b>November 2015</b>	<b>170</b>
<b>June 2015</b>	<b>136</b>	<b>December 2015</b>	<b>186</b>
<b>July 2015</b>	<b>141</b>	<b>January 2016</b>	<b>188</b>
<b>August 2015</b>	<b>146</b>	<b>February 2016</b>	<b>190</b>
<b>September 2015</b>	<b>146</b>	<b>March 2016</b>	<b>151</b>

Whilst the data is subject to substantial monthly variation, it does demonstrate an upward trend in the numbers of children and young people who are home educated. The numbers of EHE children has effectively doubled since 2010. It should be noted that whilst parents have a right to refuse to engage with the Local Authority (the only statutory requirement being that they submit an annual educational philosophy statement), less than 10 families fall within this category in the borough. The LA therefore has a constructive relationship with the vast majority of parents who choose to home educate. The majority of parents continue to home educate not for philosophical reasons but because their child was not offered a place at the school of their choice, or they have been withdrawn from school following a particular incident e.g. bullying or behaviour.

The EHE database 'RAG rates' each child in relation to safeguarding and any other concerns, with appropriate action taken in each case.

## Private Fostering

A child under the age of 16 (under 18, if disabled) who is cared for and provided with accommodation by someone other than a parent, person with parental responsibility or a close relative for 28 days or more is privately fostered. A full analysis of activity in Barking & Dagenham over 2015/16 is available in the Private Fostering Annual Report.

During the year 2015/16 the Fostering team held a total of 29 children who were privately fostered. Of those 29, 14 were closed during the year and at year end there were 15 children open. This is an increase on last year 2014/15 when there were 10 children open.

Number of Notifications	Number of cases processing to PF arrangements	Closed within 28 days of referral	Total cases at year end
45	12	1	15

During the year the Fostering team received 45 notifications compared to 26 during the previous year. Of the 45 notifications 12 (27%) met the criteria for for Private Fostering. Of those 12 - 4 cases were referred to the Assessment service as there were safeguarding concerns, 1 was closed after the 28 day assessment as the young person returned home, 2 children were made subject to Child Arrangement Orders that removed them from Private Fostering regulations, 5 cases remain open.

Ethnicity of notifications	Black African	White British	Lithuanian	Russian	Portuguese	Dual Heritage	Asian	Black Caribbean
45	20	9	2	1	2	2	2	7

The age range of the 15 children were:

- ▶ aged 0-6 = 1
- ▶ aged 6-9 = 2
- ▶ aged 10-16 = 12

There were no children with disabilities living in Private Fostering arrangements during 2015/16.

All notifications were responded to by way of a visit to the child and carer's home within 7 days of notification which is 100% compliance with statutory timescales. All new arrangements were assessed and completed within the 42 days which meets the regulated timescales.

Private Fostering campaigns continue with the multi agency workforce and the community, including raising awareness of children who may have been trafficked. Schools, Children's Centres and libraries display leaflets and posters for children & young people and carers.

During Private Fostering week an awareness campaign was aimed at professionals to remind them of the duty to refer.

## **Next Steps**

- ▶ increase and maintain the level of publicity and awareness raising activities
- ▶ continue to promote links with partner agencies
- ▶ contribute updates to key newsletter & bulletins

## **MAPPA**

Multi Agency Public Protection Arrangements (MAPPA) operate in all 32 London boroughs. The arrangements are statutory which means that there is a duty on all agencies involved to share information about sexual offenders and violent offenders and to fulfil their obligations in helping to manage them safely in the community.

MAPPA across London is overseen by the London MAPPA Strategic Management Board that is made up of representatives from probation, police and prisons. The Strategic Management Board ensures that MAPPA operates consistently and in line with the national MAPPA guidance issues by the Ministry of Justice.

There are 3 categories of MAPPA eligible offender: Category 1 - registered sexual offenders; Category 2 (in the main) violent offenders sentenced to imprisonment for 12 months or more and Category 3 - offenders who do not qualify under categories 1 or 2 but who currently pose a risk of serious harm.

MAPPA reports in the main on a London wide basis and there is little local data and analysis reported to the BDSCB. Up to end of year 2015 there were 169 registered sexual offenders in Barking & Dagenham, this is from a London total of 6604.

The London National Probation Service (NPS) in partnership with the other members of the MAPPA Responsible Authority in London prioritises public protection and working with victims. They assess and manage the risk posed by offenders on a continual basis and information sharing between agencies is vital and fully supported by the MAPPA process

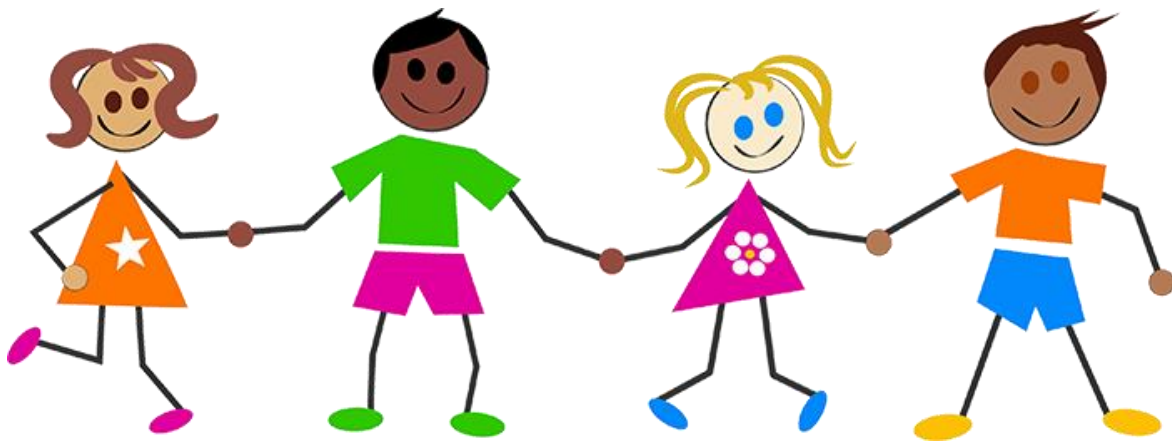




# Early Intervention

This is about taking action as soon as possible to tackle problems for children and families before they become too difficult to reverse.

Early help describes any service that involves a targeted intervention into the lives of children & families. These range from brief periods of support identified through universal provision to longer term plans for families who, without them would be supported by statutory services.



## JSNA Key Messages

1. Barking and Dagenham is the 22nd most deprived authority in England and many families in the borough are either on low incomes, where full-time salaries are lower than any other authority in London, or they are dependent on benefits. More than a fifth of working age residents in the borough claim at least one type of benefit, compared to the national average of one in seven. Housing benefit claimant levels are high and have increased by 12% since 2008.
2. Barking and Dagenham has among the highest teenage pregnancy levels in England although rates have fallen considerably in recent years. The Chlamydia rate among the under 25s is the twelfth highest rate nationally, although the screening coverage is much more comprehensive (almost a third of young people are screened locally compared to a quarter nationally).

3. The population of children and young people has increased over the last ten years and is set to rise by another 16% over the next ten years. The projected 0-19 population growth in the borough will be driven primarily by the recent surge in the 0-4 population. Extra demand is already impacting on nursery and reception classes and the number of school places among 3-4 year olds has increased by nearly 20% between 2006 and 2010.

4. The gap in school attainment between Barking and Dagenham and the national average is small despite large numbers of economically disadvantaged children and young people. Results for FSM pupils are higher than national average each year and for all age groups.

5. GCSE performance levels are now higher than the national average among pupils not passing English and maths. There is a lower number achieving passes in English and maths than the national average and less achieving A or A\* at GCSE level in any subject.

6. A-level results are lower than national averages as are the number of young people entering university.

7. The level of children known to Social Care is much higher than it is nationally for Children in Care, Children subject to a Protection Plan and Children in Need.

Early help services are delivered in partnership with all statutory, private and third sector agencies within the borough. An Early Help strategy (2014-2018) provides a framework by which partners can co-ordinate services for children & families and is led by the Early Help sub group which jointly reports to the Children's Trust Board and the LSCB. The strategy focuses on ensuring the right help is provided at the right time and includes a range of existing enhanced universal and targeted services supporting early help that include:

- \* Community Health Services

- \* Children's Centres

- \* Family Nurse Partnership

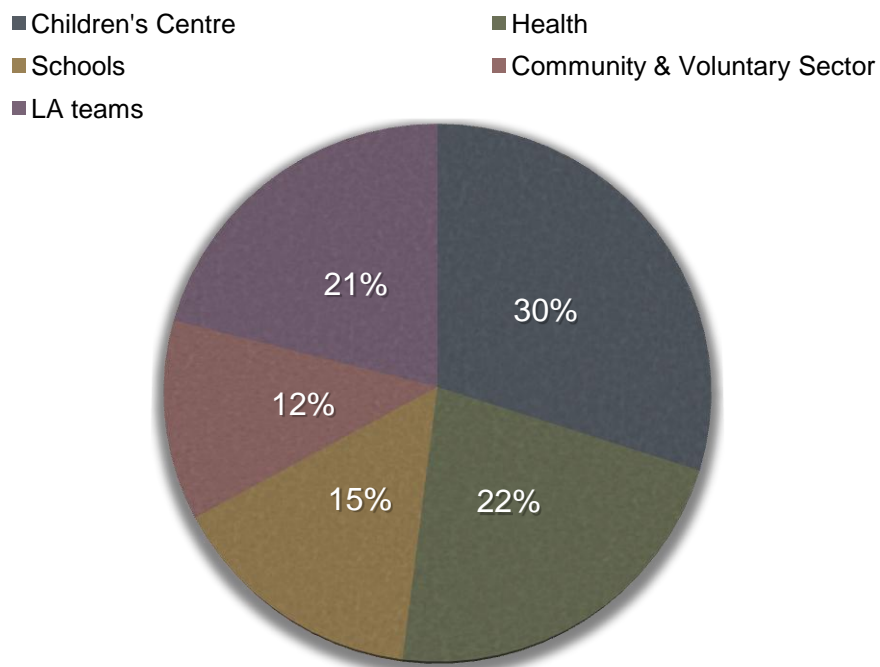
- \* Integrated Youth Services

\* Locality Based Multi Agency Support Panels

\* Troubled Families

CAF & Family CAF (FCAF) are the primary assessment tools used in Barking & Dagenham's Early Help. They support inter agency working along with established integrated pathways across the partnership and ensure effective coordination and information sharing across the Team around the Family (TAF) approach. The eCAF system is being promoted as the borough's primary choice of early help assessment, rather than the paper based system.

Practitioners in Barking & Dagenham continue to build on the successful implementation of the CAF process through early identification and intervention. Assessments are undertaken by trained staff members who have identified families with additional needs and who require multi agency involvement in order to bring them back to universal services without needing ongoing support from a targeted service. The CAF is the primary tool used for evidencing work with families involved with Troubled Families 2.



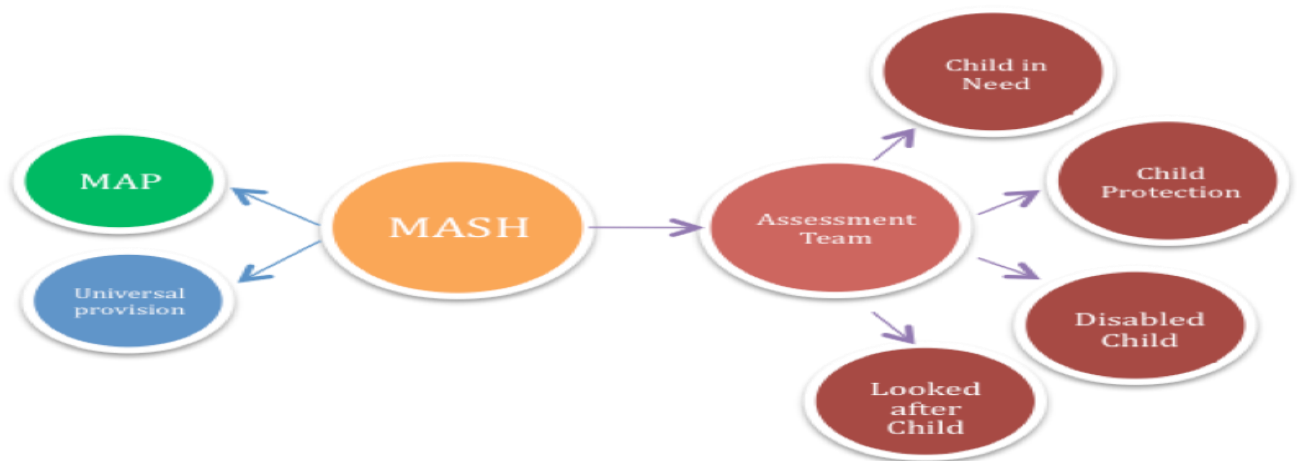
2099 CAF's were undertaken for children aged 5 and under. A third (30%) were undertaken by Children's Centre staff which includes Targeted and Universal Early Intervention Workers. Health services are the second highest initiator with 22% of all CAF's undertaken for this age group. This is an increase of 3% on last year's data.

TAF is an embedded concept in Barking & Dagenham and used where a family require multi agency support. Regular TAF reviews are held to ensure plans are on track and to collectively review progress.

Workers from Early Help have been co-located into the MASH and are able to provide a seamless response for children and practitioners. Located in the MASH allows Early Help workers to draw upon the information and intelligence held by partner agencies within a secure information sharing environment.

Work to revise the Thresholds document was initiated in 2015/16 and subsequently re-launched to BDSCB partners. The publication of this document is a statutory requirement for LSCBs as set out in Working Together 2015. The document details the process for the early help assessment and the type and level of early help services to be provided. Awareness raising on this aspect will continue through 2016/17.

Three Multi Agency Panels (MAP) encourage wider partnership involvement and to ensure that families who require universal or targeted support receive it as soon as possible. The last financial year saw a significant increase in the referrals coming to MAP. This was in part due to scrutiny on Child in Need cases and a 'step down' process aimed at reducing the impact on Children's Social Care demand. Over the year 2015/16, a total of 3578 referrals were received to the MAP's



The Early Help Committee has been a sub group to the BDSCB since 2014. It has excellent multi agency attendance from partners. For full details of Early Help see reports on: <http://www.bardag-lscb.co.uk/Pages/EarlyHelp.aspx>

# Domestic Violence



**Some of the biggest victims of domestic violence are the smallest.**

Tackling Domestic and Sexual Violence (DSV) is crucial for creating a community within which everyone is safe: as strategic assessments continuously demonstrate, Barking and Dagenham has one of the highest Domestic Violence rates in London.

## Prevalence

Domestic and sexual violence are significant issues for Barking and Dagenham and the borough has the highest number of reported incidents of domestic violence and abuse (DVA) per 1000 population in London. Using year to date totals:

- ▶ in 2015/16, there were 5393 incidents reported to Police.
- ▶ Of these, 2,568 were offences.
- ▶ This represents an increase of 5.4% compared with 2,436 offences in 2014/15.
- ▶ The majority of domestic violence incidents were recorded as violence with injury (VWI) and accounted for 46.2% of all recorded incidents on the borough in 2015/16.

This data does not include those victims who do not report to the police and therefore, is only an indicator of the true scale of the problem.

Domestic Abuse is a factor that features in the majority of open cases to Children's Social Care - 62% Numbers have increased by 86% in 3 years from 1195 in 2012/13 to 2228 in 2015/16. However the number of those contacts that progressed to referral decreased by 14% from 501 to 432.

Contacts & Referrals to social care where domestic abuse is a factor

No of Contacts	11,393
of which domestic abuse a stated issue	2228
% of contacts in which domestic abuse a stated issue	19.6
Number of Referrals	3215
of which domestic abuse a stated issue	432
% of referrals in which domestic abuse is a stated issue	13.4

The borough has a high number of standard/medium risk DVA cases. Taking into account potential under reporting and repeats there were in the region of 5,016 cases in 2015/2016. These numbers demonstrate the level of need for services to improve access to safety and prevent escalation of risk.

Sanction detection, arrests, charge and caution rates are above the regional average in Barking and Dagenham. The sanction detection rate for Barking and Dagenham stood at 48 % (October 2015) which represented an improved performance against 43% for the same period in 2013/14 and is significantly above the MPS average of 32.5%. With Barking and Dagenham ranked at joint first with LB Richmond for detections (Mayors Office for Police and Crime. Domestic Abuse in London 2015/16).

During 2015/16, pan London there were 26 recorded domestic violence homicides in London. This represented a 44% decrease compared to 2014/15. However, Barking and Dagenham saw an increase with one homicide on the borough compared with nil in 2014/15.

Recent MPS analysis highlights a significant correlation between alcohol use and DVA incidents in Barking and Dagenham. The data indicates a steep increase in the number of DVA cases where alcohol had been consumed by the victim and/or

perpetrator. This accounts for 70% of all incidents in the borough compared with 25% across the MPS as a whole and 40% across East London (MPS. Dec 2015).

There are many factors that may influence this including deprivation. However, there is no national evidence to show that alcohol use drives DVA

The Multi Agency Risk Assessment Conference (MARAC) discussed 337 high risk cases. This represented a 28% increase compared to 286 cases the previous year. Of these 26 % (86) were repeat cases. This is on par with the Safe lives national recommendation of 28% repeats to MARAC. A significant number of children (381) attached to these cases, which represents a 19% increase compared to 322 in 2014/15.

In terms of equalities, the MARAC data for the borough highlights a reduction in the number of victims with protected characteristics (41% of all MARAC cases compared to 60% during 2014/15. With the exception of LGBT victims, all the other protected characteristics saw a decreased level of referrals when compared with the previous year.

## Equalities Profile of MARAC cases

	2014/15	2015/16	Variance
Total number of MARAC cases	286	377	+51
Total number of Equalities cases	171	156	-15
BME	130	124	-6
Disability	14	11	-3
Young Victims	14	10	-4
Gender (Male)	12	8	-4
LGBT	1	3	-3

## **Sexual Violence**

There has been an increase in reporting of sexual violence in Barking and Dagenham of 2% with 441 crimes reported in the rolling year from April 2015 to March 2016 compared with 404 for the same period the previous year.

## **Harmful Practices**

The identification and reporting of harmful practices (HP) is limited with 'Honour' based violence (HBV) and forced marriages which although distinct forms of violence, fall under the definition of domestic violence and abuse, rarely showing in Police reports. The findings of the recent inspection by Her Majesty Inspectorate of Constabulary (HMIC ) into the response by the Police to honour based violence, forced marriage and female genital mutilation cases highlighted areas for improvement. (The depths of dishonour: Hidden Voices and Shameful Crimes. An Inspection of Police Responses to honour based violence, forced marriage and female genital mutilation, HMIC, 2015). The review concluded that there were pockets of good practice but found inconsistencies across the constabulary into how cases were dealt with. It has not been possible to assess local Police data about the prevalence of harmful practices locally, however, over the entire MPS area, 44 cases were investigated in the period between October 2014 to October 2015 YTD. The Forced Marriage Unit state that 50% of all the reports they receive are from London. Whilst the local Independent Domestic and Sexual Violence Advocacy (IDSVA) service worked with 9 victims where HBV was a concern during 2014/15.

It is estimated that 27.6 per 1000 women in population in Barking and Dagenham have experienced Female Genital Mutilation compared with 12.4 in Redbridge and 4.2 in Havering. Southwark is estimated to have the highest level of FGM in the country at 47. (Prevalence of Female Genital Mutilation in England and Wales: National and Local Estimates, Alison MacFarlane et al, City of London University, 2015).

## **Specialist Services**

The specialist Domestic and Sexual Abuse services worked with 1,463 victims in 2015/16. The Independent Domestic and Sexual Violence Advocates (IDSVA) worked with 400 high risk cases. Of these, the majority were referred via the Police. This trend reflects the referral data profile for the MARAC with high level of Police referrals and low levels of referrals from all other key statutory and voluntary agencies. Consequently, in Barking and Dagenham most victims are generally identified if their



case has come to the attention of the criminal justice system and not at an earlier stage of victimisation.

The refuge service worked with 70 women and 52 children during 2015/16 and of these, 68% reported psychological abuse, 50% reported physical abuse, 13% reported sexual abuse, whilst some 13% were affected by “honour based violence”.

Data from the ASCENT Consortium shows that 330 women and girls from Barking and Dagenham used the service. Ascent is a pan – London consortium of 22 women’s services funded by London Councils to deliver advice, advocacy and counselling services



# Partnership response to Child Sexual Exploitation

Child Sexual Exploitation (CSE) has become an issue of growing significance and is a fast moving area with new reports, requirements and guidance being published on a regular basis.

In response to the growing awareness of the prevalence of CSE, significant work has been undertaken to provide a co-ordinated response among agencies.

The BDSCB oversees a partnership approach to CSE which has led to development of a framework of strategic and operational work:

- \*The creation of the MASH has enhanced the information gathering and sharing for children where there are risk factors.
- \*2 dedicated CSE officers located in MASH who act as a 'single point of contact'. They scan missing person reports and other police notices and records to identify possible CSE and progress them
- \* The Pan London CSE Operating Protocol has been adopted locally
- \*MASE meetings have been initiated, chaired by the Police.
- \*the CSE risk assessment tool has been redesigned, its purpose, to assist practitioners identify risk factors that may indicate young people are at risk of sexual exploitation
- \*CSE 'surgeries' to Tier 2 workers and social workers to discuss practice issues, disseminate information on referral pathways and CSE risk assessments
- \* CSE Referral Pathways have been revised and published on the BDSCB website
- \* A Children's Social Care 'virtual team' discusses practice issues and recommendations for improving practice.

- \* Links between missing children and CSE are recognised and the Missing from Care, Home & Education group has been formally joined to the BDSCB and now report into the strategic CSE group.
- \*The chair of the 'Gangs' group is a member of the MASE and is able to make links across the groups.
- \*Victim Support have appointed a young person's IDVA to work with young people aged 13-18 who are at risk of CSE/sexual violence and are also victims of domestic abuse.
- \*a CSE 'Champion' has been identified from most agencies including schools. The Champions meet for a whole day training & networking session on a quarterly basis.
- \*CSE training is available via BDSCB training programme
- \*subscription to the National Working Group (NWG)

The children who are most at risk of being targeted by CSE perpetrators are children who:

- \* are frequently missing from school, home or residential care
- \*are vulnerable due to living in 'neglectful' households
- \*have been separated or trafficked
- \*are unaccompanied or seeking asylum
- \*are living in residential care

The BDSCB work to a CSE strategy which sets out four key priorities:

1. **Prevention** - focusing upon early identification of children at risk of exploitation and early interventions to build resilience and to reduce the risks
2. **Protection** - to work collaboratively with the young person, their family and other agencies to develop tailored safety plans

3. **Prosecution** - building on the work of the Police, the Crown Prosecution Service and Probation to identify and disrupt perpetrators
4. **Publicising** - raising awareness of CSE among staff, parents and the community

Sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where the young person receives 'something' (e.g., food, accommodation, drugs, alcohol, cigarettes, gifts, affection, money) as a result of them performing, and/or another or others performing on them, sexual activities.

Child sexual exploitation can occur through the use of technology without the child's immediate recognition; for example being persuaded to post sexual images on the internet/mobile phones without immediate payment or gain. Violence, coercion and intimidation are common. Involvement in exploitative relationships is characterised by the child or young person's limited availability of choice resulting from their social, economic or emotional vulnerability. A common feature of CSE is that the child or young person does not recognise the coercive nature of the relationship and does not see himself or herself as a victim of exploitation. Perpetrators of CSE can be from within or from outside a child or young person's family.

The Borough Police have responsibility for identifying and reporting Child Sexual Exploitation (CSE). Dedicated Detectives in this department scrutinise a number of indices (including MERLINS, custody records, crime reports etc) to try and identify factors which may make the child vulnerable to CSE and initiate early interventions. These cases are classed as follows:

**Category 1:** Cases where children believed to be at risk of CSE.

**Category 2 and 3:** Cases are those where there is evidence that the child is actually being exploited. SC&O17 Sexual Exploitation Team (SET) investigate these matters.

Additionally SET and the Paedophile Unit have proactive capabilities, developing intelligence and utilising undercover techniques both online and in the community to target perpetrators of child abuse.

The MASE process has been under review during this reporting period in an effort to ensure a strategic focus is maintained rather than a case by case analysis. An effective system has been adopted locally of conducting a pre-MASE meeting weekly

within the MASH to monitor and manage cases with CSE concerns and ensure referral thresholds are consistent.

The MASE process was subject to a peer review by SET between January and May 2016 to ensure a standardised approach is being delivered across London. A detailed report and recommendations have been implemented by the CSE team in Barking and Dagenham, leading to a revised agenda and focus.

The local CSE unit has increased resourcing during the reporting period from two Detective Constables to two Detective Constables and a Detective Sergeant. Staff are carefully selected to ensure they have the necessary background in children's safeguarding. The personnel in this unit has remained consistent, providing continuity of service and strong links to other agencies through the development of close working relationships.

The CSE Unit takes the lead in training for CSE to both police personnel and also deliver training to other agencies via a series of workshops. Training has now been rolled out to all officers and is now on a rolling basis to ensure new officers and staff are trained and existing officers are refreshed.

### **Barking & Dagenham CSE Profile**

A Problem Profile was compiled in 2015 and is being updated for 2016. The analysis used individual data from Children's Social Care, Police, education, youth offending, substance misuse, children centres, Tier 2 services, SEN and domestic violence services, and cross referenced to build up a local profile.

Partner agencies in the borough continue to share intelligence that may influence the knowledge of the CSE profile. The Police ensure that they have an appropriate and skilled response to CSE crime and produce statistics that show, suspicion, crime detections, and interruptions/disruptions for London boroughs. Looking at the number of committed crimes, Barking & Dagenham holds the 5th highest place.

The 'suspicion' column denotes the number of category 1 cases (Children may be at risk of CSE), at 72 this is 8 less than at year end 2014/15. This is a clear demonstration that the goal of raising awareness with all front line staff is working and that we are identifying a number of children that may be at risk.

An intervention can be anything from a referral to Children's Social Care to obtaining an injunction or obtaining a court order against a perpetrator.

Suspicion	Crime	Interventions	Detections	Disruptions
72		24	48	4
				33

In response to the growing awareness of CSE there has been significant work undertaken to provide a co-ordinated response across key agencies. The BDSCB oversees a partnership approach to CSE which has led to the development of a framework of strategic and operational work. The creation of the MASH has enhanced the information gathering and sharing for children where there are risk factors. MASE meetings have been initiated and are chaired by the Police. This panel provides oversight of all cases of child sexual exploitation and ensures appropriate safeguarding plans are in place and tracks progress. MASE meetings are also used to identify and disrupt offenders and alleged perpetrators as part of actions to protect young people whilst considering a borough wide picture, emerging trends and challenges.

The CSE risk assessment tool has been redesigned. Its purpose is to assist practitioners identify risk factors that may indicate young people are at risk of sexual exploitation. Young people at risk of CSE may not initially meet the thresholds for section 47 inquiries and often will not engage with social workers or police officers. Young people who have been groomed may not even recognise themselves as a victim and may reject initial offers of help and support. To assist these young people the CSE co-ordinator has worked hard to identify a named 'CSE Champion' from each statutory agency and school in Barking & Dagenham. A quarterly whole day training session assists with information sharing and networking and ensures that CSE remains a 'live' issue. These training days include the police and the involvement of agencies such as the National Working Group (NWG), an organisation that Barking & Dagenham council subscribes to.<sup>3838</sup>

BDSCB includes training on CSE in its annual training programme which is available to staff from across the partnership.

The MPS flag crimes that have an element of CSE within them and also record and flag incidents that may not amount to a crime, but where indicators of CSE are present, i.e. repeatedly going missing. This allows work with other agencies to prevent the exploitation from escalating or ever happening, at the earliest possible stage. The flagging of cases where there is a 'suspicion of CSE' often occurs as a result of the department's commitment to ensuring all instances of reports involving

children are holistically assessed to consider if indicators of CSE may be present. If the team feels they may be at risk, a report is created and flagged and the process of further investigation commences.

This approach sees Barking and Dagenham displaying one of highest numbers of 'Suspicion of CSE' in the MPS. Rather than being cause for concern this data should be interpreted positively as they are being proactively identified locally as children vulnerable to potential CSE and early intervention strategies can be put in place. This is a clear demonstration that the MPS goal of raising awareness to recognise the risk factors early on that was given to all front line staff is working. The fact that we are identifying so many children and young people that **may** be at risk of CSE provides all agencies within the partnership the opportunity to take action to prevent CSE taking place. This approach demonstrates the unit's commitment to early identification and prevention.

The actual recorded crimes (as oppose to suspicion that CSE may be a factor) shows 24 cases within the reporting period. This is down from 31 last year but is above average for the MPS which may suggest that CSE is more prevalent in Barking and Dagenham than other London Boroughs.

The fourth & sixth columns show the number of interventions and disruptions that have taken place. An intervention can be claimed if effective positive measures have been put in place which addresses the particular safeguarding needs identified within the report. Interventions have increased from 20 in the previous year to 48 in this reporting period, highlighting the closer effective working relationship with other agencies to ensure appropriate referrals are made to third sector organisations and the investigation remains focused on ensuring interventions put in place which alleviates the risks faced by the young person.

The disruptions measure activity taken against suspected perpetrators including Abduction Notices served and Civil Orders. These total 33 up from 20 in the previous reporting period and scores the highest in the MPS. This shows the increased drive in this year of looking at different ways to target suspected offenders even when the victim will not provide the necessary evidence to obtain a judicial outcome.

<b>Station</b>	<b>Suspicion</b>	<b>Crime</b>	<b>Interventions</b>	<b>Detections</b>	<b>Disruptions</b>
<b>Hackney</b>	62	18	83	1	26
<b>Tower Hamlets</b>	72	18	30	4	10
<b>Waltham Forest</b>	73	16	40	1	14
<b>Redbridge</b>	52	10	95	40	18
<b>Havering</b>	80	27	58	4	36
<b>Newham</b>	53	25	29	0	18
<b>Barking&amp;Dagenham</b>	<b>72</b>	<b>24</b>	<b>48</b>	<b>4</b>	<b>33</b>
<b>Camden</b>	50	13	16	3	3
<b>Islington</b>	29	12	32	0	18
<b>Harrow</b>	30	7	18	0	8
<b>Brent</b>	36	22	16	8	10
<b>Barnet</b>	33	13	17	0	42
<b>Enfield</b>	41	22	22	2	10
<b>Haringey</b>	59	26	28	3	34
<b>Lambeth</b>	36	26	33	1	3
<b>Southwark</b>	50	16	19	1	7
<b>Lewisham</b>	47	14	33	6	9
<b>Bromley</b>	37	11	37	2	5
<b>Greenwich</b>	37	12	23	0	9
<b>Bexley</b>	25	8	11	5	10
<b>Croydon</b>	81	18	45	0	4
<b>Sutton</b>	34	4	24	2	1
<b>Kenington &amp; Chelsea</b>	12	5	3	0	3
<b>Westminster</b>	25	29	13	14	7
<b>Hammersmith &amp; Fulham</b>	35	11	7	2	3
<b>Heathrow</b>	0	1	0	0	0
<b>Richmond</b>	34	7	56	1	0
<b>Hounslow</b>	35	27	8	4	10
<b>Kingston</b>	48	5	28	3	0
<b>Merton</b>	41	14	25	5	1
<b>Wandsworth</b>	71	18	28	9	4
<b>Ealing</b>	59	20	57	4	16
<b>Hillingdon</b>	27	12	1	2	3

Barking & Dagenham council was successful in a bid for funding from Barnardos and the Big Lottery for a CSE worker for 3 years to work with the voluntary sector on hard to reach and vulnerable children and young people. The aims of the project are:



- \*to work with children and young people at low levels of risk of CSE around keeping safe, specifically targeting young carers and young people with disabilities who are in mainstream education
- \*to deliver workshops to community groups, but for voluntary organisations to be a priority, so they can continue to provide 'keep safe' workshops and increase capacity within their own agencies

There are robust arrangements in place for 'return interviews' with young people who go missing and these occur within 72 hours of a young persons return. Work will continue to analyse findings of these interviews to identify any commonalities or themes.

### **Operation Makesafe**

Operation Makesafe seeks to educate people working as taxi drivers, hoteliers and those working in licensed premises who encounter young people, of CSE warning signs. The Metropolitan Police Service (MPS) provides this group of staff with bespoke CSE awareness training by specially trained officers, showing scenarios and action to take should they suspect a child is at risk.

Operation Makesafe is now embedded with the MPS, having been in place for over a year. It has been extended to local businesses and the police will continue to raise awareness.

### Local Risk Factors

- High number of school exclusions or excluded within last **2 years**
- Low numbers of SEN : Attainment low at all **Key Stages**
- A fifth of the children flagged **at risk of CSE** had previously been reported missing
- Two thirds had previously accessed **support** through **Children's Centres** and **Targeted Support**
- **a third** had been subject to a CAF
- 37% were known to **Victim Support IDVA** service
- No teen parents were known
- 10% of children were known to **drug services**
- 12% were known to **Youth Offending** service

### **CSE Peer Review**

In October 2014 the London Safeguarding Children Board, and the Association of London Directors of Children's Services requested that all London authorities complete a peer review of practice in relation to CSE. The boroughs of Hackney, Newham and Barking & Dagenham developed an audit tool and completed self audits ahead of a cross borough peer challenge meeting. A review of this work was undertaken in early 2016.

### **Themes**

- \* work with the police, particularly at borough level CSE SPOC and the East London CSE team is strong and focused. Police attend MASE and strategic meetings and are proactive in seeking information to pursue prosecution and disruption tactics
- \*MASE meetings are running in line with the London CSE Protocol

\*strengthened cross borough information sharing will assist local authorities to safeguard looked after children placed out of borough

\*Commissioning & support of foster carers and the development of specialist CSE foster carers

### **Next Steps**

- Review & update of Problem Profile
- Review & update of the operational plan
- Review and analysis of 'return interviews'

# Oversight of Children Missing from Home, Care & Education



A child missing from home, care and education remains a priority for BDSCB. In 2015 the London Safeguarding Children Board updated the London Child Protection Procedures and agreed a protocol for missing children.

Going missing is a dangerous activity. There are particular concerns about the links between children running away and the risks of sexual exploitation, gangs and radicalisation. A child/young person who goes missing just once faces the same immediate risks as faced by a child/young person who regularly goes missing. However, children who go missing when they are young (and/or with greater frequency) are more likely to face longer-term problems.

The most effective assessment and support comes through good information sharing, joint assessments of need, joint planning, and professional trust within the

interagency network and joint action in partnership with families. Interventions will include a consideration of risks for each individual child/young person and a focus on reducing repeat missing episodes. All interventions will be informed by effective return interviews and for children in care must be informed by and reflected in the placement information record and in the care plan.

Children and young people go missing for a variety of reasons; they may be “pushed away” by factors at home or “pulled away” by outside factors. When they are missing they face immediate risks for which they may be ill-prepared. Children may run away from home due to:

- \* Arguments and conflicts
- \* Conflict within a placement
- \* Poor family relationships
- \* Physical and emotional abuse
- \* Boundaries and control
- \* Step parent issues

Children are at risk from:

- \* Being groomed for sexual exploitation
- \* Involvement in criminal activities
- \* Victim of crime
- \* Alcohol/substance misuse
- \* Deterioration of physical and mental health
- \* No means of support or legitimate income – leading to high risk activities
- \* Missing out on schooling and education

Longer-term risks include:

- \* Long-term drug dependency / alcohol dependency
- \* Crime
- \* Homelessness
- \* Disengagement from education
- \* Sexual exploitation, prostitution
- \* Poor physical and/or mental health

The Metropolitan Police have implemented the new ACPO missing person definition. This differentiates between people who are missing and those who are classed as absent.

- \* **Missing** – “Anyone whose whereabouts cannot be established and where the circumstances are out of character or the context suggests the person may be the subject of crime or at risk of harm to themselves or another.”
- \* **Absent** – “A person not at a place where they are expected or required to be and there is no apparent risk”.
- \* The reporting process remains the same as it has always been: it will be a police decision whether a person is classified as missing or absent. The classification is determined on the perceived level of risk to the individual. Only a person who is assessed as **no risk** will be classified as absent. No person under the age of 18 will be assessed as being **no risk**, and as such no person under 18 will be classified as absent.

The BDSCB has a **Missing Children Strategic Group** (MCSG). It is a multi-agency meeting comprising of representatives from the police, Social Care, Education and Health and meets every six weeks to review missing children procedures and data. The CSE Coordinator is a member of the MCSG so that links between children missing and CSE can be explored.

Each quarter, data is provided to the Performance and Quality Assurance Committee on children reported missing within this borough.

**The Information Sharing Group** is a multi-agency meeting comprising of representatives from the police, Social Care and Health. It meets every six weeks to review **all** cases of children reported missing in the borough, children who are

missing from education and children who are educated otherwise than at school (also known as elective home education – EHE).

**Director of Children’s Services challenge meeting** - Missing children and children missing from education are discussed, every three months, at a quarterly Director of Children’s Services challenge meeting, which includes the Divisional Directors of Education and Social Care and a representative from the police.

**National Indicator 71** - Although local authorities are no longer required to adhere to the guidance set out in this national indicator, this borough continues to use it as a tool to measure itself with regard to missing children procedures and data. This is signed off by the Independent Chair of the LSCB and the Director of Children’s Services.

### **Priorities going forward:**

- \* BDSCB will continue to oversee performance and the actions required to support the strategy on missing children.
- \* BDSCB to better understand the reasons why children go missing through the intelligence gathered from the return interviews
- \* A closer alignment of work involving CSE and Missing children
- \* Further scrutiny of the process in tracking children missing education.

# Local Authority Designated Officer

All LSCB's have responsibility for ensuring that there are effective procedures in place for investigating allegations against people who work with children. The Local Authority Designated Officer (LADO) should be informed of all allegations and will provide advice and guidance to ensure individual cases are resolved as quickly as possible.

The LADO role in Barking & Dagenham is held by the Group Manager Safeguarding, Quality & Reviews with the operational function delegated to the Safeguarding Manager for all non education allegations and the Safeguarding Lead for Education for all allegations against education staff. These arrangements are fully compliant with the guidance in Working Together 2015. A full analysis of how allegations have been managed during 2015/16 can be found in the LADO Annual report.

Between April 2015 and March 2016 the LADO's recorded 185 formal allegations against the children's workforce in Barking & Dagenham. This represents a 15% decrease from 2014/15 of 221 allegations.

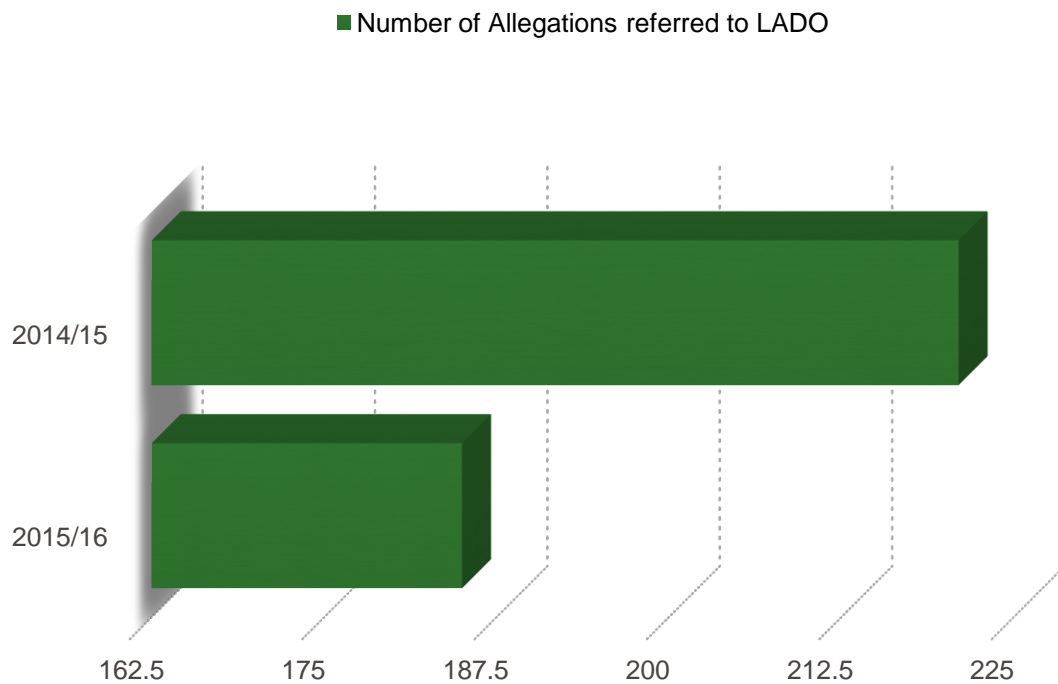
The decrease in formal allegations could partly be explained as a result of the national emphasis on demonstration of harm, there has also been a reduction in the number of multi agency briefing sessions held.

The statistical distribution of allegations in the year indicates that professionals employed in education services account for 36% of the total referrals. The next largest professional group is Early Years settings with 15% of referrals, with Foster Carers third with 12%. The remaining 37% of referrals involved concerns about staff in the wider workforce. It is unsurprising that as a whole, the staff most likely to have allegations made against them will be those working with children directly and for significant periods of the day, (teachers and class based staff, nursery staff and foster carers).



## Next Steps

- ▶ Continued awareness raising of LADO activity and ensure that all those working with children are familiar with the processes and what to do if they are concerned about an individual.



- ▶ Representation to national health bodies about registration of staff and compliance with LADO procedures
- ▶ raising awareness with faith groups of the LADO process

# PREVENT - safeguarding children & young people from radicalisation

The BDSCB will hold the Community Safety Partnership to account for its effectiveness in safeguarding children and young people at risk of radicalisation.

From 1st July 2015 the 'Counter Terrorism & Security Act' (CTSA 2015) put the Prevent strategy onto a statutory footing. This places a duty on specified authorities to have "*due regard to the need to prevent people from being drawn into terrorism*". The LSCB guidance issued by London Councils 'Safeguarding Children from Extremism' also forms part of the strategy. The Barking & Dagenham Prevent Strategy & Delivery Plan has identified the following priorities:

- \* improving understanding and awareness of Prevent, Extremism and recognising radicalisation
- \* building community resilience to identify and challenge extremism and radicalisation where this may present
- \* reducing the risk of vulnerable individuals to extremism
- \* ensuring Prevent messaging is communicated effectively both within frontline services and to the wider community

The Barking & Dagenham Prevent strategy & Delivery plan is developed and overseen by the Prevent Strategy & Steering Group, that reports to the Community Safety Partnership.

During the year there has been a major focus on training and awareness amongst frontline staff across all sectors and within the community. Schools in the borough have received workshops to raise awareness with over 1300 staff trained, with particular regard to Ofsted and DfE guidance.

# Learning & Improvement

The BDSCB Learning & Improvement process provides the framework for the Board to learn from audits and to deliver its statutory function “to undertake reviews of serious cases and advise of lessons to be learned from them”. Using the framework, the Board has ensured focused dissemination of learning from audit activity, Practice Learning Review and Serious Case Reviews. Training and Development needs are identified as a result of the emerging learning from practice and case review activity both at a local and national level.

## Training & Development Report

What have we done?

- The Performance, Learning & Quality Assurance Committee oversees L&D on behalf of the BDSCB.
- The L&D Officer has worked hard developing local practitioners who deliver training courses on behalf of the LSCB, increasing the Board’s capacity to provide learning opportunities whilst fostering expertise at single agency level.
- All courses have been developed based on learning from National Serious Case Reviews, national policy and research, local case reviews and audits.
- To enhance learning and development opportunities a series of lunch-time briefings and half day workshops have been arranged which provide a shorter and more focused training session.
- Between 1st April 2015 and 31st March 2016, 1,438 training places were available to the multi-agency workforce, 1,217 participants attended, equating to 85% attendance rates
- In addition, a range of E-Learning courses were accessible to partners via the LSCB website – this included basic awareness courses in Safeguarding, CSE, Female Genital Mutilation (FGM), Child Trafficking.

- Learning opportunities have been provided in response to identified need from learning from case audits and serious case reviews

What impact have we had

- Attendance by agency is variable as is expected given the varying size of the workforce, staff turnover, and availability of single agency training. Staff from the council, schools and Health agencies have the highest rates of attendance
- We have promoted our events to Voluntary, Community and Faith sector organisations across the period.
- Attendance rates themselves cannot be considered a measure of success, and it remains a challenge to demonstrate the impact of learning and development activity on outcomes for children and frontline practice. The BDSCB has used a 3 stage Post Course Evaluation process to evaluate the learning from events during this period and feedback has been largely positive

### **Next Steps**

- To encourage greater attendance and less 'no shows' from all partners
- Refresh of the Learning & Development Framework and Training Programme to include learning from 2 local SCR's:
  - Hidden Adults
  - Disguised Compliance
  - Sharing Information

# Child Death Overview

## Panel (CDOP)

CDOP is a committee of the BDSCB, it enables the Board to carry out its statutory duty relating to the review of all child deaths (0-17 years, with the exception of babies who are stillborn and planned terminations of pregnancy) so that if there is learning that may prevent future deaths this can be identified and shared with agencies and the public.

Across Barking & Dagenham during 2015-16 there were 20 child deaths notified to the CDOP of which 11 were reviewed and reported on by the panel.

- of the 20 deaths notified, 4 were unexpected deaths. The Rapid Response procedure was followed for all

- 16 deaths were classified as expected, of these 11 have been reviewed and concluded

- the highest proportion of deaths is within the neonatal period - 45%.

- children under 1 year of age represent 15% of the total number of child deaths notified to CDOP.

- 20% of deaths were white British and 20% were Black/Black British African

- 5 of the deaths reviewed had 'modifiable factors'

Modifiable factors are where there are factors which may have contributed to the Child death. These factors are defined as those which, by means of nationally or locally achievable interventions, could be modified to reduce the risk of future child deaths.

### CDOP Achievements

- a clear pathway for learning between CDOP and SI's has been developed

- development of the interface between CDOP and Serious Case Reviews
- increased joint working across neighbouring boroughs to share learning and develop the effectiveness of CDOP with Barking, Havering & Redbridge Hospital Trust.

The full CDOP annual report can be found at: <http://www.bardag-lscb.co.uk/Pages/CDOP.aspx>

# Case Review Activity - Serious Case Review's, Practice Learning Review's & Multi Agency Audits

## What have we done?

• During 2015/16 four cases were referred to the SCR Committee due to concerns about how agencies had managed the case and the impact on the child. Of these, one met the criteria for a SCR.

• Of the remaining three cases two were criminal matters and being led by the Police and one was progressed to a Practice Learning Review, which remains in progress.

• This year the BDSCB have conducted two multi agency audits - the audit on CSE was conducted in line with our multi agency auditing process whereby representatives complete an audit tool and are then invited to a multi-agency focus group lead by the QA Manager from Children's Social Care who facilitates a 'conversation' about the quality of practice and the impact of collective efforts on improving outcomes for the child/young person. An audit on the quality of Multi Agency Referral Forms was completed by reviewing information sent into the MASH by referring agencies. The quality of information in the MARF was identified as 'requiring improvement' during the Ofsted inspection in 2014.

• Findings from audits are reported to Performance, Learning & Quality Assurance committee

## Findings - CSE

The audit group audited 10 children which covered LAC, CP CiN and closed.

basic recording such as the child's school was not updated

Some inconsistency of approach to flagging cases was identified

under half of the cases audited had evidence of the CSE risk assessment being used

- in cases where the CSE risk assessment used no evidence in half of those that the child had been seen
- multi agency plans need clarity and focus of work
- some agencies need greater oversight and understanding of CSE demonstrated through supervision
- Inconsistency in the understanding of risk levels and language was identified in some cases.
- two dedicated police officers for CSE are based in the MASH
- BDSCB training on CSE ongoing
- themes from this audit will be communicated to the CSE Champions

### **Findings - MARF**

There were a total of 801 children referred via a MARF in Q1, 10% (80 records) were audited.

- out of 68 referrals where CAF should have been considered, only 2 had a CAF in place
- 56 referrals could have been worked in Tier 2 services rather than being referred to Children's Social Care.
- The quality of information in 58 MARFs was 'good'
- Reflection and analysis of information in 64 MARFs was available

### **Practice Learning Reviews**

In Barking & Dagenham our practice learning reviews involve all partner agencies that were involved in the management of the case and the review is led by an Audit & Quality Assurance Officer.

The findings from the completed PLR involve sexual abuse and themes are:

- ▶ improved partnership working required



- ▶ improved information sharing required
- ▶ understanding of the Police CAIT role
- ▶ partnership understanding around the issue of consent

The learning from this PLR together with learning from multi-agency audits have been integrated into a multi-agency presentation to be delivered to Performance, Learning & Quality Assurance committee and through a workshop and newsletter.

## **Serious Case Reviews**

LSCBs are required to undertake a review of all serious cases when abuse or neglect of a child is known or suspected; and either the child has died; or the child has been seriously harmed and there is cause for concern as to the way in which the authority, their Board partners or other relevant persons have worked together to safeguard the child. The purpose of a Serious Case Review is to establish whether there are lessons to be learned from the case about the way agencies worked individually and together to safeguard and promote the welfare of children, to identify clearly what those lessons are, how they will be acted upon and what is expected to change as a result.

BDSCB has initiated two SCR's - Child H was initiated in 2013 but completed and published in 2015. Child B was initiated in 2015 and completed and published in 2016

All actions and recommendations from the Serious Case Reviews are monitored by the Performance, Learning & Quality Assurance committee. Themes arising from the SCR's are:

### **Child H**

- ▶ supervision - reflective and clinical
- ▶ impact/risk of all family members
- ▶ professional optimism/curiosity

## **Child B**

- ▶ information sharing
- ▶ compliance with procedures
- ▶ the 'invisible' father
- ▶ professional optimism
- ▶ disguised compliance

## **Impact of audits on practice and outcomes for children**

Our case review activity has identified some opportunities for learning:

- ▶ continuous training to frontline practitioners in all agencies on threshold and consideration to completion of CAF
- ▶ regular reflective supervision to be in place
- ▶ all agencies involved with a child to be invited to strategy meetings and CiN meetings
- ▶ assessment tools such as the CSE risk assessment tool could be better understood and used more consistently to elicit early help, record concerns and measure changes
- ▶ over optimism results in a lack of rigour in undertaking assessments and focusing on the needs of the child
- ▶ sources of information were not always given appropriate significance
- ▶ information sharing was not always consistent, leading to a lot of information being available to some agencies working with the family but not others.

- ▶ parenting capacity was often judged to be poor without any formal parenting assessment being conducted to support that professional judgement
- ▶ reviews of assessment must be regularly undertaken to evidence that the desired impact of intervention is being realised for the child.
- ▶ Lack of professional challenge to the accounts provided by Parent's.
- ▶ Gaps in recording led to lack of clarity as to whether the child had been seen.
- ▶ Absence of the voice of the child in records to demonstrate that it had influenced the response of the professional
- ▶ The escalation policy was not used to challenge decision making

## **Key Messages for Managers**

- Frequent changes in workers without adequate handovers can contribute to losses of information and a 'start again syndrome'
- Ensure that practitioners are trained and equipped to use all available risk assessment tools and that these inform referrals for early help and child protection.
- Ensure plans are child focused
- Encourage practitioners to reflect on what life is like for the child

## **Key Messages for Practitioners**

- Take a forensic approach to assessment; consider all information regardless of the source.
- Ensure that all children are considered within an assessment regardless of how well they might appear to be doing
- Keep children at the centre of what you are doing – listen, and hear what they are saying.
- Demonstrate that the child's voice has influenced your response

- If you are uncomfortable about a decision that has been made in a case, report your concern and use the Escalation Pathway of the BDSCB.
- Ensure that all partners working with the child and family have contributed to the risk assessment
- Safeguarding is everyone's responsibility, but not someone else's. Get involved and stay involved until you are satisfied that risk has been reduced and outcomes for the child are improved.

## **BDSCB listens to children and ensures their voice informs our work**

The Young People's Safety Group (YPSG) is a sub group of the BDSCB and meets to discuss safeguarding & safety issues that are specific to children & young people. The group meets termly and all secondary schools, the college and PRU are invited to attend with a representative group of between 8-10 pupils. Following each meeting, two key questions are raised by the young people and taken to the BDSCB meeting for a response, themes this year have covered Prevent & extremism and Rail Safety. Schools disseminate messages from each YPSG widely through assemblies and newsletters throughout their schools.

Throughout the year 111 young people attended drawn from 6 schools in the borough. The meeting themed on the Prevent agenda saw one of the largest ever attendances at a YPSG meeting

Integrated Youth Services (IYS) provides universal youth provision for 11-19 year olds, or up to 25 with a disability. Universal provision includes youth centres and pop up youth clubs in community settings. Targeted provision includes LAC youth groups and LGBT work. The service is also responsible for the statutory participation and rights of Looked after Children, including advocacy and Independent Visiting, as well

as mainstream activity such as the BAD Youth Forum. IYS is also responsible for reducing the numbers of 16-19 year olds who are not in Education, Employment or Training, the provision of work experience for young people as well as the commissioning of High Needs support for learners aged 16-25. During 2015/16 attendance at IYS groups reached 21,386.

The safeguarding of young people comes about largely through the work with Looked after Children and through 1-2-1 work referred through various multi agency panels. Generic youth work also explores the theme of safeguarding, in particular CSE, and provides a 'safe' environment for any young person to discuss this topic.

The service is by far the largest distributor of condoms in the borough with around 28,000 distributed in Q3 & Q4. This is carried out within a context of speaking to young people about healthy relationships.

Looked After young people have access to a more stable and consistent Advocacy and Independent visiting service and the Children's Rights Officer has continued to undertake return interviews with children that go missing, making links with CSE.

'Flip side' is a LGBT youth provision and is now a well established peer group with the ability to inform and influence work around promoting LGBT rights and positive outcomes. IYS also has a pivotal role in promoting positive sexual health. Teenage pregnancy figures for the borough are at its lowest level since 1998.

Listening to and responding to the voice of child is integral to practice and embedded in training and audit processes for North East London Foundation Trust (NELFT)

NELFT has a service user engagement programme in place which includes seeking the views of children, young people and their families in relation to their experience of services. Their views are considered and used to inform improvements in service delivery. There is a young people's engagement group known as "Listen". This group has contributed to a review of the CAMHs service undertaken by the Clinical Commissioning Group. Views of parents frequently inform improvements or changes in service delivery, for example a survey of The Health Visiting service resulted in the implementation of a duty system being put in place to improve access.

There are a number of forums for capture of practitioner experience, for example the annual NELFT staff survey, surveys of practitioner experience of safeguarding children supervision and support received from the safeguarding duty desk.

Youth workers play an increasing role in the reduction of NEET. This is particularly the case with vulnerable NEET who experience a number of factors such as domestic violence and substance misuse that prevent them from entering education, employment or training.

Attendance at IYS provision is consistently good with the potential to reach and work with young people at risk who may not access other services. Through the YPSG young people have worked directly with BDSCB members to outline their priorities. In November a group of young people 'tookover' the LSCB meeting and acted in key positions such as Independent Chair and Director of Children's Services. They formed the agenda and questions to the multi agency partners. This will be repeated on an annual basis.

**Next Steps:**

Make links with the gangs group

Continue to work with vulnerable young people in returning to education, employment & training

Strengthen the role with regards to CSE

# Wider Contribution to Safeguarding from our Partners

The BDSCB strength and ability to continuously improve safeguarding practice is underpinned by our multi-agency working together. However there is a significant amount of work that our partners undertake from a single agency perspective.

This section of our annual report provides a snapshot of information on the wider contribution to safeguarding from our partners, in addition to the multi-agency partnership contribution they make

## **Barking, Havering & Redbridge University Hospitals NHS Trust**

What we have achieved	What we aim to do in 2016/17
Full establishment of the Safeguarding Children's Team	Implement & embed the Child Protection Information System
A Safeguarding Children Training Needs Analysis approved at the Trust's Operational Group	Continue to embed the FGM, CSE and DV agenda
Supervision Policy revised	Embed a Safeguarding Children 'trigger tool' in Emergency Departments
Rolling programme of audits in place	Establish Safeguarding Children Summits to disseminate learning relating to children and through Serious Incidents
CAF now in use in Midwifery Dept and by Sexual Health & Paediatric staff	Develop a Safeguarding Children's Dashboard
All staff have access to a new CSE web page	
staff awareness of vulnerable groups - DV, LAC, CSA	
Implementation of CP Information Sharing System	

What we have achieved	What we aim to do in 2016/17
Increased evidence on consultation with children	

## Children's Social Care

What we have achieved	What we aim to do in 2016/17
Reduction in open cases, resulting in less drift and lower caseloads, reflecting tighter work on assessment, planning and reviewing.	Continued analysis and understanding of increased volume of contacts.
Higher performance in visits to children subject to CP plans (97%), Core Groups (86%)	Improve and maintain performance on key areas
Significant progress with the Police to reduce the number of children entering care through Police Powers of Protection	Reduced reliance on agency staff and increased focus on permanent recruitment of social workers
Introduction of the Single Assessment and increase in performance in completing assessments within timescales	Continued focus on CSE
Reduction in referrals reflects improved gatekeeping in MASH	Co-ordinated planning to address preventative work with universal and targeted services.
	Further work on responding to high levels of domestic violence

## Housing

What we have achieved	What we aim to do in 2016/17
Comprehensive training is available to all staff	



What we have achieved	What we aim to do in 2016/17
<p>Housing staff regularly attend Child Protection Conferences</p>	<p>To respond to the projected increase in demand, actions will be taken to reduce homelessness:</p> <ul style="list-style-type: none"> <li>- early intervention</li> <li>-adopting a holistic/multi agency approach</li> <li>-mediation in parental ejection cases</li> <li>-employment, debt management &amp; benefits advice</li> <li>-working closely with private landlords</li> </ul>
<p>Joint work with Children Centres to provide training and information on rights and responsibilities of a tenant</p>	

## North East London Foundation Trust (NELFT)

What we have achieved	What we aim to do in 2016/17
<p>The Safeguarding children duty desk was implemented in July 2014. This is a single point of contact for safeguarding children enquiries and is co-located with adult Safeguarding team enabling a THINK family approach to safeguarding</p> <p>The Fabricated and Induced Illness Procedure written in partnership with the Named Doctors was ratified and published.</p>	<p>Work to develop the NELFT reporting CSE dataset requirements is now complete and will be available in late 2016.</p>
<p>The Domestic Abuse, CSE, FGM and Harmful Practice Procedure was developed, ratified and published.</p>	<p>Capacity and impact on practitioner workload in a time of change and service transformation</p>
<p>The Safeguarding Children Policy was reviewed and updated to strengthen reference to key priorities such as CSE and FGM and to reflect updating of national policies.</p>	<p>Sufficiency of high quality supervisory capacity</p>
<p>All senior leads and managers, including the executive team have received safeguarding training at the required statutory level.</p>	<p>Ability to release staff to attend multiple training programmes</p>

What we have achieved	What we aim to do in 2016/17
<p>The Safeguarding Children’s team undertakes regular audits of the Trust’s child protection systems and processes. The audit program includes an audit of safeguarding children record keeping, the quality of safeguarding children supervision and response to domestic violence. An additional audit of practitioner contribution to child protection core group meetings and progression of child protection plans was identified from Section 11 audit 2014</p>	<p>Insufficient and limited understanding of pathways to respond to those affected by these issues</p>
<p>NELFT has a service user engagement programme in place which includes seeking the views of children, young people and their families in relation to their experience of our services. Their views are considered and used to inform improvements in service delivery. In Barking and Dagenham’s there is a Young people’s engagement group known as “Listen”. This group contributed to the review of the CAMHs service undertaken by the Clinical Commissioning Group.</p>	<p>Earlier identification and mobilisation of early offer of help – in order to reduce harm and improve outcomes for children.</p>
<p>There are a number of forums for capture of practitioner experience, for example the annual NELFT staff survey, surveys of practitioner experience of safeguarding children supervision and support received from the safeguarding duty desk.</p>	<p>Embedding CSE within the range of practitioners roles and assessment processes within children’s services</p>
	<p>Ensure that children and young people affected by the issues associated to PREVENT are recognised and appropriate interventions are in place</p>

## Metropolitan Police Service

What we have achieved	What we aim to do in 2016/17
<p>Significant improvement in intervention and disruption</p>	<p>Develop further links with Missing Children and improve identification of CSE from these young people, extracting intelligence from return interviews.</p>

What we have achieved	What we aim to do in 2016/17
<p>The local CSE team continue to lead the way in identifying and flagging young people who may be at risk and ensuring quality links are made with partner agencies to reduce those risks.</p>	<p>Develop closer links with care homes on the Borough.</p>
<p>The Detectives within the team remain the same in this reporting period, gaining further experience and building close working relationships</p>	<p>Improve the links with Schools and raise awareness in schools.</p>
<p>We have provided a strong training program to raise awareness across multi-disciplines.</p>	<p>Closer focus on perpetrators and locations of concern and use the new Dashboard to build an accurate problem profile and direct resources accordingly.</p>
<p>MASH processes leading up to MASE and the MASE itself has been completely overhauled to include a greater focus on perpetrators, location and prevention activity.</p>	<p>Trial CSE matrix system (similar to Gangs system) and consider if this is a valuable tool in identifying and prioritising those most at risk.</p>
	<p>Regularly review processes with MASH and other agencies to ensure they are in line with Pan London Protocol.</p>
	<p>Work with council partners to identify Services that may be able to be commissioned for children believed at risk of CSE to provide a wider range of intervention options.</p>

## Clinical Commissioning Group (CCG)

What we have achieved	What we aim to do in 2016/17
<p>Developed &amp; Strengthened safeguarding arrangements for the CCG Safeguarding children information included on the intranet site with updated policies &amp; procedures</p>	<p>A case for change for the combined role of Designated Nurse for safeguarding &amp; LAC remains outstanding &amp; will be reviewed</p>
<p>A new set of reporting requirements has been agreed for the reporting organization to report on supporting the CCG to hold the provider organizations to account.</p>	<p>A proposal is being considered to begin a Lead GP Child Safeguarding Group to be held quarterly.</p>
<p>A safeguarding standard detailing the minimum standards for safeguarding children for all CQC</p>	<p>Achieving statutory compliance with LAC Health Assessments.</p>

What we have achieved	What we aim to do in 2016/17
contracts has been agreed and will be placed in all contracts from 2016 onwards	
NHSE carried out a deep dive inspection across all BHR CCG's as part of an assurance process for CCG's. Barking & Dagenham was awarded a 'good' outcome with a number of good practice areas identified.	Raise the profile of LAC with GP practices.
The Designated Nurse has supported development of NELFT's FGM strategy and is working with the LSCB Faith & Culture group.	

## Priorities for 2016-17

The BDSCB business plan outlines the strategic objectives that will inform the work of the Board from 2015-18. The following information was considered when the priorities were agreed:

- Children's Trust - Children and Young People's Plan
- Health and Wellbeing Strategic priorities
- BDSCB Annual Report 2014-15
- Recommendations from inspections
- Analysis of local need - JSNA
- Good practice guidance from ALDCS and Ofsted publications
- Priorities identified from the BDSCB performance management data and local quality assurance audits.
- Outcomes of national and local serious case reviews

● Five strategic priorities were agreed. These are:

1. Board members are assured that arrangements are in place to identify and safeguard groups of children who are particularly vulnerable
2. Board partners will own and share accurate information which informs understanding of safeguarding practice and improvement as a result
3. The Board will see children and young people as valued partners and consult with them so their views are heard and included in the work of the LSCB
4. Arrangements for Early Help will be embedded across agencies in Barking & Dagenham who work with children, young people and their families
5. Board partners will challenge practice through focused inquiries or reviews based on performance indicators, practitioner experience and views from children and young people. Collectively we will learn and improve from these reviews.