



# Barking and Dagenham Safeguarding Children Board

## **BDSCB Annual Report 2014-15**

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## Executive Summary

The annual report for Barking & Dagenham LSCB 2014/15 was agreed by the Local Safeguarding Children Board on 17th September 2015

In line with statutory requirements the LSCB Chair has formally sent a copy to the Chief Executive and Leader of Barking & Dagenham Council and the Chair of the Health and Wellbeing Board. The Mayor's Office for Policing and Crime will also receive a copy.

The report is divided into 5 sections:

**Chapter 1** summarises the key conclusions reached by the LSCB in assessing how well children and young people are safeguarded in Barking & Dagenham.

**Chapter 2** sets out the demographic information in relation to children and young people living in Barking & Dagenham. It outlines significant developments that have taken place within partner agencies during the year and also details what is currently known about levels of need in the borough and early help and safeguarding activity.

**Chapter 3** provides information on how the LSCB operates in Barking & Dagenham and explains in detail the work it has undertaken during 2014-15 to discharge its statutory functions and deliver its priorities. It also provides a detailed analysis of the evidence seen by the LSCB to indicate the quality and effectiveness of safeguarding practice and arrangements.

**Chapter 4** focuses on priority groups of vulnerable children and young people, including children subject to, or at risk of sexual exploitation, children affected by domestic abuse, privately fostered children and missing children. It sets out the LSCBs work to safeguard these groups and where possible seeks to assess the impact of this work.

**Chapter 5** outlines the LSCB's priorities for 2015-18.

This report is available online on the Barking & Dagenham LSCB website at <http://www.bardag-lscb.co.uk/professionals/Pages/Home.aspx>

## Foreword from BDSCB Chair

Welcome to the 9th Annual Report of the Barking and Dagenham Safeguarding Children Board (BDSCB).

In line with Working Together 2015 the Chair must publish an Annual report on the effectiveness of child safeguarding and promoting the welfare of children in the local area. The report should be submitted to the Chief Executive, Leader of the Council, the local police and crime commissioner and the Chair of the health and well-being board. The report should provide a rigorous and transparent assessment of the performance and effectiveness of local services. It should identify areas of weakness, the causes of those weaknesses and the action being taken to address them as well as other proposals for action. The report should include lessons from reviews undertaken within the reporting period.

The year commenced with an Ofsted Single Agency Inspection of Children's services and LSCB. Children's Services and the LSCB were both graded as "Requires Improvement".

Priorities for the LSCB were to:

- Ensure the LSCB Chair strengthens the coordination, focus and impact of the boards work in the Health and Wellbeing Board.
- Undertake an evaluation of the full impact of training on the performance of practitioners to ensure it targets improvements in outcomes for children.
- Sustain and extend the positive and constructive role of the practitioner's forum in promoting multi-agency working through improving the attendance of social workers.
- Strengthen oversight of private fostering by the board, supporting efforts to ensure all such children are identified.
- Ensure the Annual report and Business Plan are focused on understanding and addressing local needs and on evaluating progress made in achieving improved outcomes for children.

The above priorities were achieved and continue to be a focus of the LSCB work in the coming year.

The LSCB and Children's partnership worked together to ensure the areas identified in the inspection were prioritised and a plan to address these implemented. The LSCB Independent Chair and Director of Children's services respectively take ownership of these. Challenge and assurance is achieved through "Trigger" meetings between the Lead Member for Children's Services, The CEO of LBBD the Director of Children's services and the Independent Chair that provide rigorous and challenging debate regarding performance. The LSCB and Director of Children's services also report through to the Children's Trust and the HWBB.

The LSCB has continued to work with Barking, Havering and Redbridge University Trust as it faces the challenges of ensuring it met CQC requirements and that those services for children and young people were safe.

There has been an unprecedented amount of legislation, and policy, to safeguard children and families published this year including: The Children and Families Act 2014; The Care Act 2014 - this principally improves things for adults but it includes improvements for children, especially those with special educational needs and disability; Public Law Outline: Guide to Case Management in Public Law Proceedings came into effect on 22nd April 2014; Working Together to Safeguard Children: a guide to inter-agency working to safeguard and promote the welfare of children March 2015 came into effect in April 2015; and Counter-Terrorism and Security Act 2015

All of these have shaped the way the LSCB partnership has worked to ensure children and young people across LBBB are safeguarded, including an LSCB development sessions on Prevent, performance monitoring of care proceedings, ensuring compliance with Working Together 2015. The LSCB has supported partners understand the implications of the legislation through LSCB development sessions. This work will continue over the coming year.

LBBB was invited to participate in a Home Office review of Child Sexual Exploitation. This provided the partnership with an unprecedented opportunity to review and challenge the way services were being commissioned and delivered to protect children and young people from CSE and has strengthened our delivery model and assurance framework.

Over the coming year the LSCB faces many challenges. However we have a strong committed partnership which provides the foundation to ensuring we work together to address these challenges.

The overarching priorities identified for the LSCB going forward will be detailed in the LSCB Business Plan 2015-18 are:

- Board members are assured that arrangements are in place to identify and safeguard groups of children who are particularly vulnerable
- Board partners will own and share accurate information which informs understanding of safeguarding practice and improvement as a result
- 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
- Arrangements for Early Help will be embedded across agencies in Barking & Dagenham who work with children, young people and their families.
- 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 from and improve from these reviews

I would like to thank all partners for their continued engagement, expertise and commitment to the BDSCB and the value each partner brings to support the safeguarding of the children and young people across Barking and Dagenham.

*Sarah Baker*

Sarah Baker, Independent Chair



## **CHAPTER 1: Effectiveness of local safeguarding arrangements**

The assessment of safeguarding arrangements in Barking & Dagenham shows that partner agencies have remained focussed on safeguarding children despite significant organisational pressures both from financial and from organisational restructuring. The Children's Services safeguarding services and the LSCB were judged by Ofsted to 'require improvement' in May 2014 and one of the priorities for the Board has been to have oversight of the improvements Children's Services have made over the year as a result of the inspection.

The LSCB's quality assurance arrangements have been reviewed, and the LSCB's role strengthened by statutory partners presenting their data to the Performance & Quality Assurance committee. We also strengthened the LSCB's role in co-ordinating and supporting developments that improve front line practice, with a particular focus on improving the multi-agency response to child sexual exploitation.

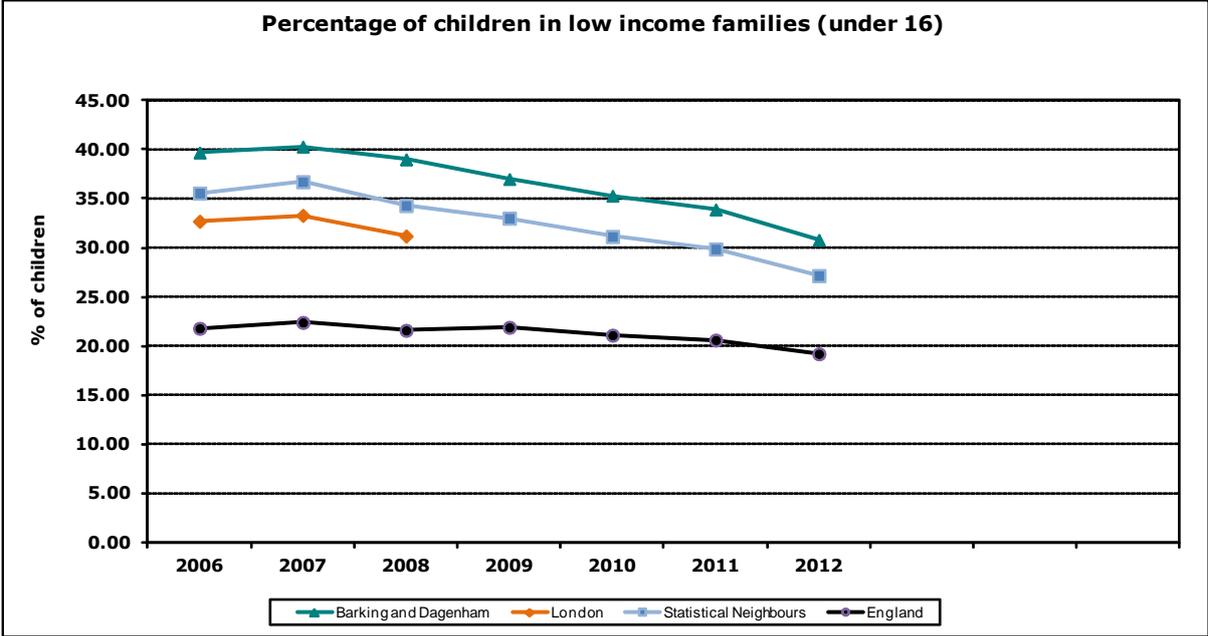
The LSCB data set and quality assurance activity have statistics that inform this safeguarding assessment and demonstrate steady progress in improving standards for safeguarding children across the borough. Showing direct evidence of impact remains a challenge as capacity for audit across the partnership has reduced however, the performance shows steady progress in improving standards for safeguarding children across the borough. There are some areas where improvements are still required across the partnership; in particular working with domestic abuse is proving to be a challenge for all agencies.

The voluntary sector in Barking and Dagenham is not represented by one body and consists of large national and small, local voluntary agencies. This means that there needs to be a clear standard for safeguarding children and young people across a widely varied group of agencies. A 'Green Book' was produced which has been sent to all voluntary groups in Barking & Dagenham and is available on the LSCB website. In order to self assess them selves against Section 11 standards voluntary agencies are recommended to use the Safer Network Standards. However, this is not produced in a format that can be easily sent to the LSCB. During the year 2015/16 the LSCB will agree with voluntary sector representatives a set of clear standards and pro formas for their self assessment under Section 11 standards.

The representation of local schools on the LSCB has included them in regular dialogue about the pivotal role they play in safeguarding children. All schools in the Borough have self assessed themselves under S157/175 of the Education Act and a report has been presented to the Board on the themes and trends arising from this audit.

There has been a rise in the overall numbers of vulnerable children and young people in the borough which is occurring alongside the rapid population growth, but is also closely linked to the very high levels of poverty and deprivation in the borough. Nearly one in three children living in the borough is born into poverty, higher than the national average of around one in five and a third of children live in workless households in the borough. Barking and Dagenham has the 6th highest levels of child poverty in England and across

London is ranked 3rd worst for children aged under 16 and 4th worst for children aged under 18.



At the end of year 14/15 the number of Children in Need (CiN) was 1317 but rose at the beginning of April to 1388. In response to increasing numbers of Children in Need and also high numbers of Children subject to a Child Protection Plan, a project has been initiated which has involved CiN IRO’s reviewing CiN plans and passing actions to Tier 2 workers to action. It is hoped that these actions will result in CiN cases ‘stepping down’ or closing as a result of this targeted work.

Alongside rapid population growth and in the context of a high population of children and young people aged between 0 and 17 years of age (highest in the statistical neighbour group in 2013-14), the borough has equally seen an increase in safeguarding and looked after children numbers. The activity and performance information for the financial year 2014/15 demonstrates a continued trend of increased safeguarding activity and demand in the Borough. There have been significant increases in the number of social care referrals, the total number of open statutory cases, the number of assessments completed, the rate of section 47 investigations, the number of children subject to child protection plans and fluctuating looked after children numbers.

In 2014/15, the rates of referral continued to increase with the number of referrals to statutory social care services rising to 3,950 compared with 3,126 in 2013/14 - a real term increase of 26% (figure 8.6). Barking and Dagenham’s referral rate per 10,000 subsequently increased to 693 in line with our statistical neighbours (690), but way above national and London rates of 573 and 470 respectively.

The number of statutory social care assessments completed increased in 2014/15 to 2,998 compared to 2,817 in 2013/14, a real term increase of 6%. The timeliness of assessments is now monitored by a statutory assessment completed within 45 days. In 2014/15, 73% of

statutory social care assessments were completed within 45 days, below our local target set at around 80%, comparable with Q3 figure of 72.9%. Performance falls below the national average of 82% and London average of 79%. Improving the quality and timeliness of assessments continues to be a top area for improvement.

In 2014/15, the total number of open statutory social care cases also increased, rising to 2,356 compared to 2,184 in 2013/14, an 8% increase in real terms. In the last 5 years, this increase has been 59% in real terms – 1,482 in 2009/10 rising to 2,356 in 2014/15.

In 2014/15, the number of S47's undertaken slightly dropped to 1,231 compared to 1,231 in 2013/14. Our rate per 10,000 at 214 remains significantly higher than all benchmarks - 155 for statistical neighbours, 112 for London and 124 for the national rate.

Children subject to child protection plans have also continued to increase in 2014/15 to 354 – an increase of 11% on the 318 reported in the previous year and a 78% increase over the last 5 years. The rate per 10,000 of 80 has remained comparable with 2013/14 rates but is much higher in Barking and Dagenham compared to national, London and similar areas.

The LSCB role to coordinate the effectiveness of the investigations into allegations concerning persons who work with children has continued to show an on-going improvement. During the year, the number of workers referred to the Local Authority Designated Officer (LADO) due to concerns that they had behaved in a way that had harmed or may harm a child, committed a criminal offence relating to a child, or may pose a risk to a child continued to increase. As in previous years, the schools sector continues to see the highest number of employees being referred to the LADO. This is consistent with the national picture. The statistical distribution of allegations in the year indicates that professionals employed in education services account for 58% of the total referrals. The next largest professional group consists of Foster carers with 19.5% of referrals.

The LADO has provided multi agency briefings, which has provided a greater awareness amongst partner agencies of the circumstances in which a LADO referral should be made rather than being evidence of an increase in abusive or inappropriate behaviour. Overall there has been good performance and no referral exceeded the three month timescale for completion which reflects the effective multi-agency working especially between the LADO, the Safeguarding Lead for Education and the Police CAIT Team.

To keep focused on practice, the LSCB seeks assurance from organisations that they are fulfilling their obligations through a detailed self-evaluation known as the Section 11 audit. Analysis of the information provided by agencies shows that on the whole compliance is judged to be good. This process of self-evaluation will continue to be developed over the course of the year as more Section 11 audit work is completed. This will enable the LSCB to keep focused on practice and to identify any emerging themes or priorities.

All deaths of children resident in the borough are evaluated by the Child Death Overview Panel (CDOP). The CDOP met seven times during the year. The number of child deaths in Barking & Dagenham is small - 23 deaths of children resident in the borough were notified to

the CDOP between 1st April 2014 and 31st March 2015. Of these deaths, 15 were 'expected' and 8 were 'unexpected'. For these 8 deaths the Rapid Response process was initiated.

The highest number of deaths notified to CDOP is within the neonatal age (0-27 days) and represented 35%, with all children under 1 year of age accounting for 61%. This is consistent with national figures. Barking & Dagenham has noted a high number of child deaths among the African population. From the 107 reviews conducted between 2011 and 2015, 32% (34) deaths were to African Children. 17% (18) were categorised as neonatal and prematurity was recorded in 14% (15) of the deaths.

CDOP reviewed one death that was classified as suicide. This case did not identify any modifiable factors but will be included in the UK's first national investigation into child suicides launched by the University of Manchester.

In September 2014 Barking & Dagenham CDOP led the first development day across Barking & Dagenham, Havering and Redbridge. The day was attended by members of three CDOP's as well as the chair for Havering LSCB.

The LSCB has undertaken a multi agency audit on children subject to Police Powers of Protection as this was an area of concern in the Ofsted Inspection. Over the course of 2014/2015, there have been several audits, the aim of which has been to assess the quality of front line practice from member organisations across the partnership. These are set out in greater detail within the body of this report. These audits form part of our Learning and Improvement framework which this year has also included participation in a Serious Case Review led by a neighbouring borough and a Serious Case Review into the death of a child in Barking & Dagenham. Both of these reviews are still to be concluded and publication will be later in the year.

Listening to feedback from children and young people is important to understand their experience and perspective on safeguarding issues and services and to identify areas where the response from agencies needs to improve. Through the Young People's Safety Group (YPSG), our aim is to develop meaningful ways in which children and young people can contribute to and influence the Board's work as well as promoting a culture across the partnership where children's participation becomes central to safeguarding practice and the way in which organisations operate. Children's participation is reported later in the report.

Missing children are a priority for the LSCB because they are at an increased risk of harm and the potential to become involved in criminal activity or targeted for child sexual exploitation. The LSCB monitors missing children data on a quarterly basis through its dataset reports to Performance & Quality Assurance group. Information is reported in the Performance section of this report.

The LSCB has put in place a multi-agency Child Sexual Exploitation (CSE) Strategy and action plan that has been agreed by all partners and aligned to the pan London CSE Operating Protocol. The strategy includes a risk assessment framework and referral pathway for practitioners. A programme of CSE training and multi agency briefings have been held throughout the year, including a CSE week that saw the launch of Operation Makesafe by the Police and a Business Breakfast that invited local hoteliers and taxi firms to hear how

they could be involved in reducing CSE. The LSCB now have a list of CSE 'Champions' identified across the partnership and training has been incorporated into the LSCB training programme so they can come together as a group and share learning on CSE. The LSCB strategic CSE Committee provides overview and strategic direction and the Multi Agency Sexual Exploitation (MASE) Group is operational and meets 6 weekly.

The prevalence of domestic violence is impacting on the increases in social care demand. Domestic violence is a significant issue in Barking and Dagenham with the highest reported rate of domestic abuse offences across London again in 2014/15 – 28 recorded incidents per 1,000 population. Using year to date totals, there was an increase of 627 domestic violence crimes reported in April 2014 to March 2015 when compared to the previous year - 2,618 compared to 1,991. This represents an increase of 31.5%. Domestic violence is a factor that features in the very large majority of our open social care cases.

To reduce the level of domestic violence, Barking and Dagenham is the first local authority in London to use the Domestic Violence Protection notice. When police attend a domestic violence call out they can issue the notice to the alleged perpetrator, which bans them from attending the premises for 28 days. If breached the individual is arrested and taken to court and there is the possibility of a prison sentence. Domestic Abuse is a priority for the LSCB for the next year and an annual report has been requested from MARAC for next year to provide the LSCB with information and assurance on work during the year.

Private fostering is defined as an arrangement "whereby a child under the age of 16 years (or 18 if they are disabled) is looked after for 28 days or more in any one year by someone other than a close relative".

The LSCB has continued to raise awareness of private fostering so that children who are being cared for in this way are identified. The Private Fostering annual report was presented to the LSCB along with a detailed presentation in order to raise awareness of private fostering among LSCB members. Private Fostering was also an integral part of the Alternative Child Rearing Practices briefing provided for front line practitioners in November 2014. Private Fostering numbers and timeliness of assessments are reported quarterly to the Performance & Quality Assurance group and monthly at the Complex Needs & Social Care divisional management performance meetings. Local data is compared to national data. During the year there were 26 new notifications resulting in 18 active private fostering cases that dropped to 10 at the end of March 2015, however, this remains in line with benchmark data. Compliance with visiting within 7 days was 96% and with 6 weekly visits was 100%.

During the year partnership attendance has been good at Board meetings. The LSCB structure has remained unchanged and has met the priorities for the Board. The main Board programme for 14/15 has focused on the sub groups and each Board meeting has had a sub group 'challenge' presentation as its main event. This has allowed Board members to more fully understand the work of the sub groups and to offer 'challenge'.

The culture of challenge within which the Board operates has continued to strengthen this year. The Performance & Quality Assurance group receives individual data reports from statutory partners and actively challenges agencies about practice issues or where there are

genuine concerns about the effectiveness of multi-agency working or practice within a particular agency.

In terms of overall governance at a strategic level, the LSCB has forged a stronger link with the Health & Wellbeing Board by the LSCB chair attending meetings and also attending Children's Trust meetings. Formal protocols have been developed over the course of the year to underline respective roles and responsibilities especially in areas that are a shared priority.

The Independent chair of the LSCB has had regular meetings with the Council's Chief Executive, lead member for children's social care, education and Adult services and key local decision makers.

## **CHAPTER 2: Local Background & Context**

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Barking & Dagenham is an outer London Borough situated in the East of London with an estimated population of 203,173.

In the last 10 years, Barking and Dagenham has experienced rapid population growth, linked to new housing development, birth rate changes and the impact of welfare reforms. The population structure has changed significantly with particularly large increases in the numbers of younger people living in the borough. According to the 2011 census the population of the borough has increased by 22,000 (13.4%) between the 2001 and 2011 Census.

The largest local demographic change has been the growth in the 0-4 year old population. Alongside a population increase, the borough has experienced a rapid shift in the proportions of ethnic groups, with a large decrease in the white British ethnic group and a large increase in the black African ethnic group, particularly those children under 5. The population of the borough continues to be one of the fastest growing in the country and across London, placing great pressures on early education, school places, housing and all other services.

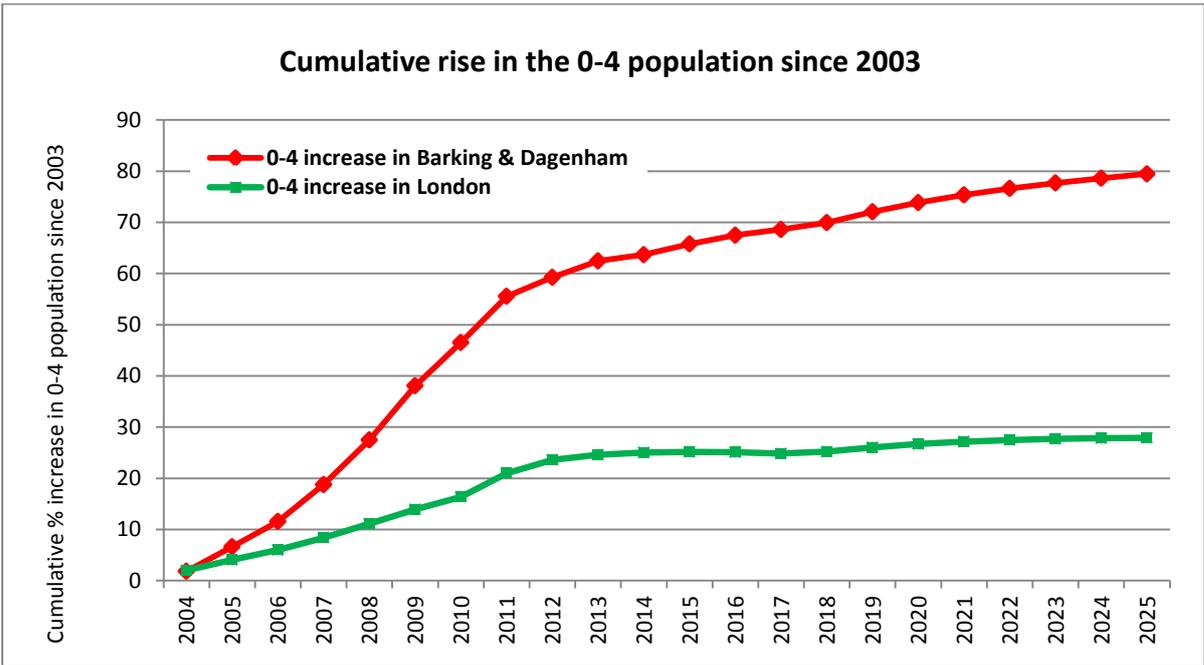
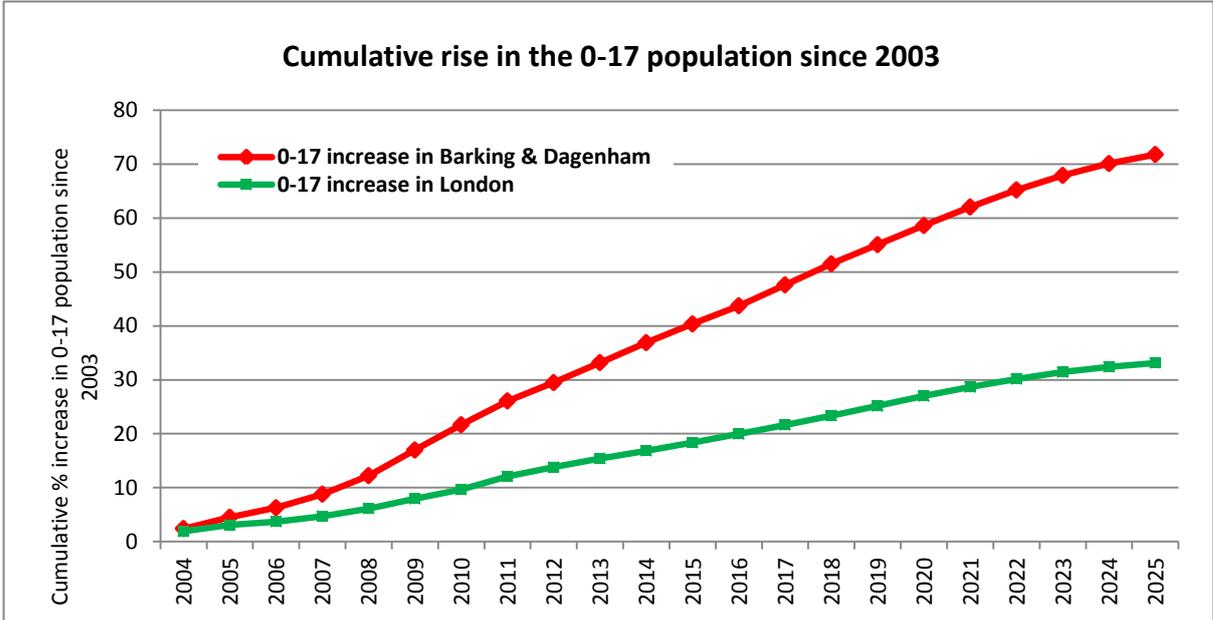
The charts below illustrate the rate of increase in the population of 0-17 and 0-4 year old children in Barking and Dagenham compared to the London wide rate of increase.

2003 has been used as a baseline year for the purposes of the charts and this shows that the 0-17 population increased by 17,356 between 2003 and 2015 in Barking and Dagenham; by 2025 this figure will have increased by 30,864 to a total of 73,853.

In percentage terms, the cumulative increase in the 0-17 population will be 72%, far higher than the equivalent increase for the whole of London (33%).

The second chart below shows that the 0-4 population increased by 66% between 2003 and 2015, considerably higher than the 25% increase across London.

The 0-4 population will have increased by 79% in Barking and Dagenham in the twenty or so years from 2003 to 2025 compared to the London average increase of only 28%.



**What we know**

- The borough has the highest population percentage of children and young people aged 0 to 19 at 31% in England and Wales.
- There has been almost a 50% growth in 0-4 year olds.
- There has been a 20% decrease in the 65+ age group, and this accounts for one of the smallest percentages of the borough population in England and Wales. There has also been a small increase in the number of people aged over 85 between 2001 and 2011.
- There has been a large decrease in the white population from 80.86% in 2001 to 49.46% in 2011.

- The Black African population has risen from 4.44% to 15.43%.
- There has been a significant rise in the Bangladeshi population from 673 in 2001 to 7,701 in 2011.
- There has been an increase in numbers for all religious groups in the borough, except Christian and Jewish religions.
- The number of Muslims has seen the most significant growth with the proportion rising from 4.36% to 13.73%.
- There are now significantly less people with no qualifications representing a 14.4% drop in numbers between 2001 and 2011.
- Lone parent households with dependent children have seen a large increase with Barking and Dagenham now having the highest percentage of lone parent households in England and Wales at 14.3%. This is much higher than in other parts of London and England as a whole
- There has been a big rise in Private Renting from 5.19% in 2001 to 16.59 in 2011.
- 6.6% of Barking and Dagenham residents aged 16-64 believe that their day to day activities are limited a lot because of a health problem or disability including problems related to old age, which is slightly higher than the London average of 5.6%.
- Between 5-7 % of the population are Lesbian, Gay or Bisexual.
- The 2011 Census recorded 138 Same Sex Civil Partnerships; this represents 0.2% of the borough's population.
- Barking and Dagenham still experiences higher than average levels of deprivation ranking 7th most deprived in London and 22nd most deprived nationally and our residents are not as healthy as they should be. Compared to other parts of the country they do not live as long.
- The borough is currently predicted to have a population count of 230,000 in 2021 which is an increase of 43,000 people (ONS SNPP)

## Local Services

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In recent years many parts of the public sector have been experiencing an unprecedented period of change as a result of the national economic situation and changes in government policy. This change has had an impact locally and many partner agencies represented on the LSCB have undergone significant structural developments and fundamental changes to the way in which they work and contribute to the LSCB.

### Multi Agency Safeguarding Hub (MASH) implementation

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On the 1<sup>st</sup> April 2014, Barking and Dagenham launched its MASH. This saw partners from Metropolitan Police, Social Care, Health, Education, Targeted Support, Housing, Youth Offending, Adult Mental Health, CAMHS and Probation come together to form a multi agency safeguarding hub. MASH is the borough's front door into Social Care and ensures that comprehensive risk assessments, with agency relevant input, result in families accessing the right level of support at the right time.

Barking and Dagenham receive significant numbers of contacts into the front door of social care. These can be from members of the public or professionals across all agencies. The Ofsted inspection of services for children in need of help and protection, children looked after and care leavers carried out in the summer of 2014 also reported positively on MASH.

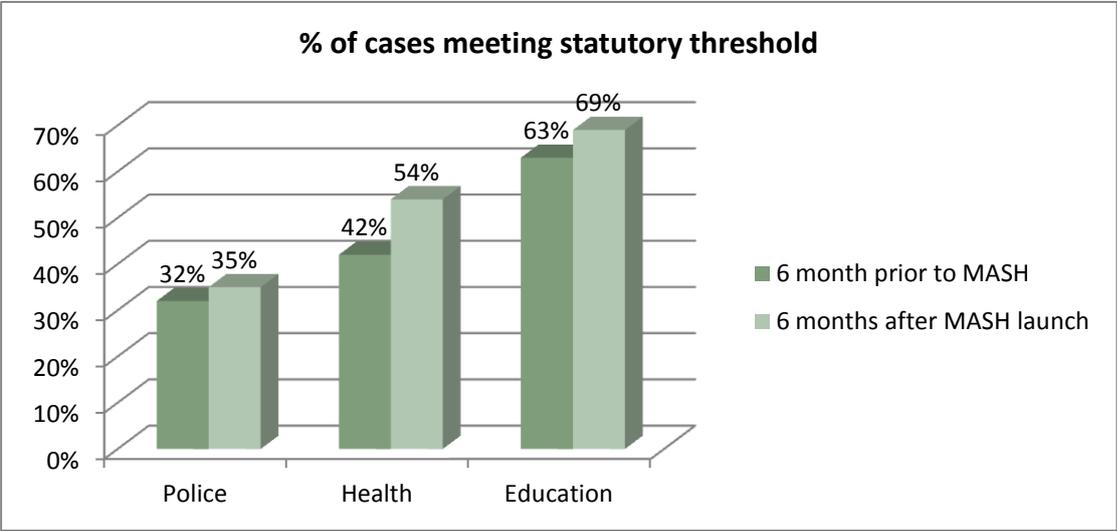
The report stated that *“Information sharing between agencies and professionals is timely and effective within the ‘triage’ and multi-agency safeguarding hub (MASH). The recent co-location of children’s social care, health, the police, including a child sexual exploitation officer, and multi-agency panel (MAP) coordinator, is effective in supporting all key services to be fully informed and involved in plans for these children”* (Ofsted, July 2014).

An evaluation of MASH was undertaken in house 6 months following implementation. Overall, early findings were positive. Since MASH launched in April 2014, the front door to Social Care has reported a reduction in contacts. The average across the 6 months prior to MASH launching was 711 contacts per month. In the 6 months, following MASH being launched, there was an average of 621 per month.

Early evidence suggests this may be as a result of closer working arrangements with partner agencies and enhanced understanding of child protection thresholds. The largest single referrers into the Front Door – Police, Education and Health – referred 20% less in the 6 months after MASH launched, compared to the 6 month period prior.

In the 6 months prior to MASH launching, only **34%** of all contacts into the Front Door hit the threshold for statutory assessment within Social Care. Meaning **66%** had no significant safeguarding concerns following MASH screening and risk assessment.

In the 6 month period following MASH launching, **54%** of all contacts met the threshold for statutory Social Care assessment.



**MASH Impact**

- The impact of MASH can be measured by looking at the shift in RAG Ratings from when a case enters MASH, compared to when it exits. All MASH cases are given a Red, Amber or Green (RAG) rating at the point of entering MASH, then again upon exiting MASH, based on the risk assessment carried out. The RAG rating also provides those agencies who are asked to feed into the risk assessment, a timeframe based on the level of case concern.

- 314 cases in Q1 2014/15 and 422 cases in Q2 2014/15 entered LBBB's MASH, being deemed in need of additional multi agency information. A total of 736 cases across the 6 month period.
- Following MASH risk assessment, there was a balance of 174 cases less within Social Care. This represents those cases that entered MASH as either Amber or Red, but existed as Green, thereby accessing Early Help provision rather than statutory intervention.
- The biggest shift in risk assessment, following a MASH investigation, was with cases entering as Amber (Section 17) and exiting as Green (Early Help). This represents 178 cases, or 20% of all cases entering MASH in the 6 month period.

## Complex Needs & Children's Social Care

Complex Needs & Children's Social Care provides a range of services for children and young people who are in need, at risk of harm and in need of protection and children who are looked after. The children and young people will have needs assessed as being complex or acute and require the statutory involvement of the local authority within the responsibilities set out in legislation and national guidance.

The safeguarding activity for the year 2014/15 has been driven by the plan for improvement that followed the inspection of services carried out by Ofsted in May 2014. Services to children were judged to 'require improvement'.

Alongside identifying key areas of safeguarding activity, a range of measures have been put in place as an approach to performance and quality assurance.

### Summary

Key activities	2013/14	2014/15	% change
Referrals	3126	3950	+26%
Open cases	2184	2356	+8%
Assessments	2429	2998	+23%
Children in Need	1189	1388	+17%
S47's	1231	1222	See below
Children subject to a CP plan	318	354	+11%
Children see (CP)	93%	95.4%	+1.65%
CP plans > 2 years	11	3	-2.7%
CP plans 2 <sup>nd</sup> time	50	65	+3.5%
Core Groups	34%	86%	+52%
Police Protection	134 (43%)	69 (25%)	-18%

### S47

The number of S47 inquiries carried out during 2014/15 was 1222 at a rate of 214 per 10,000. This compares with 1231 inquiries during 2013/14 which was at a rate of 216 per 10,000. The rate of 214 is high in comparison with national and London statistics and will be the focus of LSCB work over the following year.

### **Main achievements & areas of strength**

The service has seen significant overall improvement in performance. A weekly dashboard has had a noticeable impact as a working tool for managers and social workers, enabling positive performance to be highlighted whilst also focusing on performance where corrective action is required.

Significant progress has been made by working closely with police colleagues to reduce the number of children admitted to care through the use of Police Powers of Protection.

Work on the introduction of the single assessment is well underway as part of the need to improve the quality and timeliness of assessments.

There has been a focus on ensuring that strategy discussions and meetings take place, involve partner agencies and are recorded.

During the year a revised supervision framework was launched which sets out standards for supervision along with expectations on managers and staff. In January an audit checked supervision agreements and dates of supervision.

Whilst all staff have access to the London CP Procedures, work has been undertaken to put in place an on line manual of procedures. This provides procedures, policies and protocols in one central place and is also a source of links to legislation and good practice.

The Multi Agency Referral Form (MARF) has been strengthened to improve the quality of referrals and advice and support for agencies.

Two cohorts of 8 newly qualified social workers have been through the Assessed and Supported Year of Employment (ASYE) and further cohorts are planned during the coming year.

### **Areas of concern and development**

The rate of referral continues to rise. This is recognised as being in the context of a high population of children and young people aged between 0-17 years of age. This presents a challenge for the children's social care 'front door'. The increased rate of referrals can be viewed as being positive in that safeguarding needs are being identified and referred for intervention. However, this also raises a challenge to partner agencies delivering universal and targeted services to provide capacity and align resources to meet needs at an earlier point that may avoid escalation for a statutory service.

The rate of S47 inquiries is higher than statistical neighbours, other London boroughs and the national average.

Analysis shows that 38% (467) children of the cases managed as S47 were assessed as not being at risk. This requires further analysis and discussion.

Caseloads are higher than planned and feedback from exit interviews indicates that this is a significant reason for staff leaving the service. The number of open cases at year end was 2356 increased from 2184 at year end 13/14. The target of 20 cases remains but demand for statutory involvement continues to be high and will impact upon caseloads.

Recruitment of social workers remains a challenge. Whilst additional social work posts have been agreed the vacancy level for permanent qualified social workers is high at 55%. There is an over reliance upon agency social workers most of whom have been in post over a year but the council have a workforce plan in place to recruit and retain social workers.

The performance activity for the year demonstrates the increased safeguarding requirements and improvements. The council has allocated additional resources to create additional social work and manager positions. However, there is a need for the LSCB to consider multi agency solutions to the ongoing need.

## Integrated Early Help

The LSCB has underlined its commitment to Early Help by setting up an Early Help sub group in 2014. The group has produced an Early Help strategy (2014-18) which sets out the key areas of priority, partnership working and shared resources. This strategy is overseen by both the LSCB and the Children's Trust.

In 2014 Ofsted reported that early help services were a key strength in the borough supporting large numbers of children and their families.

Now systems are in place and embedded in a number of key settings the focus has been on measuring the impact of the services and early help interventions. This will also provide the opportunity to learn about strengths and gaps in provision and to build requirements into future commissioning arrangements.

During the year the Early Help service has carried out audits looking at Early Help, Case Review and Learning and a Child's Journey. This work has provided information about the strengths and needs of the services. In some areas there has been direct feedback from families which has provided evidence of how effective the Early Help work has been and what direct affect it has had on the children and families involved.

The following comments have been extracted from Early Help evaluation reports undertaken across 2014/15. Specifically a Team Alongside the Family (TAF) Review observation audit – Parent comment re support - "I would be very stressed and depressed and wouldn't know what to do. I can now talk about anything that is worrying me and I am given support. Before I had the CAF I had no support and felt lost. I went to the Heathway Centre one day and just sat there, a worker approached me and spoke to me and offered support, I now feel much better".

Parent comment 2 - "Before I didn't know what to do as I was lost. It wasn't easy when the children's mum passed away and they came to live with me in a single room. Having support through all systems has helped me to understand my daughters and improve communication between us. My children have been involved with the process throughout. Thank you for what they did for me and my family. If they weren't there I don't know what would have happened. This has made me more confident as a parent".

For full early help audit and evaluation work for 2014/15 follow this link:

<http://www.bardag-lscb.co.uk/Pages/EarlyHelp.aspx>

### CAF status up to 31<sup>st</sup> March 2015

CAF status	Number	%
Open	1163	26%
Closed	3284	74%
Total	4447	100%

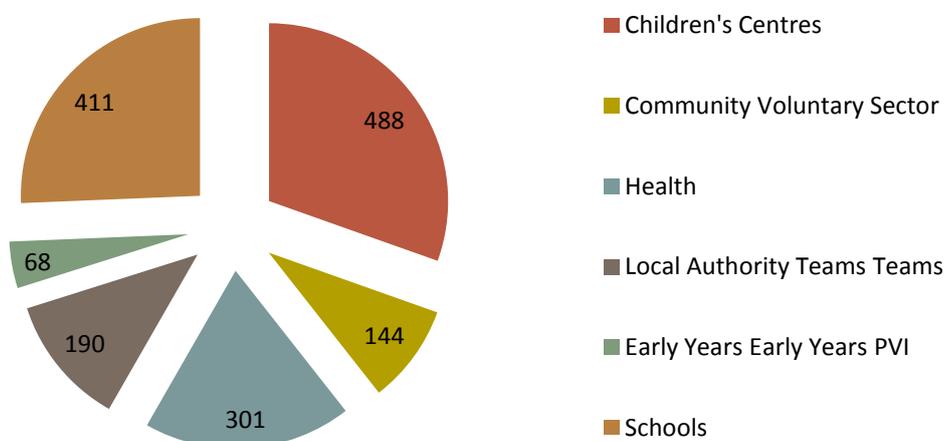
The table above sets out the number of children who have been supported through targeted support via a CAF or Family CAF. A CAF is intended to be a mechanism to provide quick and effective support to children and families. We would expect to see more cases closed than open as it indicates a quick and efficient turnaround of support. The majority of CAF's that closed did so as a result of needs successfully met: 1994 of the total closed (60%). Only 10% (312) cases escalated into Children's Social Care. The remaining 978 cases (30%) closed for a number of reasons; moving from the borough, consent removed, re-assessment required.

### Case Closure Breakdown



The chart below shows that out of all CAFs initiated (**1602**) between the ages of Pre-birth to 5 years old, the majority (**30%**) were initiated by Children's Centre staff. Health, which covered Community and Acute settings, represents **19%** of all CAFs initiated in this age range.

### CAF's initiated pre-birth to 5 years old (up to 31/3/15)



## **eCAF**

The eCAF system went live in October 2014 and is available to all front line practitioners who support children and families in their day to day work. Practitioner training started in September 2014 and at year end there are 257 users trained to use the system. Within 3 months of implementation there were more eCAF's initiated per quarter compared to paper CAF's.

## **Case Management System**

A bespoke Case Management System has been developed that will be used by teams outside statutory provision. This will enable practitioners to record work undertaken with children and families in one secure system. The Case Management System will go live in July 2015.

## **Traded Service**

From April 2015 the service developed a Traded Service model with schools in the borough. To date 90% of mainstream and academy schools have bought into the CAF and Integrated Early Help support package that demonstrates an ongoing commitment from schools.

## **Focus of work for 2015/16**

The focus of work for the coming year will be on the Multi Agency Panels (MAP's) and their ability to impact upon social care demand.

Key objectives include:

- Wider partnership involvement in cases and targeted support for children and families
- MAP co-ordination leading to more families being 'held' within the early help area
- Reduced inappropriate referrals into social care/MASH
- Evidence of early help impact on families escalated to MASH
- Higher quality CAF's resulting in a reduction in statutory assessments
- Timely step down of cases from social care via the step down pathway.

## **Troubled Families**

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The Government launched the Troubled Families programme in 2012 with the aim of 'turning around' the lives of 120,000 families nationally for whom numerous, uncoordinated and largely unsuccessful interventions had come at a high cost to the public purse. To be eligible for Phase 1, families had to meet at least two of three national criteria; anti-social behaviour / youth crime, school absenteeism and worklessness. Local authorities were able to set their own 'fourth criterion' to reflect local priorities.

Following the final Phase 1 claim period in May 2015, we have 'turned round' 100% of our families.

### **Phase 2 criteria**

As a successful Phase 1 authority, we were invited to be an Early Starter for Phase 2, which we agreed to do in August 2014.

The Department for Communities and Local Government (DCLG) radically redesigned the programme for 2015-2020 and to be eligible for Troubled Families Phase 2, families must meet 2 of 6 much broader criteria, namely:

- parents and children involved in crime or antisocial behaviour;
- children who have not been attending school regularly;
- children who need help;
- adults out of work or at risk of financial exclusion or young people at risk of worklessness;
- families affected by domestic violence and abuse;
- Parents and children with a range of health problems.

The onus on the LA in Troubled Families 2 will be to evidence 'significant and sustained' progress against the problems identified. The electronic Common Assessment Framework tool (eCAF) is being amended to create an electronic Family CAF (eFCAF) which will signal eligibility, store evidence and trigger claims. We hope that this will be operational by June 2015 and progress will be monitored through LSCB and included in next year's annual report

## Metropolitan Police

The contribution to the LSCB in Barking & Dagenham by the Metropolitan Police Service (MPS) is two fold. The local Borough Police have a responsibility for the initial investigation of all crime and people at risk.

Once the initial investigation has been conducted the ongoing responsibility for them is split. The Specialist Crime and Operations Command within the MPS is home to the Sexual Offences, Exploitation and Child Abuse Unit (SCO17).

The Child Abuse Investigation teams (CAIT) fall within SCO 17 and their remit is to investigate abuse committed within families as well as by professionals and other carers in paid or unpaid roles. The investigations, conducted in co-operation with local authorities and other agencies can include allegations of recent offences as well as historical ones where the victim is now an adult.

The Borough Police have responsibility for identifying and reporting Child Sexual Exploitation (CSE).

Within the broad functions of crime prevention, crime detection and assistance provided for risk assessments, CAIT's have several distinct functions. The basic principle of the child is always paramount is always the primary consideration in any decision made or action taken. All allegations of crime within the scope of 'child abuse' is recorded and investigated in co-operation with the local authority and other agencies.

All CAIT staff has completed the Specialist Child Abuse Investigators Development Programme and Achieving Best Evidence (ABE) training.

The MPS have standing operating procedures that dictate how officers and police staff should deal with safeguarding concerns. Barking & Dagenham CAIT has a strong working relationship with other safeguarding partnership agencies. They also have a dedicated team of police staff deployed to represent the MPS at child protection conferences and to produce reports for them.

## Performance

Figures	Crimes	Detections	Target
All offences	882	203 (23%)	22%
Rape	32	8 (25%)	22%
Serious Sexual Offences	93	18 (19%)	22%
Violence with Injury	236	55 (23%)	22%
Neglect	224	74 (33%)	22%

(The extra crimes include common assaults)

Initial Child protection Conferences – 44% attended (target 100%)

Review Child Protection Conferences – 6% attended (target 50%)

Strategy discussions 654 – 83.3% within 24 hours (545)

Figures show there has been a 21% annual increase in reported offences.

CAIT have struggled to attend Child Protection Conferences during the year due to staff vacancies. The LSCB Chair has escalated her concerns re attendance to the Police Commissioner which has resulted in meetings with his team and open conversations regarding workforce and improved attendance

However, as staffing levels have increased so has performance – the attendance at initial child protection conferences for February 2015 was 89%. The senior leadership teams continue to review processes to establish if video/phone conferencing can be implemented to increase attendance and compliance.

### Main achievements and areas of strength

The MPS constantly reviews its commitment and development of policies to safeguard children and has developed new requirements on the Crime Reporting Investigation System (CRIS) to ask questions of reporting and investigating officers relating to risk factors to consider when making safeguarding decisions. The partnership team actively seeks the views of partner agencies regarding local CAIT teams and reviews the effectiveness of partnership working as stipulated in “Working Together to Safeguard Children 2015”.

### Main areas of concern and issues for development in relation to safeguarding

The main issue facing CAIT in the past year has been a lack of trained police staff to cope with the rise in reported incidents. This has impacted on performance and particularly child protection case conference attendance.

In the short term Barking & Dagenham CAIT has catered for this by utilising police officers who were working on attachment to the team. The long term goal is to increase trained staff and CAIT is in the process of recruiting more police officers to fill vacancies. This will continue to be monitored as crime & staff workloads increase.

### Key messages / recommendations for LSCB Priorities

- CAIT reported incidents have continued to rise over the last 3 years. CAIT senior managers continue to address staff vacancies to meet that demand.
- CAIT's recommendation to the board is to review working practices regarding case conferences to consider video / phone conferencing.

## Barking, Havering & Redbridge University Hospitals NHS Trust (BHRUT)

BHRUT has established robust systems and processes to ensure there is a timely and proportional response when safeguarding concerns are raised when a child/children are considered to be at risk or likely to be at risk of "Significant Harm". This is in light of CQC inspection and the associated improvement plan. BHRUT have reported on progress in respect of arrangements to safeguard children to the LSCB

The Safeguarding Children's Team is fully established and comprises of:

Full time Named Nurse

Full time Named Midwife

Full time Named Doctor for Safeguarding Children

Full time Paediatric Liaison Nurse/Child Death Co-ordinator

Full time Team Secretary

The Deputy Chief Nurse line manages the Named Nurse Safeguarding Children and Named Midwife on behalf of the Chief Nurse, who has Executive responsibility for safeguarding.

### **SAFEGUARDING CHILDREN'S TRAINING**

Safeguarding Children's Level 1, 2 and 3 compliance is monitored at the Trust's Safeguarding Children's Operational and Safeguarding Strategic & Assurance Group meetings.

For the reporting period a 2014/15 Safeguarding Children's Training Needs Analysis (TNA) & Strategy was approved by the Trust's Safeguarding Children's Operational and Safeguarding Strategic & Assurance Groups. The TNA was reviewed in March 2015, due to legislative changes as per Working Together 3<sup>rd</sup> Edition March 2015.

### **SAFEGUARDING CHILDREN'S SUPERVISION**

Safeguarding Children's Supervision has been embedded in the Trust, in paediatric, midwifery and sexual health departments, since June 2013 and during 2014/2015 progress has been made in ensuring more staff are trained in order to facilitate supervision training across the Trust.

### **SAFEGUARDING CHILDREN AUDITS**

A rolling programme of Safeguarding Children audits has been in place during the reporting period.

Audit results are presented at the Safeguarding Children's Operational Group and exceptions reported to the Safeguarding Strategic & Assurance Group

### **SECTION 11**

The Trust is compliant with Section 11 requirements, as set out in Working Together (2015) and last presented its Section 11 progress report to Barking & Dagenham LSCB in August

2014. The Trust is fully compliant with Section 11 requirements and progress on all 8 standards is reported quarterly to the Trust's Safeguarding Strategic & Assurance Group.

### **PARTNERSHIP WORKING**

The Trust continues to demonstrate a high level of commitment to partnership working through active participation in key safeguarding meetings. BHRUT is represented at the Barking & Dagenham Local Safeguarding Children's Board meetings by either the Trust's Deputy Chief Nurse or in his absence the Safeguarding Children's Named Nurse.

The Trust's Named Professionals are also members of a number of external safeguarding subgroup meetings.

The Trust's Psychosocial meeting (weekly) and Maternity Partnership meeting (monthly) act as forums for interagency working.

### **MATERNITY SERVICES**

The Trust's Maternity Department has a robust risk assessment in place to ensure vulnerable families are identified early in pregnancy and appropriately referred to services, with the aim of ensuring good support is in place prior to the birth of a new baby. Detailed care plans are maintained on the maternity electronic system to inform staff of concerns and action to be taken post delivery.

### **MAIN ACHIEVEMENTS & AREAS OF STRENGTH**

- Achieved Key Performance Indicators of >85% in Level 1 and 2 Safeguarding Children's training compliance.
- The development of a Domestic Abuse Training Pack for Emergency Department Clinicians (June 2014) and the implementation of a Pathway of Management of Domestic Abuse in the Emergency Department (August 2014).
- Implementation of Pathway for the Management of Children with Safeguarding Concerns in the Emergency Departments (June 2014) and a Clinical Pathway for managing children with mental health and self harm.
- Domestic abuse training continues within the mandatory level 2 and 3 safeguarding children's training and at Trust induction. An e-learning package has also been developed.
- Implementation of a mandatory Safeguarding Screening Tool for all children who present to the Emergency Departments cross site (April 2014).
- Integration of Level 2 and 3 Children's Safeguarding Training into the Emergency Department Junior Doctor teaching programme, including domestic violence training.
- Review of Psychosocial meetings which have demonstrated effective interagency working.
- Reinstatement of IDVA service specifically linked to the Emergency Department and Maternity Service since March 2015.
- Introduction of the FGM monitoring question for all pregnant girls/women.
- Review of all Safeguarding Policies in line with National Legislation changes and the development of four new policies: Child Sexual Exploitation, Female Genital Mutilation, PREVENT, and Managing Allegations against Volunteers/Staff including establishing a confidential database of allegations.

- Development of Pathways for Child Sexual Exploitation (CSE) and Female Genital Mutilation (FGM).
- Revision of all documents relating to Child Deaths (0-18 years), which have been cascaded to all clinical areas.
- Review of the Trust Child Protection web pages (internal and external).

#### **LONG AND SHORT TERM RISKS & PRIORITIES & ACTIONS TAKEN**

- **To develop practice in responding to Domestic Violence/Sexual Violence and Abuse in line with the Publication of the NICE Guidelines March 2014**

##### **Actions:**

The Trust's Named Midwife has been nominated as the Trust's Domestic Abuse Champion and is a member of the B&D Domestic Violence/Sexual Violence Group.

The Trust is reviewing its approach to managing Domestic Abuse, which includes developing a Trust wide Domestic Abuse Policy.

- **At least 85% of eligible staff to attend Level 3 safeguarding children's training.**

##### **Actions:**

Regular monitoring by the Deputy Chief Nurse/Head of Safeguarding and compliance reported at the Trust's Safeguarding Children's Operational and Safeguarding Strategic & Assurance Group meetings.

Compliance monitored at the Trust's monthly Divisional Performance meetings.

- **To develop staff awareness of harmful practice i.e. Child Sexual Exploitation (CSE) Trafficking and Female Genital Mutilation (FGM)**

##### **Actions:**

To establish FGM/CSE Leads in all relevant clinical areas.

Quarterly FGM/CSE meetings to be established and chaired by the Trust's Deputy Chief Nurse/Head of Safeguarding.

#### **Barking and Dagenham Clinical Commissioning Group (BDCCG)**

The Barking and Dagenham, Havering and Redbridge CCG (BHRCCG) Safeguarding Assurance Committee meets monthly and its purpose is to provide assurances to the three CCG governing bodies that they are meeting their statutory responsibilities with regards to safeguarding children and young people. It is chaired by the Nurse Director who is the Board lead with responsibility for Safeguarding

In addition, Clinical Quality Review Meetings (CQRM) between the commissioners and providers are held on a regular basis and this is the opportunity to challenge data and

monitor provider services in respect of their safeguarding responsibilities BHRCCG Governing Body receives regular quality reports including safeguarding.

Although the CCG is not directly involved in undertaking multi agency audits there is the opportunity as a member of the Performance Management and Quality Assurance Subgroup to influence areas for audit, acknowledging good practice, scrutiny and challenge and monitoring the implementation of action plans.

### **Quality and Effectiveness of Safeguarding Arrangements and Practice**

The CCG has a governance structure for safeguarding with the Chief Officer assuming ultimate responsibility for safeguarding. The Nurse Director for Quality and Governance is the CCG executive lead for safeguarding and is a member of the BDSCB executive board.

In line with Working Together 2015, the CCG employs a designated doctor and designated nurse with specific responsibility for safeguarding children and young people and Looked after Children. The CCG also employs a designated doctor. This post spans the three local authorities (Barking, Havering & Redbridge) for Looked after Children and the LSCB Chair has escalated her concerns regarding capacity to achieve this to both the CCG and NHS England (London)

BDCCG Safeguarding Children and Young People Policy was reviewed, revised and ratified on 2 April 2014, in addition BHRCCGs safeguarding children team are in the process of developing a Safeguarding Strategy 2015 -2018.

### **Main achievements and areas of strength**

The substantive post for Designated Doctor Safeguarding Children has been recruited to from 2 January 2015. The substantive combined post for Designated Nurse, Safeguarding Children Barking and Dagenham and Looked after Children (LAC) for Barking and Dagenham, Havering and Redbridge has also been recruited too with the post holder starting on 1 April 2015. BHRCCGs have also recruited an interim Designated Doctor for LAC across the three Boroughs, which has been in post since 5 December 2014.

The CCG has on-going scrutiny of provider functions with regards to safeguarding children.

The Designated Doctor for LAC has reviewed and revised the LAC specification and more robust contract monitoring processes are in place for 2015/16.

BDCCG has a Patient Engagement Forum (PEF) which meets bi-monthly, young people are invited to participate and are drawn from the Barking and Dagenham Young Peoples Forum. The CCG builds partnerships with patients and the public, not only as the recipients of care, but also to involve the whole community in the CCG's vision, priorities and plans.

### **Key messages / recommendations for LSCB Priorities**

- To continue to work with the partnership agencies to improve outcomes for children and young people.

- To ensure there are robust contract and reviewing processes for services commissioned by the CCG and to work closely with other health services commissioners
- To ensure robust systems are in place across the designated children looked after roles and provider services to improve the quality and timeliness of health assessments for children looked after.

## North East London Foundation Trust (NELFT)

NELFT provides an extensive range of mental health and community health services for people living in the London boroughs of Waltham Forest, Redbridge, Barking and Dagenham and Havering, and community health services for people living in the areas of Basildon & Brentwood and Thurrock. Community services include community paediatrics, health visiting, district and school nursing, therapies, care and support for people living with long term conditions such as diabetes and other services such as blood testing, foot care and children's audiology.

NELFT is registered as a provider with the Care Quality Commission (CQC) in order to be able to operate and deliver services. As a condition of registration, NELFT is required to demonstrate that the essential standards of safety and quality, set out under the Health and Social Care Act 2008, are being met and will continue to be met. The Trust is subject, at any time, to unannounced inspection by the CQC against any of the essential standards for quality and safety, one of which is safeguarding. As part of the CQC requirements an NHS provider compliance assessment in relation to Outcome 7 (Regulation 11) has been completed and evidence collated.

The Chief Nurse & Executive Director of Integrated Care Essex is the executive lead and board member for safeguarding. The Chief Nurse has Board level responsibility for safeguarding adults and children, LAC and Prevent, which is the health service component of Contest; the British governments counter terrorism strategy.

The Safeguarding Team acts on the Chief Nurses behalf to ensure that the Board is assured that all necessary measures are taken to safeguard adults and children at risk. The Director of Nursing, Patient Safety is the Strategic Lead for Safeguarding and together with the Associate Director of Safeguarding Children and LAC supports the management oversight of safeguarding issues in relation to vulnerable adults and children.

NELFT Safeguarding Children Team provided a co-ordinated response in October 2014 to the following Chapters in Part B, London Child Protection Practice Guidance and consulted with relevant stakeholders:

- Safeguarding children missing from care, home and education
- Safeguarding children: The role of the National Health Service (NHS) and all independent and third sector health services in London
- Thresholds: A Continuum of Help and Support

The Intercollegiate Document – Safeguarding Children & Young People: roles and competencies for health care staff Third Edition, March 2014 has been reviewed and a draft

action plan was developed. Key to note is the ability to undertake Level 2 Safeguarding Training online.

NELFT responded to the Children and Young People's Mental Health and Wellbeing Taskforce consultation on how mental health services could be improved for children and young people. The consultation looked at data and standards, access and prevention, a co-ordinated system and vulnerable groups and inequalities.

A NELFT response to the April 2015 consultation of the inspection process for multi-agency arrangements in respect of the six specific proposals was submitted in September 2014.

### **Main achievements and areas of strength**

Child Protection Training and Child Protection Supervision Quality Indicators targets have been achieved and maintained during the reporting period.

The Safeguarding Supervision Policy has been reviewed and updated in response to Quality of Supervision audits outcomes. Quarterly supervisor network meetings are held and learning from audits are disseminated and have prompted the strengthening of the delivery of safeguarding children supervision by developing an induction programme for safeguarding children supervisors to support practitioners in this key role. A competency framework for supervisors was established in Q3.

The NELFT audit programme forms part of NELFT's systematic programme of quality assurance. The Safeguarding Children's team undertakes regular audits of the Trust's child protection systems and processes. Emerging learning from these audits are communicated back to the organisation through the safeguarding governance arrangements and integrated into training and dissemination of learning events delivered by the Safeguarding Children Team. Barking and Dagenham have completed a Section 11 audit and developed an action plan to address areas for improvement.

The Safeguarding Children Team and NELFT practitioners have actively participated in both SCR and Practitioners Forums. NELFT has worked in partnership with LBBD to look at lessons learned from cases and implement actions arising from these reviews.

### **Main areas of concern and issues for development in relation to safeguarding.**

With the changing demographics and increase in safeguarding activity in Barking and Dagenham, NELFT needs to ensure that staff have the appropriate skills and competencies and are appropriately supported in their safeguarding role.

Collaborative working with the Strategic Lead for Domestic Abuse and Harmful practices will continue to progress the actions identified in the Rotherham and other key enquiries around Child Sexual Exploitation.

Integrated working across the adult and children safeguarding teams will be further embedded to support an increase in the numbers of referrals to MARAC.

The need for further improvement in access to and quality of advice and support in relation to safeguarding adults and children for NELFT staff and multi-agency colleagues has been recognised.

#### **Key messages / recommendations for LSCB Priorities**

- Completion of the Paediatric Liaison Process Review.
- Continue to provide support to areas receiving unannounced Safeguarding & LAC CQC and Ofsted inspection.
- Children living within the NELFT health economy experience a reduced risk of exposure to domestic violence and other forms of abuse.
- Provision of a single point of contact for advice and support via a NELFT wide safeguarding duty desk

### **CAFCASS**

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CAFCASS (the Children and Family Court Advisory and Support Service) is a non-departmental public body sponsored by the Ministry of Justice. The function of CAFCASS within the family courts, as set out in the Criminal Justice and Court Services Act, is to: safeguard and promote the welfare of children; provide advice to the court; make provision for children to be represented; and provide information and support to children and their families.

#### **Brief description of safeguarding activity over reporting period – April 2014 – March 2015**

A key focus during 2014/15 was ‘getting to good’ – building on our “good” Ofsted judgement of April 2014. This included an action plan derived from the Ofsted report. A national audit in November 2014 established that all of the following actions had been met:

- To improve the minority of safeguarding letters which are not yet fit for purpose:
- Improve effectiveness of efforts to contact parties. Where sufficient efforts have been made these should be better recorded:
- Ensure that in all private law work casework begins as early as possible once a Family Court Adviser (FCA) has been allocated:
- Improve the percentage of “good” work in private law work after first hearing (WAFH) in London:
- Improve further the analysis in the report to the court and ensure that all relevant information is pulled through in to the report based on research

We continue to respond to, and facilitate, developments within the family justice system and in particular the move, in private law towards supporting parents, where possible, to make safe decisions outside of court proceedings. We are currently piloting a programme announced by the MoJ, to provide advice and to encourage out of court pathways for separating parents, where it is safe to do so. The supporting separating parent in dispute (SSPID) helpline was launched in November 2014. Callers are put through to a Cafcass practitioner who can talk through the difficulties of separation, offering support, guidance, and information. We also ran a six month pilot of a safeguarding advisory support service for mediators, aimed at providing support in cases featuring child protection concerns.

A significant emerging issue in recent years has been child sexual exploitation (CSE), We are implementing a CSE strategy which involves consolidating systems to capture data on CSE in cases known to us; providing mandatory training on CSE to our staff, running workshops to increase awareness; reviewing policy guidance to staff; creating dedicated management time to support the delivery of the strategy at a national level; and creating CSE ambassadors within each service area.

#### **Quality and Effectiveness of Safeguarding Arrangements and Practice**

Cafcass has a robust programme of internal audits to assure the effectiveness of safeguarding in both public and private law. We provide tools for practitioners to use in self-assessment in order to benchmark the quality of their own work, and these tools are also used by managers and auditors as an evidence base for assessment. Throughout all the tools there is a consistent focus on assessing risk and whether appropriate actions have been taken after the assessment of risk. Actions by practitioners and managers are further scrutinised by senior operational managers via a monthly sample of closed files and the observation of one Performance Learning Review per manager, per annum.

Further assurance is provided through yearly national audits and our Key Performance Indicators (KPIs). A national audit of practice was undertaken in November 2014 with the objective of providing a snapshot assessment of the standard of casework. The audit measured the progress of work since the audit in September 2013 and the Ofsted inspection of April 2014. The conclusions were positive, reporting the percentage of work graded as “good” at 65%. This represents a significant improvement of 16% from the previous year’s audit.

We will undertake three thematic audits in 2015/16, focusing on further improvements required. These will look at the extent of the improvement in the joint working between the Independent Reviewing Officer (IRO) and the Guardian; the Guardian’s involvement and agreement to any position statement filed in proceedings; and evidence in WAFH of the improvement in analysis of assessment and increased use of research and tools.

Alongside our internal methods of quality assurance, we record and disseminate learning identified within service user correspondence, including correspondence received from children and young people. The learning points are fed back to the National Improvement Service (NIS) which maintains a national learning log, updated and disseminated throughout the organisation on a quarterly basis. The learning log sets out clear action plans designed to improve safeguarding practice and systems across the organisation.

Further scrutiny is given to our safeguarding practice and processes by the Family Justice Young People’s Board (FJYPB) comprising young people with direct experience of the family court. The FJYPB contribute to our publications, review our resources for direct work with children, and are involved in the recruitment of frontline staff. Board members also review the complaints we receive from children and young people.

## Barking & Dagenham LSCB Lay Member report

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I have found my role as Lay Member interesting and challenging over the last year. I see my role is to act as an ambassador to build stronger ties between the LSCB and the local community by both informing them of the work that the board does and ensuring transparency whilst doing this.

To ensure that local people living in Barking & Dagenham have an awareness of the board and to assist them to become more equipped in understanding safeguarding I have completed PowerPoint presentations to 40 parent carers around both the boards statutory requirements and how LBBB implement these. Feedback was that they felt more able to become more involved in child safety issues and for many they had no idea of the board's existence prior to these presentations. I was also able to signpost them to the useful resources on the LSCB website during these presentations.

I promote the boards work at community groups within the borough at every opportunity and ensure this is fully understood. I have attended both the Performance and Quality Assurance sub group and the Learning and Improvement sub group and fed in my thoughts on relevant topics always trying to ensure I represented the needs and views of the local community.

The challenge to the board that the accessibility by the public, children and young people of its plans and procedures is ongoing, and becomes harder with more and more budget constraints.

I hope to be available to continue linking the board to the community along with its varied board membership over the coming year.

Lay Member outcomes for 2014-15:

- Delivered training on 23 July 2014 to parents and carers living in B&D. Ensured at next staff meeting to remind all about FGM and radicalisation and where to access Safeguarding refresher courses where appropriate.
- Delivery of a further presentation to Parents around the work of the board on 22 October 2014. Take back to team the need to look at recent training around witchcraft, honour based violence, FGM and Force Marriage. Future discussion on Private Fostering plus add on to the Parents presentation.
- Awareness of the Board work - presentation to parents scheduled for 25/2/15 (20 x parent/carers) and CSE discuss with young carers staff and access their training needs- remind all of organisational policy in supervision.
- Alert the Chair to the needs of local parents- 1. Safeguarding needs to be part of any local parenting programme and 2.more public awareness of the Board and its work. Be part of the 50th Anniversary celebrations - one borough community day on 25th July 2015.

## CHAPTER 3: The Work of the LSCB

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### Statutory and legislative context for LSCBs

The role and responsibilities of the Local Safeguarding Children Board are set out in primary legislation, regulations and statutory guidance. The Board has a range of functions.

**The Children Act 2004:** Section 13 of the Children Act 2004 required each local authority to establish a Local Safeguarding Children Board for their area and specified the organisations and individuals that should be represented on it. Section 14 of the Children Act 2004 sets out the objectives of an LSCB, which are to:

- coordinate what is done by each person or body represented on the Board for the purposes of safeguarding and promoting the welfare of children; and
- to ensure the effectiveness of what is done by each such person or body for those purposes.

**Local Safeguarding Children Board Regulations 2006:** regulation 5 sets out the functions of the LSCB in relation to the above objectives. These are to:

- develop policies and procedures for safeguarding and promoting the welfare of children in the area of the authority;
- monitor and evaluate the effectiveness of what is done by the authority and their Board partners individually and collectively to safeguard and promote the welfare of children, and advise them on ways to improve;
- participate in the planning of services for children in the area of the authority;
- Undertake reviews of serious cases and advise the authority and their Board partners on lessons to be learned.

**Working Together to Safeguard Children 2015:** includes the most recent statutory guidance on the work of LSCBs. It sets out the expectations of Boards in relation to membership, the role of the LSCB Chair, resourcing and areas of accountability. The guidance states that in order for an LSCB to fulfil its statutory functions under Regulation 5, it should use data and, as a minimum, should:

- assess the effectiveness of the help being provided to children and families, including early help;
- assess whether partners are fulfilling their statutory obligations;
- quality assure practice, including through joint audits of case files involving practitioners and identifying lessons to be learned; and
- Monitor and evaluate the effectiveness of training, including multi-agency training, to safeguard and promote the welfare of children.

Working Together 2015 also reaffirms the role of the Board as an oversight and scrutiny body which does not commission or directly deliver frontline services.

### Governance and accountability arrangements

The Board meets six times per year. In addition this year has seen the addition of a Strategic Partners group that includes senior representatives from the statutory partners. This

meeting occurs on a quarterly basis and provides strategic partners at director level (Children's Social Care, Police and CCG) with the opportunity to identify and debate emerging or complex issues and influence the agenda of the LSCB.

The Board now has a Child Sexual Exploitation Strategic Group. This group has oversight of the Child Sexual Exploitation strategy and operational plan and the MASE (Multi Agency Sexual Exploitation) group reports into the strategic group via the MASE chair who is a member.

The LSCB structure is set out in Appendix 1

### **Strategic links with other partnership bodies**

Barking & Dagenham have a fully established Health and Wellbeing Board. The Board is the forum for local commissioners across the NHS, public health and social care, elected representatives, and representatives of HealthWatch to discuss how to work together to improve the health and wellbeing outcomes for adults and children in the borough. An action from the Ofsted inspection was to: *"Produce a Protocol outlining joint working between the Health and Wellbeing Board (HWBB) and LSCB and agree at LSCB and HWBB"* A Protocol was signed off on 28<sup>th</sup> October 2014 and the LSCB Independent Chair is now a member of the HWBB and the LSCB Annual Report is presented to the HWBB.

The need for strong links between the HWBB and the LSCB is set out in Working Together 2015 with a particular focus on the LSCB informing and drawing on the Joint Strategic needs Assessment ([JSNA](#)). The Boards have established firm reporting and accountability arrangements through a formal protocol. The LSCB should be able to influence the strategic priorities of the HWBB in an impactful way so this is an area that will be reflected in the new Business Plan.

A formal protocol between the LSCB and the Community Safety Partnership is needed to underline respective roles and responsibilities, especially in areas that are a shared priority such as domestic abuse.

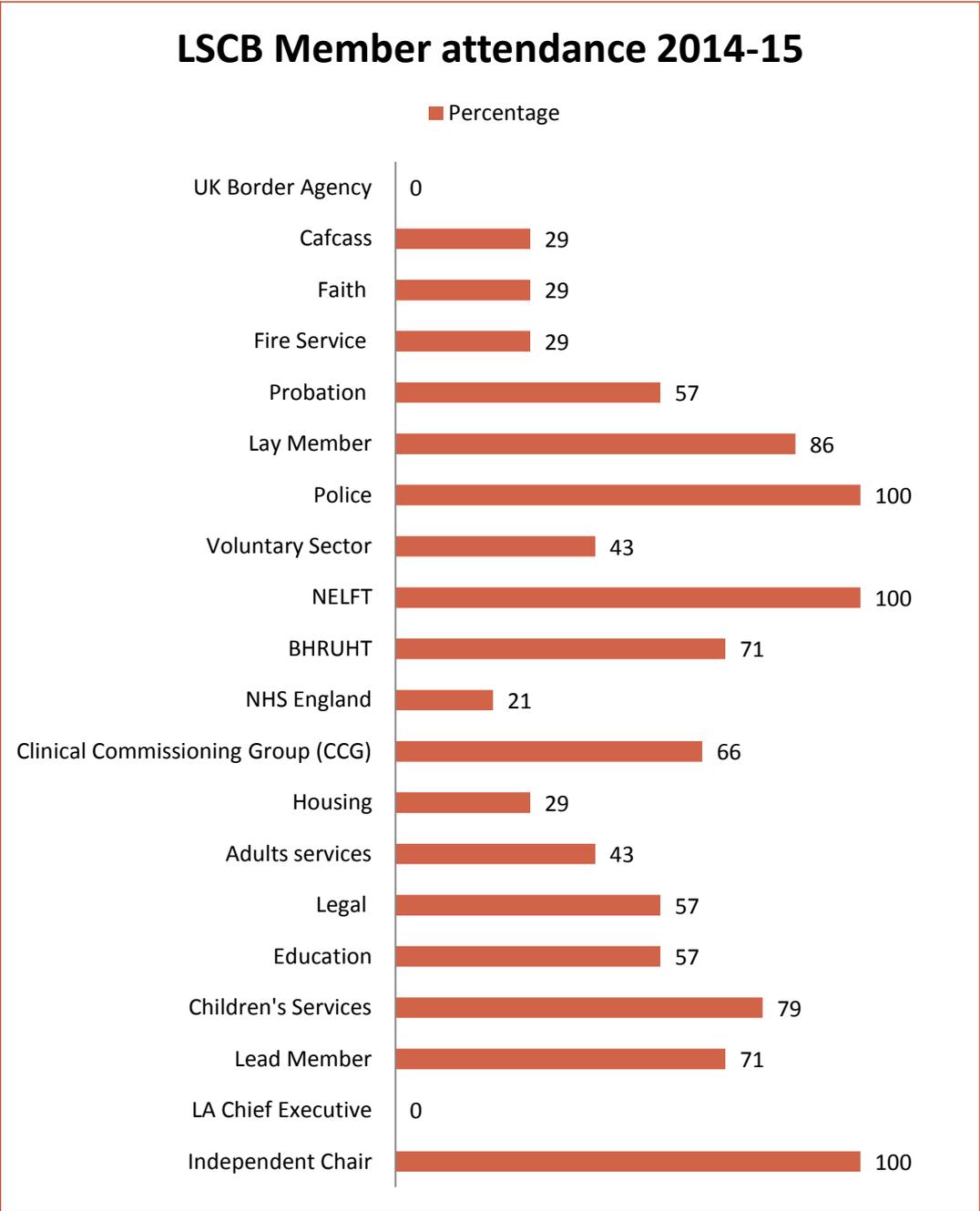
### **Membership Arrangements**

In line with Working Together 2015, key stakeholders, such as the local authority, schools, Police, Probation, CCG, BHRUT, NELFT have remained consistent contributors to the work of the LSCB and its functioning.

There is an ongoing effort to ensure all the key stakeholders in Barking & Dagenham are represented on the Board and that this is at an appropriately senior level.

The attendance of the LSCB Board members is broken down in the chart below. This is based on seven LSCB Board meetings over the period 2014-15.

**Attendance**



In order to reinforce individuals’ responsibilities in representing their agency on the LSCB, all LSCB members will be asked to sign a new membership agreement setting out the role and responsibilities of a Board member.

The LSCB Chair will continue to monitor ongoing agency membership and attendance at the Board meetings.

## Financial arrangements

The LSCB's income and total budget for the period April 2014 – March 2015 is £188,166

The LSCB is funded by the following organisations:

<b>Agency Contribution</b>	<b>£</b>
Local Authority (inc contribution for CDOP)	130,453
Local Authority - Housing	8,888
BD Clinical Commissioning Group (inc contribution for CDOP)	34,813
BHRUHT	3,231
NELFT	3,231
CAFCASS	550
National Probation Service	1,000
London Community Rehabilitation Company	1,000
Metropolitan Police	5,000
<b>Total Contribution</b>	<b>188,166</b>

As illustrated, the local authority continues to provide the largest share of the LSCB's budget at 69%.

Actual expenditure incurred by the LSCB in 2014/15:

<b>Expenditure</b>	<b>£</b>
Independent Chair Salary	15,275
BDSCB Support salaries and Expenses: <ul style="list-style-type: none"><li>• Business Manager</li><li>• CDOP Manager</li></ul>	101,804
BDSCB Annual Conference	250
Serious Case Review – Chairing & Reviewer arrangements	6,067
BDSCB Training Programme	20,000
<b>Total</b>	<b>143,396</b>

Working Together 2015 is clear that all LSCB member organisations have an obligation to provide the Board with reliable resources (including finance) that enable the LSCB to be strong and effective and that a disproportionate burden should not fall on a small number of agencies. This is with an awareness that many partner organisations continue to struggle with budget reductions and other significant financial pressures. Issues around future resourcing of the Board's work were discussed at the December 2014 LSCB meeting and subsequently the Chair has written to partner agencies to consider contributions to the LSCB. To date, this has resulted in some additional resources being secured for the Board for the coming year. The Chair will continue to work with board partners over the coming year to ensure the board is appropriately resourced to enable it to undertake its statutory functions.

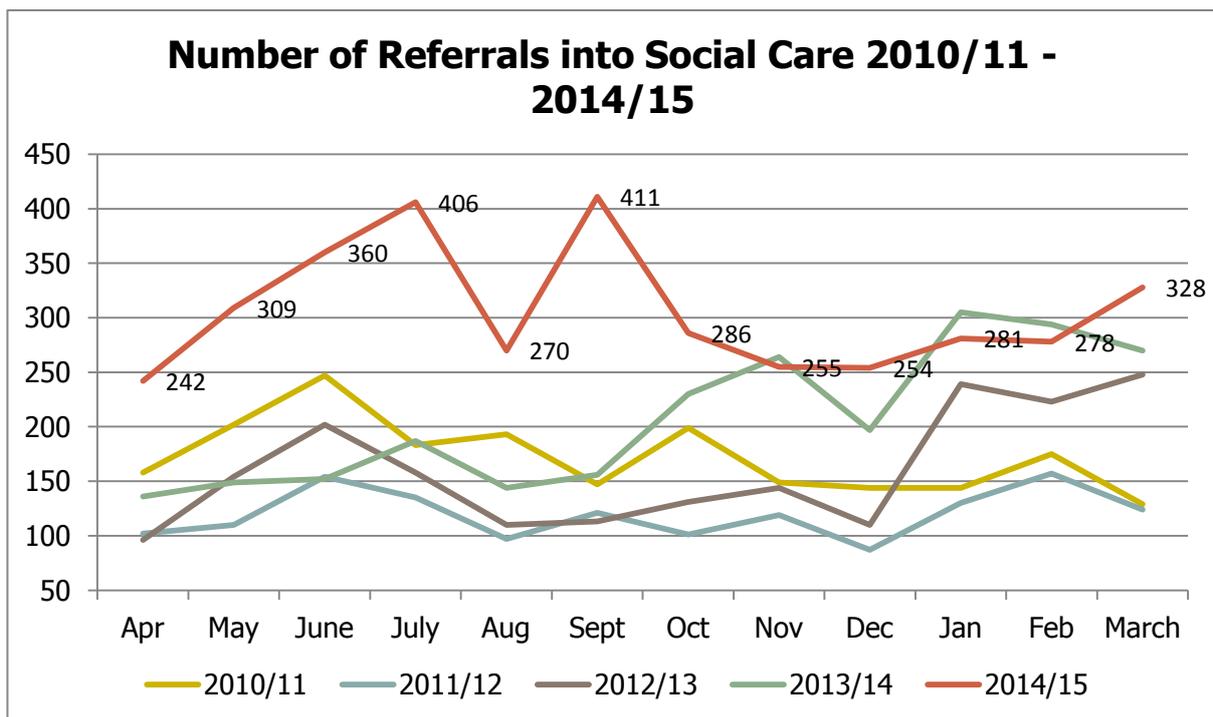
## Performance & Data

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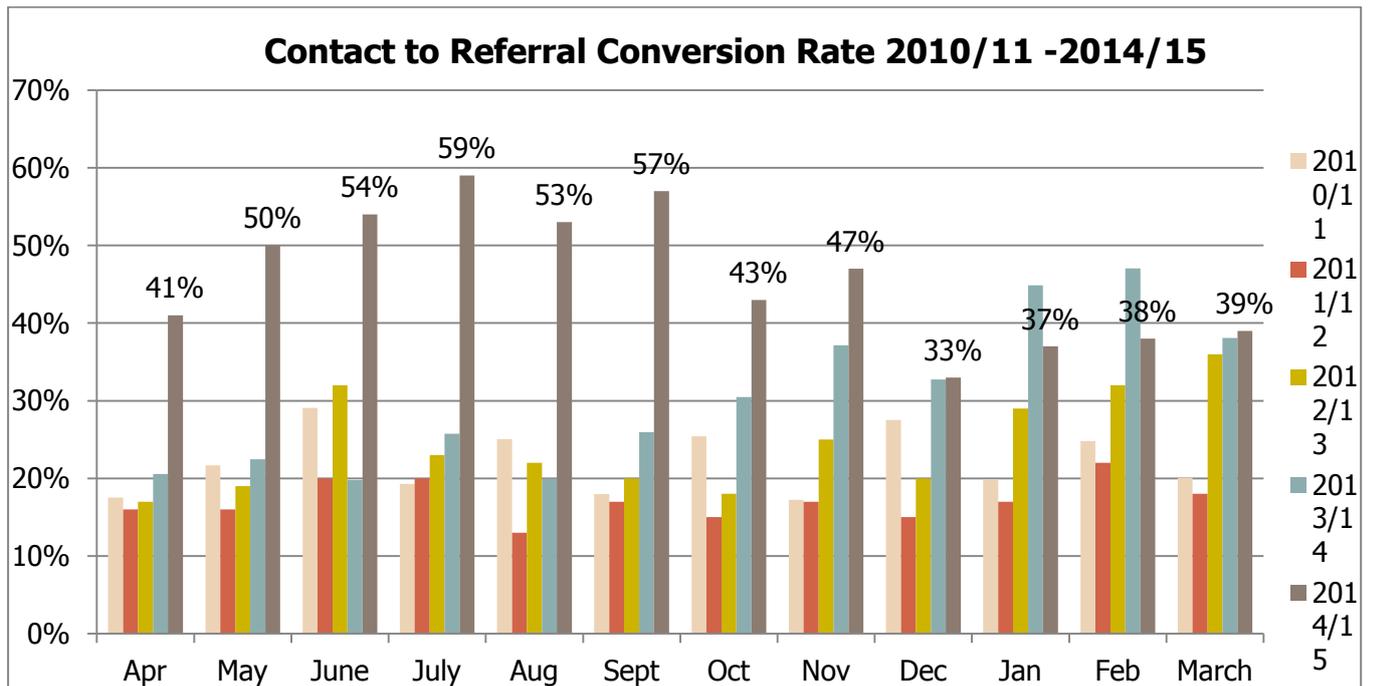
### Headlines from LSCB Dataset

- Good performance on child protection plans lasting 2 years plus; 2014/15 performance is less than 1%, below all benchmarks and lower than 2013/14 outturn of 4%;
- Performance is lower than national average for children becoming the subject of a child protection plan for a second or subsequent time despite increase to 14.6%;
- Good performance on first time entrants maintained - number increased slightly to 89 in 2014/15 compared to 84 in the previous but our rate per 10,000 of 430 is lower than national rate;
- No offenders receiving level 3 MAPPA reviews reoffending against children in the last 4 years;
- Hospital admissions caused by unintentional and deliberate injuries to children and young people (per 10,000) dropped in 2013/14 to 74.2, lower than all benchmarks;
- Privately fostered children all had a private fostering assessment – 100% year-on-year; the number of privately fostered children in the borough is in line with national, statistical neighbours and London;
- Significant improvement in CP visits completed in 6 weeks during this financial year – in 14/15 96% completed in 6 weeks compared to around 80% on average in previous quarters;
- Significant improvement in the year for CP core groups - 86% of Core Groups were completed in time as of the end of 14/15, compared to 34% in 13/14.
- In 2014/15, provisionally, 73% of statutory social care assessments were completed within 45 days, below our local target set at around 80%, comparable with Q3 figure of 72.9%. Performance falls below the national average of 82%, London and statistical neighbour average;
- It is important to note that contacts and referrals into statutory social care have again both risen in 2014/15, impacting on the number of assessments being completed; 2,998 (provisional) compared to 2,760 in 2013/14 and 2,016 in 2012/13, a real term increase 9% in the last year.
- Children with disabilities aged 14 and over with a transition plan has increased in 14/15 to 86%, compared to 50% in 13/14 falling just short of our target of 90%.
- The number of children entering care on police protection has fallen significantly during 14/15 to 69 compared to 136 in 13/14 – this represents a decline from 43% to 25% of all admissions to care. Performance is still above national, London and similar areas, who all fall below 20% but overall very good progress made.
- Year on year decline in permanent exclusions, now in line with national benchmarks; local data shows further decline to 11 in this academic year compared to 15 in 13/14.
- The number of MET recorded child abuse offences increased to 415 in 2013/14 compared to 312 in previous year (real term increase of 33%); big increase in physical abuse and neglect offences; however, the % of those offences resulting in charges or cautions has declined - 20% in 13/14 compared to 24% in 12/13.
- 80% of referrals to CAMHS resulted in an assessment during 14/15 compared to 85% in 13/14; There has also been a slight decline in the % of assessments resulting in active engagement with CAMHS – 56% in 2014/15 compared to 62% in the previous year.

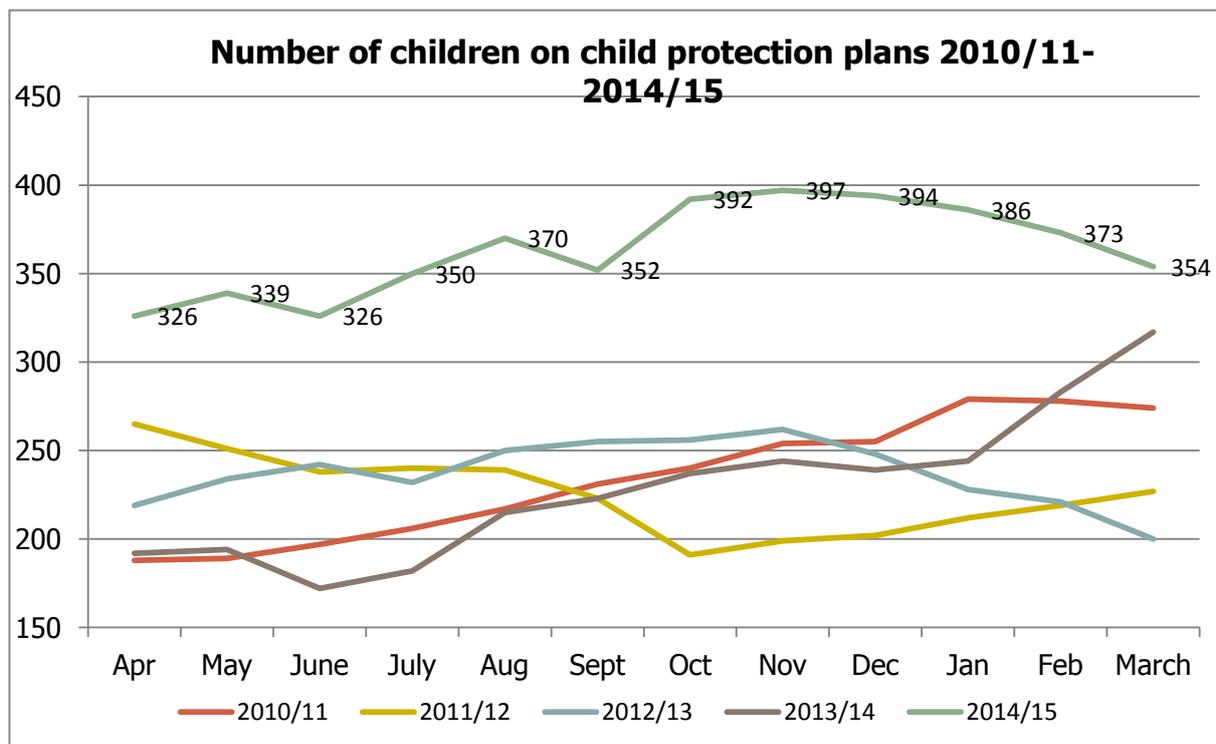
- The number of families living in temporary accommodation dropped very slightly to 1,118 at the end of 14/15 – compared 1,139 figures in 13/14 but is much higher than the 907 in 12/13; 806 in 2011/12 and 559 at end of 2010/11.
- Children in low income families significantly worse than national and London; 30.2% compared to 19% nationally; 24% across London. National ranking of Barking and Dagenham is unchanged 143/151 (9th worst). London ranking of Barking and Dagenham has fallen from 26/33 (8th worst) to 31/33 (3rd worst for Under 16s/4th for Under 18s).
- U18 conception rate for girls aged 15-17 per 1000 increased to 40.1 in 2013 compared to 35.4 in 2012; still an overall reduction on 98 baseline but not as high (-26.6%).
- Further increase in open social care cases in 14/15; 2356 compared to 2184 in 13/14, a real term increase of 8%. In the last 6 years, the increase has been 87% in real terms;
- Looked after children numbers rose to 460 in 14/15 comparable with 13/14; LAC numbers have increased in the last 6 years by 35% in real terms. LAC numbers in April 2015 are 464.
- Numbers of S47s have remained stable in 14/15 with a total of 1222 during the year compared to 1231 in 13/14. S47 rate per 10,000 much higher than all benchmarks



- Number of contacts made to social care has not increased significantly - on average around 650-700 contacts each month over the last 3 years; 9,765 in 10/11, 8,475 in 12/13, 8,856 in 13/14 and 8,515 in 14/15.
- Number of referrals has increased significantly; 1,812 in 11/12, 2,586 in 12/13, 3,126 in 13/14 and 3,950 in 14/15. This is a 118% increase since 11/12.

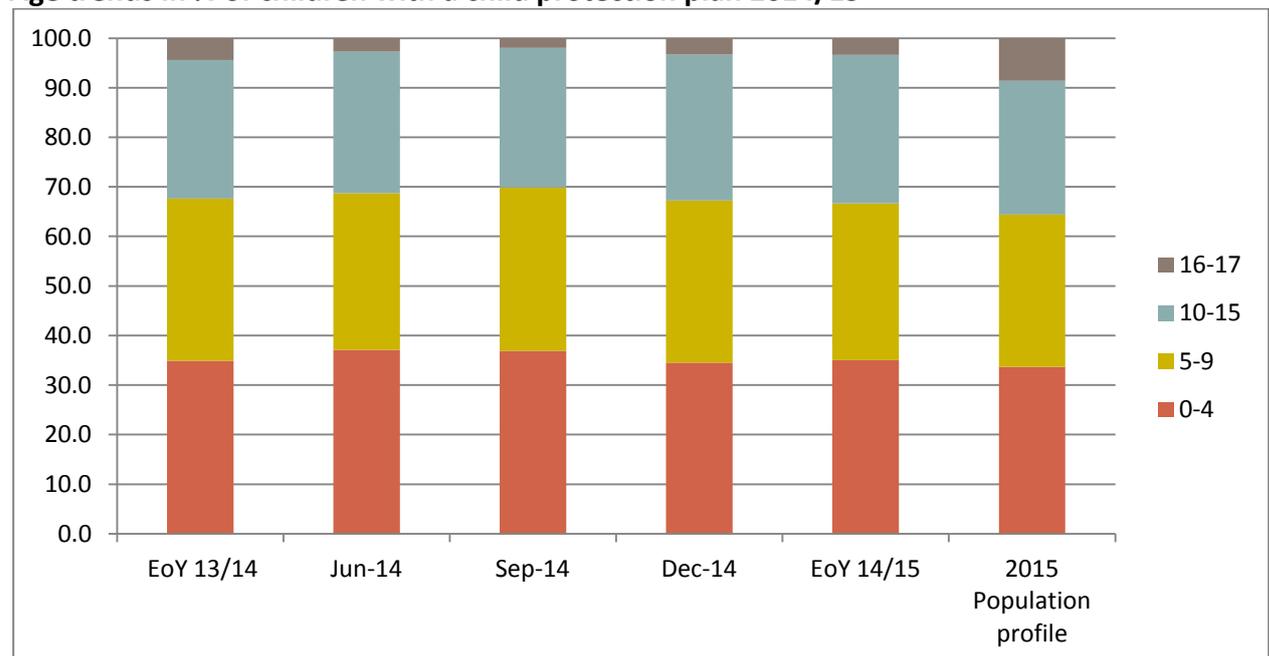


- Conversion rate from contact to referral has increased to around 50% in 2014/15 compared to our average of around 30% in previous years;
- Impact on Assessment Team – over 90% of referrals progressed to an assessment or strategy discussion in 12/13 and 13/14; in 2014/15 this has dropped to 78% - impact of MASH;
- % of children referred into social care with a CAF in place is very low at 4%

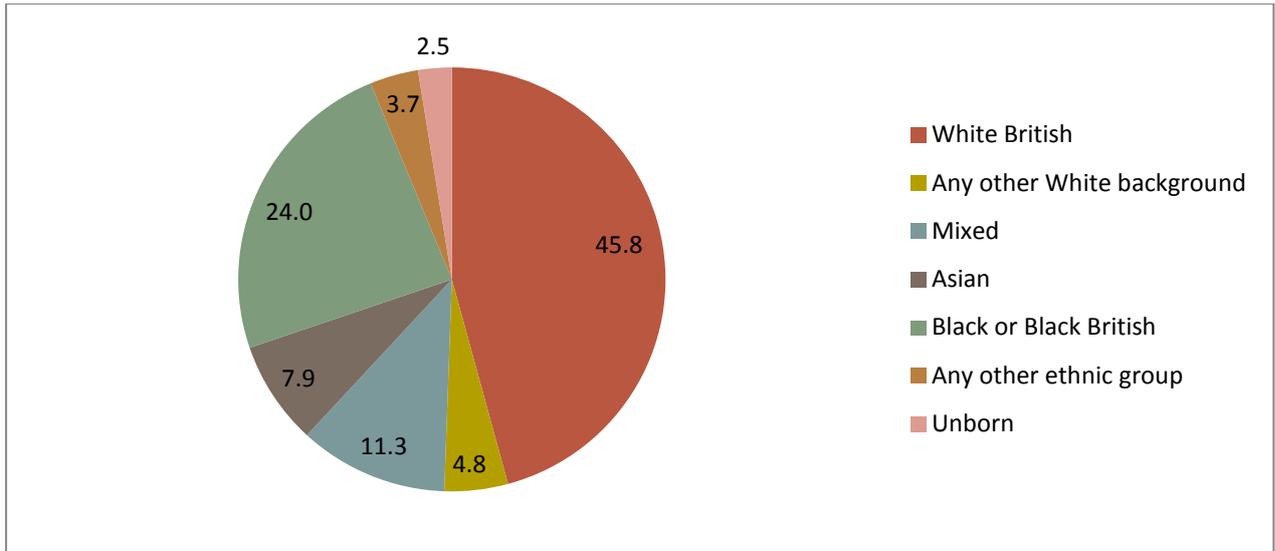


- In 2014/15, children subject to child protection plans have also continued to increase in the borough; 354 compared to 318 in the previous year, a further increase of 11%.
- The number of children on child protection plans due to neglect rose from 21% to 31% between 2013/14 and 2014/15 and is largely attributed to the very high levels of poverty and deprivation in the borough. Emotional abuse remains the highest child protection category at 60%, although this is lower than the 69% reported in 2013/14.
- 460 ICPC's took place in 14/15 representing 40% of S47s initiated – compared to 549 in 13/14 (45% of all S47's initiated)
- The number of children on child protection plans fell to 354 at the end of March 2015 compared to 394 in Q3 2014/15. However, this is still an increase on the 318 in 2013/14 and 200 in 12/13. The rate per 10,000 has increased to 62 - above all benchmarks.
- CP numbers higher in 14/15 - 354 compared to 318 in 13/14 – in last 6 years CP numbers have risen by 112% in real terms;
- Rate of CP per 10,000 (62) is above all benchmarks
- The profile of children subject to a child protection plan shows a high proportion of younger children. This emphasises the need for early intervention and prevention work in pregnancy and early year's settings. The age of children with a CPP is generally in line with the age breakdown of children in the borough, although the number of 16+ is slightly lower – 3% of all children on a child protection plan are aged 16 plus compared to 9% of the local population.

#### Age trends in % of children with a child protection plan 2014/15

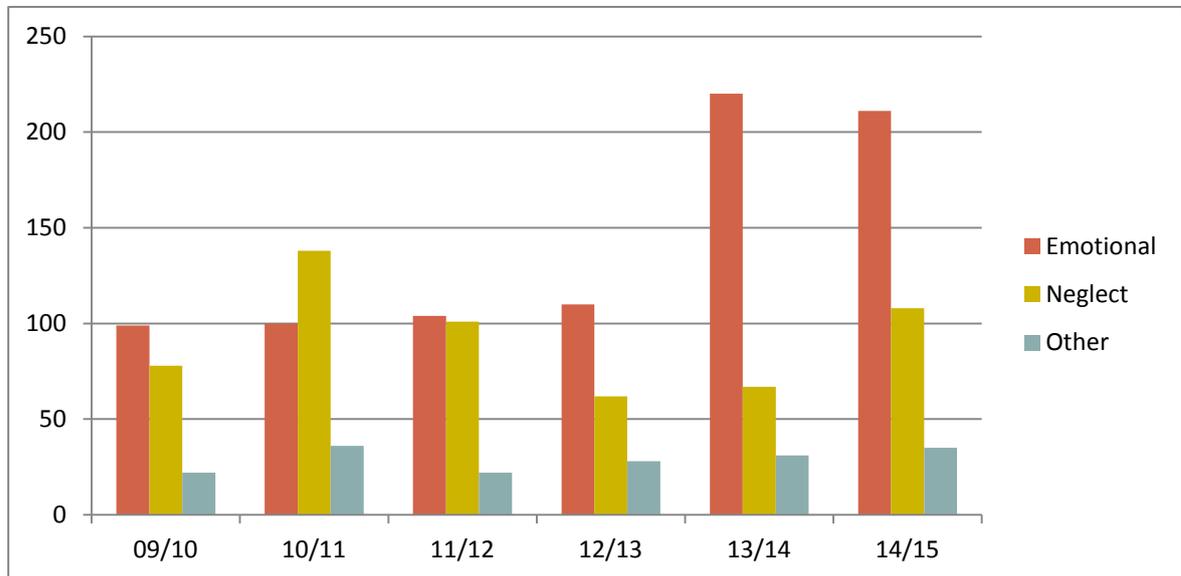


- The ethnic profile of children on child protection plans approximately reflects the ethnic profile of children in the borough, with the largest proportion of CPPs being in children who are white British or Black/Black British. Sibling groups of 4 plus children currently represent 22% of all children with a Child Protection Plan, a slight decrease from 23% in 2013/14.



Analysis of the types of abuse resulting in children being subject to child protection plans highlights emotional abuse and neglect as the two largest primary categories in the borough. Provisional data for 2014/15 shows that 60% of children on child protection plans are due to emotional abuse, a decline on the 69% figure in 2013/14, but still the majority and this is closely linked to the high rates of domestic violence. Conversely, children on a child protection plan due to neglect increased to make up 31% of CPPs compared to 21% in 2013/14.

#### Trends in numbers of child protection order by category of primary abuse



## LSCB effectiveness, contribution and challenge

In April 2014 Ofsted carried out an inspection into the effectiveness of services in Barking & Dagenham. Ofsted assessed the effectiveness of the LSCB to be 'requires improvement'. The areas identified for improvement have been monitored through an action plan.

### **Areas for improvement**

- Ensure the LSCB Chair strengthens the coordination, focus and impact of the boards work in the Health and Wellbeing Board. *The LSCB chair is now a member of the Health & Wellbeing Board and there is a joint protocol in place.*
- Undertake an evaluation of the full impact of training on the performance of practitioners to ensure it targets improvements in outcomes for children. *Training has now been commissioned from the council who have in place an evaluation process for all training.*
- Sustain and extend the positive and constructive role of the practitioner's forums in promoting multi-agency working through improving the attendance of social workers. *There has been sustained work to encourage social workers to attend the Practitioners Forum. The forum has strengthened with increased attendance and speakers on topics identified by the forum.*
- Strengthen oversight of private fostering by the board, supporting efforts to ensure all such children are identified. *The Private Fostering annual report has been presented to the LSCB. Data presented to the Board demonstrates that all privately fostered children have a visit and assessment and that figures for children in Barking & Dagenham were in line with local and national statistics.*
- Ensure the annual report and business plan are focused on understanding and addressing local needs and on evaluating progress made in achieving improved outcomes for children. *A revised framework and structure of annual report was introduced for the 2013/14 LSCB report.*

The areas identified in the inspection of 2014 have been rectified and the Board is now effectively prioritising core tasks and meetings its statutory duties. The Board has a business agenda that incorporates forward planning and a clearer and more focused approach to child protection which includes a chairs challenge log and a risk register.

The LSCB has built on these foundations by maintaining a strong focus on core business, at both a strategic level and at the front line, scrutinising performance, and engaging partners in co-ordinated strategic work to address priority issues. Throughout the year each Board meeting has been 'themed' with contributions from agencies and sub group members. Messages from these Board meetings have been communicated through an LSCB newsletter and through the Practitioner Forum. The newsletter has been disseminated to all agencies represented on the LSCB, including schools, voluntary sector organisations and local councilors. Whilst there has been no formal assessment of the impact this has had, anecdotal reports from LSCB members and practitioners suggest that the newsletter and the Practitioner Forum is helping to improve knowledge and understanding of the Board and the role it plays in coordinating the work of partner agencies to safeguard children. Together, these activities have helped the LSCB to have a more visible presence amongst partners and the children's workforce.

Over the course of the year there has been direct engagement by the chair with new LSCB members. The chair meets with each new member as part of an induction plan.

Challenges by the chair to the partnership, has included:

1. A letter sent to NHS England about the poor level of attendance by GP's at CP Conferences. This has been raised by the chair to the Designated GP in their 1-1's.
2. Concerns regarding capacity of the Designated Nurse LAC raised with the CCG and NHS England (London)
3. The number of Health Visitors and new birth visits raised as part of LSCB Performance monitoring. NELFT assured the Performance & QA committee that they are undertaking the majority of the new birth visits within timescales.
4. Concerns raised about levels of Police officers in CAIT. Letter sent to Commissioner Sir Bernard Hogan Howe. Regular meetings then arranged to meet with senior officers in the Met to discuss way forward. Additional resources were put in place.
5. Concerns raised by Ofsted about the numbers of children subject to Police Powers of Protection. Regular meetings with police and each PP audited to assess if a different action could have been taken.

## **Faith & Culture**

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The scrutiny of local MASH data and focusing on national, Pan-London and local safeguarding issues, has highlighted concerns on FGM, Forced Marriage and Honour-Based Violence, Alternative Child-Rearing Practices, Trafficking & CSE, Radicalisation and Witchcraft. Training has been provided to 332 participants on these issues with many more people undertaking the on-line training available through the LSCB website and the Borough i-learn portal.

The LSCB Faith & Culture Committee (FCC) has had a busy year raising the awareness of culturally harmful practices against children and young people. Working in collaboration with statutory, voluntary, community, faith and non-government organisations including survivors, it organised 6 briefings during 2014-15 in order to promote and develop a culturally competent workforce. The FCC's aim is to increase safeguarding awareness amongst community and faith-based organisations in order to protect children from faith and culture abuse. Mapping organisations locally is being undertaken in order to make links with these groups. The FCC has been working closely with the Faith Forum, CVS and Barking & Dagenham's African Families & Community Outreach Officer in order to increase engagement and collaboration between the community and the LSCB. Two faith leaders sit on the committee and briefings aimed at this sector have taken place. As part of this session, the LBBB Safeguarding Children Guidance (The Green Book)

- Policy and Procedures for Voluntary, Community, Faith and Private Organisations were presented which acted to raise awareness of the LSCB website & the resources it held. A representative from the traveller community is also a member of the FCC and has delivered an awareness presentation on the traveller community. More work needs to be done in engaging these areas, with an objective of developing a network of faith leader and community leader champions to model good safeguarding practice.

An FGM task and finish group have drafted the 'Multi-Agency Strategy to Tackle Female Genital Mutilation 2015-2018'. This will be reviewed in conjunction with partners. The FCC

group are members of the 'National Working Group on Child Abuse Linked to Faith or Belief'. The national action plan to tackle this abuse is embedded within the FCC action plan. The awareness raised is beginning to be evidenced in the four referrals received since the witchcraft briefings began.

The FCC is using various ways in which to secure the meaningful engagement of local faith communities. This has included the collaboration with other partners, such as The Safe Network and Multi-Faith Safeguarding Hub and Forward UK and its awareness sessions against FGM with community groups. Following each briefing, members create a fact sheet on the topic, so that practitioners may use as an aide memoir when back in their organisations. These are also published on the LSCB website. There has been positive feedback on these documents and practitioners have used them for discussions and learning at team meetings, in supervision and governance meetings. The FCC uses mediums such as a Faith newsletter, the LSCB website, community events, the local press, schools, children centres in order to raise awareness of the Committee and the work that it does.

## Audits

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A number of audits have been completed and are summarised below:

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### **1. Child's Journey**

#### ***The purpose of the audit:***

- To examine the journey of children through statutory and non statutory levels of intervention.
- To assess the quality of that Intervention, promote good areas of practice and identify where additional support may be required.
- To provide a snapshot of practice for Operational Managers.

#### ***Audit Sample:***

The audit sample, randomly selected from all the teams was 74 children and young people and was a mixed sample of Children in Need, Children in need of Protection, Looked after Children and Children Leaving Care.

Auditors were asked to audit the last 12 months in the 'life' of a case.

Key information and supervision was applicable in all cases.

In all, 37 audits were completed which reflects 50% of the intended target.

All cases were given an overall grade.

#### **Head Line Findings:**

##### ***Areas where practice was strong:***

- Threshold was considered to be appropriate in the majority of cases by the Triage Team
- The majority of assessments were completed within timescale
- There was good evidence of multi-agency input to assessment and planning
- There was good evidence of children being seen and their voices recorded
- The risks to children in S47 investigations are being evaluated following referral

**Areas where improvement is needed:**

- Chronologies need to be completed and placed on file as a working document which can be added to
- There is no evidence that assessments are being shared with the family
- There is no evidence of or poor recording of CIN plans on file
- There is no evidence of use of multi-agency strategy meetings
- Core assessments for LAC need to be completed on the majority of cases

**2. Children subject to CP plans for a second or subsequent time.**

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**Purpose of Audit**

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Data evidenced that during the year 61 Children were presented back to child protection conference for a second and sometimes third occasion in Barking and Dagenham.

**Headlines**

- 59 Children were presented back to ICPC for a second time.
- 2 Children were presented back to ICPC for a third time.
- In total, this equates to 24 families presented back to conference.
- The shortest period between presentation was 6 months
- The longest period between presentations was 9 years.
- 25 Children were made subject to a plan under the category of Neglect for a second time
- 34 Children were made subject to a plan under the category of Emotional abuse for a second time.
- 2 Children were made subject to a plan under the category of Sexual abuse for a second time.
- No children were made subject to a plan under the category of Physical Abuse.
- Of the 24 cases it was found that 17 cases were presented for new or different reasons that could not have been addressed in the initial period of intervention.
- In 7 cases it was found that the LA did not complete robust enough work to prevent re-presentation.
- Of the 7 cases the presenting concerns on both occasions were for the same child protection issues
- 4 of the cases were concerning domestic violence.

Of the 24 family's presented to conference only 7 were presented for the second time for the same issues. The remaining 17 cases were presented for new reasons which could not have been pre-empted from earlier interventions.

This indicates that intervention from the LA under Child Protection procedures is in the main effective with CP plans and intervention from the multi agency partnership. There is ample evidence of effective planning and engagement with both families and partner agencies to address CP concerns and effect change in children's lives. This is further evidenced in the

long gap between presentations for new issues as the work completed at initial intervention led to no re-referrals.

### **3. Police Powers of Protection**

#### **Purpose of Audit**

The purpose of this audit was to review the impact of the work being done to address the concerns raised by Ofsted following the April 2014 inspection.

Ofsted stated that:

*“Too many children experience the trauma of being removed from the care of their parents by the police. This often takes place before enough information has been gathered from other agencies and family members. This was an area for improvement at the last inspection in 2012”.*

Ofsted set out the area for improvement as follows;

*“Ensure that sufficient checks and enquiries are undertaken before any unplanned removal of children from their families. This concerns the exercise of police powers of protection. This was an area for improvement in the last inspection”.*

All cases where police powers have been used have been audited. This audit was a joint social care and police endeavour with representatives from both borough police and Child Abuse Investigation Team (CAIT).

#### **Headlines**

- **Police Protection Protocol.**

The Police Protection Protocol has been revised

- **Police Protection Meetings:**

The first meeting of managers from social care, CAIT and uniformed police took place at the end of May 2014. Meetings are now held monthly. Each month the list of cases where children have been subject to police protection is shared with the police. Each case file is audited by social care and the police undertake their own reviews. Each case is discussed at the monthly meetings.

#### **Findings from audits**

The number of children coming into care via police protection has declined significantly since the Police Protection Group was established in May 2014. Training for front line police officers has contributed to this. There is evidence of more negotiation between police and social care to place children safely with extended family members whilst concerns are being addressed or allegations investigated.

The numbers of children entering care via police protection increased to 136 at 31 March 2013/14 representing 43% which is well above London, Statistical Neighbours and national figures that all fall below 20%. Since April 2014 percentages have begun to reduce from a high of 53% at the end of April to 30% at 31st October. This is a reduction of over 20% from April 2014.

## **Policies, Procedures and guidance**

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Practice, in the main, follows the Pan London Safeguarding Procedures as maintained by the London LSCB. Local policies and procedures are in place in line with statutory requirements and these are kept under review to ensure they reflect current legislation, national policy developments and any local changes. These policies and procedures are on the LSCB website and available to all multi agency practitioners. A 'Green Book' has been produced and circulated to voluntary agencies in the borough. The book sets out advice and guidance and has received positive feedback.

During the year updated procedures and guidance have been added to the website:

- CSE
- Child Safety Week
- Alternative Child Rearing Practices
- Safer Internet Day
- LBBB Directory of Services
- PREVENT
- Private Fostering
- Early Help

## **Training**

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It has been a successful year for the delivery of multi agency training during 2014/15. Just over 1,000 people have been trained from across a range of agencies.

Up until March 2015 the LSCB provided multi-agency safeguarding training through external trainers who delivered the majority of the safeguarding courses. The core programme consisted of safeguarding training and specialist courses such as domestic violence. Additional specialist courses were added to compliment the core programme, including on child sexual exploitation and identifying culturally harmful practices. The LSCB partnership also has access to a generic safeguarding children e-learning package that all agencies can use to provide workers with a basic level of safeguarding knowledge and understanding. Through this course the LSCB is enabling wider and easier access to safeguarding training and raising levels of awareness.

From April 2015, the LSCB is reviewing its approach to the delivery of multi-agency training due to reduced resources. The training will be better aligned to the strategic priorities of the board and its impact on frontline practice will be maximised and evidenced. The Board is likely to move to a model whereby most training is commissioned from in house practitioners/managers who can provide workshops or briefings rather than delivered through external trainers.

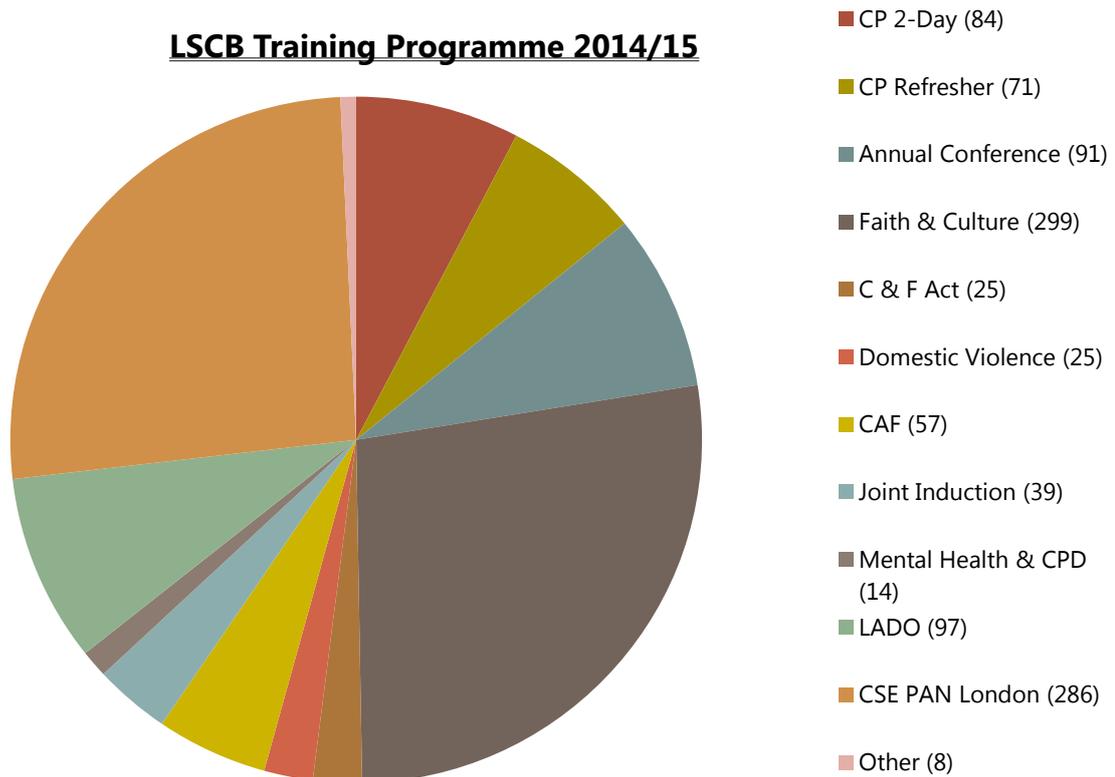
## **Training Programme for 2014/15**

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During the 2014/15 year, a total of **1,096** practitioners accessed training through the LSCB Multi-Agency Training Programme. The courses run (in no particular order) were as follows:

Course Name	Number of courses run
Child Protection 2 day	3
Culturally harmful Practices - FGM	1
CSE Pan London Briefings	7
IWISA CAF/eCAF	8
LSCB Annual Conference 2014	1
Child Protection Refresher	4
Domestic Violence	2
Children & Families Act Briefing	2
LADO Briefings	3
Culturally Harmful Practices: ACRP (Alternative Child Rearing Practices)	1
FGM Awareness, Protection & Prevention	1
Culturally Harmful Practices: CSE & Trafficking	1
LSCB & Children's Joint Induction	2
CDOP Briefing	1
Total	37

### Delegate Take up – by Course



The LSCB has in place multi agency briefing sessions on CSE and for associated training CSE forms an inherent part of that training. 6 LSCB Briefings around the CSE Met Police Operating Protocol have been held with a further 3 planned. All briefings have been well attended by professionals from health, social care, education and the voluntary sector. The

briefings were facilitated by a CSE Trainer from the Police. Materials available through the National Working Group (NWG) website/ members portal will be made available to the LSCB e.g. eLearning module which will also be incorporated into the Social Care Training Programme and the foster carers training programme.

Training around the Management of Allegations is delivered to schools and education settings on request or at which time there is an obligatory requirement (e.g. all school staff are required to be trained in safeguarding and the reporting of allegations on a 3-yearly basis and CP Leads, 2-yearly).

In the 2014/15 academic year, four sessions of Safer Recruitment training was carried out by an external provider and captured over 100 education staff. Each school and governing body has a responsibility to ensure that senior staff with safeguarding responsibility has had sufficient training. Though the local authority provides training sessions in the area of Safer Recruitment which schools are able to access, schools have the option to source training from external providers.

In 2014/15 academic year, the Safeguarding Lead for Education provided two Child Protection Lead Refresher training sessions, covering reporting on allegations against professionals and highlighting the revised guidance 'Keeping Children Safe in Education' (2015). There have also been a number of schools who have requested 'Whole School' Child Protection training and, this training covers allegations involving staff who works within schools.

The Safeguarding Lead for Education has now put together a 'Whole School' Child Protection training pack. The training will be facilitated by the CP Lead/Headteacher in each school and can be run as a continuous session over the course of a whole day or can be broken down into sessions over an academic period. The Safeguarding Lead for Education will hold training for CP Leads to enable them to deliver the training for the academic year 2015/16 ('Train the Trainer').

## Managing allegations against staff and volunteers working with children –

### The Local Authority Designated Officer (LADO)

The role of the LADO is to assist employers in investigating complaints or allegations made against a worker in any agency, whether paid or unpaid.

Working Together to Safeguard Children has been revised and published in March 2015 and the criteria for LADO intervention are applied when an individual has:

- Behaved in a way that has harmed or may have harmed a child
- Possibly committed a criminal offence against or related to a child
- Behaved towards a child that indicated he/she would pose a risk of harm if they work regularly or closely with children

The number of calls to the LADO service for consultation and allegation management support remains high. From April 2014 to end March 2015, the LADO's recorded 221 formal

allegations in Barking & Dagenham. This represents a 4.98% increase on the previous year (210).

The service has also managed a higher number of LADO related consultations. These mainly relate to staff conduct issues, which, on consultation, are designated as below the allegation threshold and passed back to employers to manage as practice or competence issues rather than formal allegations. The categorisation of a piece of work as a 'consultation' is deceptive and may suggest lesser input from the LADO. Many consultations require considerable follow-up input from the LADO beyond the initial caller contact.

- Numbers of notifications/consultations - **146**
- Numbers of Allegation meetings held – **75** (including those resulting in No Further Action)

#### **Allegations/Concerns referred by type of Professional**

<b>Agency</b>	<b>2014-2015</b>
Education	128
Foster Carers	43
Church leaders/Organisers	9
Health Professionals	8
Youth Workers	7
Reg. Social Workers	2
Residential Workers	4
Registered Child Minders	3
Un Registered Child Minders	4
Football Coaches	2
Others	11

#### Allegations by Subject

<b>Allegations referred to LADO</b>	<b>2014/15</b>
Emotional	13
Neglect	35
Physical	63
Sexual	26
Other/Non-Specific/Multiple Allegations	84

#### **Outcome of allegations**

Substantiated – proof that allegation is true	<b>23</b>
Unsubstantiated – insufficient evidence to prove or disprove allegation	<b>22</b>

Advice only – Threshold not met for strategy meeting but agency needing advice about dealing with allegation	<b>146</b>
Malicious – allegation was untrue and made with the intention of malice towards the individual	<b>2</b>
Unfounded – the evidence suggests that the allegation is unlikely to be true	<b>28</b>
<b>Total</b>	<b>221</b>

Four staff has been referred to the Disclosure and Barring Service (DBS) for consideration of on-going professional suitability. Two were education professionals and two were non-education professionals. This process is mandatory in situations where staff have been either dismissed or resigned as a result of allegations concluding risk to children.

### S11 – Self Assessments of Commissioned and Statutory Services 2014/15

In August 2014 our statutory and commissioned partners were requested to self assess in relation to how they fulfil their safeguarding responsibilities within their service areas. The audit tool was distributed and was ratified by the BDSCB for the use of agencies to report to the Board and is a bi-annual requirement.

The areas for self-assessment were:

- How effective is the commitment of senior management to safeguarding and promoting the welfare of children within the agency?
- How clearly are the agencies responsibilities towards children communicated to all staff?
- How clear is the line of accountability within the organisation for work on safeguarding and promoting welfare?
- How effectively does service development take into account the need to safeguard?
- How is it effectively informed by views of children and family? How can you demonstrate improved outcomes?
- How effective is training on safeguarding and promoting welfare of children for all staff & volunteers working with or in contact with children and their families? Can you demonstrate improved outcomes as a result?
- How robust are the organisations recruitment, vetting and managing allegations procedures?
- How effective is inter-agency working by your organisation? How do you demonstrate improved outcomes as a result?
- How effective are the organisations arrangements for information sharing?

All partner agencies were asked to complete the tool and provide evidence where possible to support their answers. Where gaps were identified organisations were asked to identify

what would be done to make improvements and this required a timescale set and a named person.

In total there were 25 audits completed and returned, of these 13 were from commissioned services and 12 were from statutory partners.

The quality of returned, completed audits varied with three returned to auditors to be reviewed.

The audit demonstrated that the safeguarding and welfare of children in Barking and Dagenham, commissioned and statutory services, is good. Agencies completed assessments that indicated there was understanding of roles and responsibilities and there are robust policies and procedures in place to safeguard children and support staff and managers. There will now follow some 'dip sampling' of returns in order to evidence the information.

### S157 / 175 Education Self Assessment Audits

The self assessment audit for schools was undertaken during the academic year 2014/15 and includes information provided by Academy's, Independent Schools and Specialist Education Facilities. There are a total of 60 schools / education facilities within the borough from infant through to Comprehensive Schools. 54 (90%) schools had returned a copy of their Safeguarding Self-Assessment.

Particular questions have been extracted from the self-assessment in order to provide a general overview of safeguarding arrangements within schools which are both child and staff focused.

Of the 54 schools;

- 100% of schools were able to evidence and name their designated Child Protection Lead.
- 54% evidenced that the CP lead had received sufficient training in the last 2 years.
- 98% of schools were able to evidence and name at least one deputy Child Protection Lead.
- 87% of schools reported that they had completed 'Whole School CP Training' in the last 3 years.
- 35% reporting that they complete staff training annually.
- 13% of schools did not evidence when they had last completed 'Whole School Training', but may have provided a 'yes' or 'no' answer or left the section blank.
- 98% of schools report that they are satisfied that their school has sufficient arrangements in place to do as much as possible to reduce the likelihood of allegations against staff.
- 100% of schools report that they have a Single Central Record (SCR) of all staff and adults working within their school as specified within statutory guidance.
- 100% of schools report that their schools recruitment policy is in line with all guidance on safer recruitment practice.
- 96% of schools report that their governing body has a designated governor with responsibility for safeguarding and child protection, who has attended appropriate training.

## Recommendations and Comments

- An encouraging picture has emerged from the report that the majority of schools are demonstrating a proactive stance in executing their duties towards the safeguarding of children.
- Schools are recommended to prioritise the safeguarding self-assessment and continually review the document on an annual basis. This allows all schools to be inspection ready at any time and can provide an up to date copy when requested.
- Schools should view the self-assessment as an aid for them to review their safeguarding processes, policies and procedures and therefore want the document to reflect all the hard work undertaken to safeguard children within their school.
- Schools should ensure that their systems of recording CP / CIN / Early Intervention are interconnected, concise and robust.
- Schools are advised to create a culture of capturing the voice of the child, whether this is involving children in the revision of schools policies, through to how schools respond to child protection and how this is recorded.
- Schools should ensure that 'Whole School Training' is up to date and that all staff with a designated child protection responsibility are adequately trained to effectively fulfil their role.
- For the next audit period, the Safeguarding Lead for Education will review and update the audit tool in line with recent revision of Ofsted, DfE and legislative guidance and will be ratified by the BDSCB. The revised audit will also include a guidance document.

## Engagement with and participation of children and young people

Children's participation is about listening to children and young people's views and giving them a say in decisions that affect their lives. Our aim is to develop meaningful ways in which children and young people can contribute to and influence the Board's work as well to promote a culture across the partnership where children's participation becomes central to safeguarding practice and the way in which organisations operate. We have made some progress towards this goal over the last year but recognise that there is a great deal more to be done to ensure that the child's voice permeates all aspects of our work. The Board has a sub group called, Young People's Safety Group and their work for the year has included CSE, mobile technology and creating a positive image of social workers.

The Barking and Dagenham Youth Forum is a borough-wide platform for young people to express their views and help shape services. Members of the Barking & Dagenham Youth Forum are democratically elected each January through schools and youth groups to represent their peers. Through their participation, young people develop youth-focussed campaigns based on topics most important to young people in Barking and Dagenham. The campaigns aim to raise awareness of the issues being tackled and to bring about change that will positively impact young people's lives. Through regular consultations, Council officers and partner agencies have the opportunity to promote services, gather feedback about

policies, strategies and services as well as gaining a youth perspective on how services can be improved and promoted to young people locally. In addition, a single member of the Forum sits on the Children's Services Select Committee as a co-opted member.

The Barking and Dagenham Youth Forum Young Inspectors sub-group provides local services with the opportunity to have their services inspected by trained, experienced youth inspectors. In 2014, the Young Inspectors sub-group were commissioned to carry out inspections of local pharmacies distributing free condoms to young people aged 13-24 years old under the pan-London C-Card Scheme and local sexual health clinics also offering sexual health advice and services to young people. The Young Inspectors underwent training with youth workers and a representative from Terence Higgins Trust and completed a total of 52 pharmacy inspections and 2 sexual health clinic inspections. A representative of Young Inspectors attends the local Patient Engagement Forum meetings, feeding back the progress and outcomes from the group and offering a youth perspective relevant to agenda items being discussed.

The Barking and Dagenham Youth Forum members have gained many skills through their participation in the forum, including communication, leadership, negotiation, presentation and social skills. These are essential life skills which young people can utilise in a variety of settings. In addition, they represent a very positive image of young people in the borough, and support the Council's objectives to enable social responsibility and encouraging civic pride. The Forum was rewarded with a Youth On Board award from the British Youth Council this year, as well as successfully submitting a funding bid to O<sup>2</sup>.

The Young People's Safety Group has posed questions to the LSCB as a result of their work which is discussed at Board meetings and have covered topics such as recognizing mental health and child sexual exploitation.

## CHAPTER 4: MULTI-AGENCY WORK WITH VULNERABLE GROUPS

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### Children missing from home, care and education

Missing children are a priority group for the multi-agency safeguarding partnership because they are at an increased risk of physical harm, becoming involved in criminal activity or being targeted for child sexual exploitation.

In April 2014 the Metropolitan Police introduced the following definitions;

- **Absent:** not at a place where they are expected or required to be and are not at risk of harm or crime to either themselves or others
- **Missing:** not at the place they are expected to be, but the circumstances are out of character or the context suggests they may be subject of a crime or at risk of harm to themselves or others.

Anyone under the age of 13 will always be reported, missing: young people between the ages of 13-18 years have to be reported missing on two occasions before they can be treated as 'absent'.

The Metropolitan Police investigate 40,000 missing people reports each year. These definitions aim to ensure that the Police are using their resources most efficiently.

The Restorative Approaches Team continue to provide a service to follow up on children when they return from being missing, with an aim of ensuring that they are safe from harm and to bring about a reduction of repeat incidents.

The Restorative Approaches Team contact the police daily and take details of children who have been found, have no social work intervention and would like further support. The family are then contacted and intervention is offered in the form of mediation.

Incidents of children going missing are managed through established processes between the police and Social Care and Information is shared each half term at the multi-agency Information Sharing Group meeting. A Missing Children database is maintained on all children reported missing in the borough and who have remained missing for more than 24 hours.

Recent qualitative analysis of the effectiveness of multi-agency responses to missing children is limited. An area where we need to improve our impact is in the use of information from return home interviews to prevent repeat episodes of going missing. Return home interviews are consistently offered to and often held with young people when they return after going missing. We now need to find ways of optimising take up, and using information gathered from the interviews more effectively to help understand the triggers for young people and to support interventions to prevent them from going missing again and putting themselves at risk. Statutory guidance from the Department of Education (Missing from Care & Home 2014) also requires the LSCB to analyse and review the outcomes of all return home interviews to identify patterns and trends and therefore these areas will be a priority for action in the next year.

Each term, a strategic meeting is chaired by the Director of Children's Services and Information on children in care and placed out of borough is included in the termly Director's challenge meeting.

The Missing Children Strategic Group (MCSG) reviews all data and the CSE coordinator is a member of the Missing Children Strategic Group, as is the Practice Manager from the MASH. There are strong and established communication systems between Foster Carers, the Fostering & Adoption Team, Emergency Duty Team and the police. The Children's Rights Officer offers a 'return interview' for children who have been reported missing whilst in care, to assist the support already put in place by Social Workers and the police and the Restorative Approaches Team provides a 'return interview' to children who are not in care and also support to those who are. The low numbers appear to indicate that partnership working is having a positive impact in terms of reducing the number of incidents and the risks associated with running away. The missing children meetings are helping to ensure that

missing children who are at a high risk of harm are receiving a response from the most appropriate agency.

	Sept	Oct	Nov	Dec	Jan	Feb	March	Apr	May	June	July	Aug	Total
No of Reports	8	17	13	14	7	9	16	8	16	34	24	12	178
No of Children	8	15	10	13	6	8	13	6	13	25	24	11	152

- Children placed in Barking & Dagenham, by other boroughs, accounted for 51 (28%) of the reports. With 11 children going missing more than once (including 1 child that went missing 6 times and another that went missing 10 times).
- Children in the care of this authority, and placed in this borough, accounted for 48 (26%) of the reports (Including 1 child that went missing 4 times and 2 children that went missing 6 times).
- Children not in care accounted for 79 (46%) of the reports (including 2 children that went missing 4 times each).
- A total of 37 (24%) of children went missing more than once (placed here from out of borough = 11; children in our care=14; from family home= 12). During the 2014 inspection, Ofsted noted the low numbers of repeat incidents of children going missing.
- June 2014 records the highest for both number of reports and missing children over the last 3 years and appears to be an anomaly.

### Child Sexual Exploitation

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Child Sexual Exploitation (CSE) has become an issue of growing significance over the last few years and is a fast moving area with new reports, requirements and guidance being published on a regular basis. During this year there has been a significant acceleration of LSCB activity to address the issue of child sexual exploitation.

There is an expectation that the local response to CSE is led by Local Safeguarding Children Boards (LSCBs). LSCBs have a statutory duty to bring agencies together to safeguard and promote the welfare of children. They have a range of functions and play a key role in developing local safeguarding children policy and procedures and scrutinising local arrangements – including CSE.

The work in Barking & Dagenham has been promoted through the multi agency strategy and action plan which is managed by the CSE Co-ordinator and overseen by the Multi Agency Sexual Exploitation (MASE) group and the LSCB strategic committee responsible for CSE, which is a new LSCB committee recognising that CSE is a key priority within the structure and governance arrangements for the Board.

In August 2014, the independent enquiry into CSE in Rotherham was published. This is commonly known as the 'Jay Report'. This key report details the catalogue of historical and current issues that meant children in Rotherham were not protected from CSE. This report joined others, including Serious Case Reviews that identified failings across authorities in England to protect children from CSE.

No one knows the true scale of CSE. The Jay Report made a conservative estimate that approximately 1,400 children were sexually exploited in Rotherham over the 16 year inquiry period. The Metropolitan Police anticipates it will receive between 1,800 and 2,000 referrals a year. From January 2014 to October 2014, the Met reported 1,612 referrals of CSE, including 265 positive interventions and 55 detections.

In 2014 the LSCB in Barking & Dagenham along with the local authority implemented a revised Child Sexual Exploitation Strategy alongside an action plan that is led by the DV/CSE Co-ordinator. The CSE action plan will provide a positive framework to develop expertise and practice in working with children, young people and their families at risk of sexual exploitation. Barking and Dagenham Children's Services were also selected to take part in the Home Office pilot project aimed at improving cross agency response to CSE. This pilot took part between December 2014 and March 2015 and, as a pilot borough, we were praised by the Home Office for our innovative prevention work, for example, using ARC theatre in schools and for our creative practice in engaging vulnerable young women to stop them from running away.

The Pan London CSE Operating Protocol has been adopted locally and a Multi-Agency Sexual Exploitation (MASE) Panel initiated, which is jointly led by the Police and Children's Social Care. This Panel tracks the progress of all children who are being sexually exploited to ensure that all agencies are working effectively, and will provide an overview and analysis of CSE across the borough.

While the LSCB operate at the strategic level, a Multi-Agency Safeguarding Hub (MASH) has been introduced to improve the way local safeguarding partners work together on the ground. In response to the growing awareness of the prevalence of child sexual exploitation, there has been significant work undertaken to provide a co-ordinated response between Barking & Dagenham Council, the police, health services and other key agencies. The creation of the Multi-Agency Safeguarding Hub (MASH) has enhanced the information gathering and sharing for children where there are risk factors. MASH is a well-established referral pathway and allows for timely intelligence-sharing – assisting in the process of early identification, information gathering and the response to CSE.

The LSCB has set up a strategic committee as part of the structure to review CSE and receive reports from MASE and have oversight of the strategy and action plan. The monthly MASE meetings, chaired by the Police, determine local profiles of CSE. All statutory agencies with a responsibility for child protection are required to attend. MASE meetings bring together CSE leads to share information, review individual referrals and ensure action is being taken – providing a coordinated approach with other London boroughs and an opportunity for professional challenge and learning.

The council and the LSCB approved a Child Sexual Exploitation Strategy and have adopted the revised (March 2015) Pan London CSE Operating Protocol.

The strategy sets out four key priorities:

- **Prevention** - This priority will focus upon the early identification of children who are identified as being at risk of exploitation and the subsequent provision of early interventions to build resilience and strive to reduce the risks that they face.

### What we have done

Implementation of the London Safeguarding Children Board 'Safeguarding children abused through Sexual Exploitation' procedure
Targeted work to build resilience amongst young people through the use of Arc Theatre Raised Voices production
Identified and implemented early intervention practices
To ensure a clear referral pathway for Sexual Health services and general health services for young people who may be at risk of CSE
Introduction of a 'flag' for young people who are known to be at risk of CSE on police and social care systems
Commission post abuse support for children and young people to reduce re-victimisation
Developed specialist training for parents, foster carers and care staff supporting young people at risk of sexual exploitation
Incorporate CSE into all parenting programmes
Revision of a B&D CSE risk assessment tool
38 CSE Champions identified across all agencies – regular network meetings and training delivered.
Positive feedback from a DCLG CSE Review

- **Protection** – This priority recognises that the best approach to protection is to work collaboratively with the young person their families and other agencies to develop tailored safety plans.

### What we have done

Establishment of Multi-agency Planning Meetings (MAP) where safety plans can be effectively co-ordinated and reviewed
Commission services for young people within existing local domestic and sexual violence organisations – Hestia & Nia. PSHE 'Healthy Relationships' programme via awareness sessions in schools
Targeted work around Child Sexual Exploitation in Gangs and Groups
Agree membership, links and accountability of LSCB Strategic CSE Committee
Development of quality assurance processes including a local Problem Profile
To develop a workforce who have an understanding of CSE and risk factors, to include Foster Carers and Supported Lodgings carers

To explore the use of specialist CSE placements opposed to Secure placements

Reflection on lessons learned – report on national Serious Case Review’s involving CSE mapped to Problem Profile

- **Prosecution** - We are committed to ensuring that we will do all we can to disrupt perpetrators who are sexually exploiting children and where possible prosecute them. This priority builds on the work of the police; Crown Prosecution Service and Probation to identify disrupt and prosecute perpetrators.

### What we have done

Expansion of a Tactical Disruption approach where Police are able to gather information to secure successful prosecution of perpetrators of CSE

Developed proactive work on identifying young people involved in gangs. Gangs group established and chair is a member of MASE

To ensure that any CSE trafficked cases are reported through the National Referral Mechanism

Ensure co-ordination between CSE and public protection mechanisms such as MAPPA and MARAC. CSE administrator spans MARAC & MASE. Systems in place to cross refer known individuals.

- **Publicising** – This priority will focus upon understanding the scale of the local profile and then raising awareness amongst staff, parents and the community, so that adults are better skilled to recognise and report suspected child sexual exploitation at the earliest opportunity.

### What we have done

Understanding what is happening locally. A Problem Profile has been developed for the borough using performance data and intelligence from a range of sources and agencies.

Regular CSE training and briefings delivered to a multi agency audience

Development of clear reporting routes

Awareness raising in schools through the Arc theatre

Awareness raising for staff in the public and private sector through briefings and Practitioner Forum.

A CSE Awareness week with a variety of events, workshops and briefings.

The production of a Problem Profile was recommended in the Office of the Children’s Commissioner’s report “If Only Someone Had Listened” (November 2013). The report advised that a Problem Profile should seek to draw together all the known intelligence and relevant data held across different agencies to inform strategic decision making and local practice development. It

requires collective ownership across all partners to support its development, to review and identify key findings and intelligence gaps.

Information shared locally is crucial to understanding risk. In February 2015 a local scoping exercise or “problem profile” to identify victims or children and young people at risk was undertaken. The analysis covered the period February 2014 to February 2015. The data was extracted from Met Police CRIS reports and ICS – the LA’s children’s social care database.

The individual data was cross referenced with education, youth offending, substance misuse, access to children centres, and access to Tier 2 services, SEN and domestic violence to build up a local profile.

This piece of work aimed to provide a ‘snapshot’ in time of children & young people and risks to CSE through:

- Analysis of child sexual exploitation in the borough of Barking and Dagenham - the characteristics of CSE – who may be the victims, who are perpetrators.
- Identifying existing and emerging trends in child sexual exploitation and make recommendations as a result.
- Relating common issues for those children and young people flagged as at risk or subject to CSE.
- Providing intelligence requirements and gaps to aid future analysis and maintain a long term approach to this problem.

The Problem Profile found that:

- 95 children in total had been flagged as at risk/subject to CSE by either the Police, Children’s Social Care or by both agencies;
- 82% (78) of the children and young people were female;
- 85% were teenagers aged 13-17 - the largest age group was aged 16 (25%) 15% were aged 12 and under;
- All from sections of the community represented but 51% were white British, 16% (15) were Black or Black British, 7% (7) were Asian;
- 94% were living in the borough – 6 young people lived out of the borough
- 81% were in education
- High number of exclusions - 14 (15%) of children and young people flagged as at risk/subject of CSE had been excluded in the last 2 years to date; majority were female and white British;
- Very low numbers were SEN
- Attainment levels were very low at all Key Stages
- Around a fifth had been reported missing (18 in total) – of those 18 young people, 11 had been missing more than once. 4 young people had been reported missing between 7 and 10 times
- 11 young people (12%) were known to YOS - very low level of gang membership or affiliation (only 1)
- 5 females aged 12-17 were known to DV services

This information will be used to more fully understand the risk of CSE in Barking & Dagenham.

The LSCB Conference in 2014 focused on CSE and was well attended by practitioners from across the partnership.

It remains a high priority for the LSCB to continue to embed multi-agency work on child sexual exploitation, to promote knowledge and understanding of the issue amongst practitioners and managers, and to build an accurate profile of prevalence within the borough.

## Children affected by domestic abuse

Children who are exposed to violence in the home may have difficulty learning and have limited social skills. They may also exhibit violent, risky or delinquent behaviour, or suffer from depression or severe anxiety. Children in the earliest years of life are particularly vulnerable. Exposure to domestic abuse can place children at risk of significant harm.

The MARAC (Multi-Agency Risk Assessment Conference) is a 'victim' focused meeting where information is shared on the highest risk cases of domestic abuse. Practitioners can refer a case to MARAC when a high level of risk is identified.

Data	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March
Month	0	45	32	27	42	13	19	39	20	17	11	21
YtD	0	45	77	104	146	159	178	217	237	254	265	286

Benchmarking Data from Safelives (formerly CAADA).

- 356 cases were discussed at MARAC between October 2013 – September 2014 against a Safelives recommendation of 290
- Referrals from partner agencies – B&D 67%, London 68% MSG (Most Similar Group) 48%, National 39% - Safelives recommendation 25/40%
- Referrals from Police – B&D 33%, London 32%, MSG 52%, National 61% - Safelives recommendation 60/75%
- Repeat Referrals – B&D 25%, London 19%, MSG 26%, National 24%, Safelives recommendation 28/40%
- BME Referrals – B&D 40%, MARAC area BME population 51%
- LGBT Referrals – B&D 3%, London 1%, MSG 1%, National <1% Safelives recommendation 5%
- Referrals where the victim has a disability – B&D 5%, London 7%, MSG 5%, National 4%, Safelives recommendation 5%
- Referrals with a male victim – B&D 4%, London 7%, MSG 5%, National 4%, Safelives recommendation 4/10%

If domestic abuse continues after the first MARAC cases can be re referred and to have their situation re examined.

	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March
Month	0	9	11	5	9	1	7	3	3	5	0	5
YtD	0	9	20	25	34	35	42	45	48	53	53	58

The B&D target for the year is 28%. Benchmarking data from Safelives on the level of repeat referrals to MARAC is for 1st October 2013 – 31st September 2014 where the averages for London, our Most Similar Group (MSG) and National was 19%, 26% and 24% respectively.

## **LSCB PRIORITIES 2015-18**

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In the year ahead we will maintain our focus on the priorities we have already identified, all of which continue to be relevant, in order to ensure that our work in these areas is sufficiently robust and embedded. Our over-riding aim is to ensure that standards of safeguarding practice continue to improve and that the LSCB further develops the work it is doing to co-ordinate and scrutinise the work of all agencies in order to drive forward that improvement.

The priorities are:

- Board members are assured that arrangements are in place to identify and safeguard groups of children who are particularly vulnerable
- Board partners will own and share accurate information which informs understanding of safeguarding practice and improvement as a result
- 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
- Arrangements for Early Help will be embedded across agencies in Barking & Dagenham who work with children, young people and their families.
- 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 from and improve from these reviews

