



LEWISHAM SAFEGUARDING CHILDREN BOARD

ANNUAL REPORT

2014 - 2015

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Foreword from the Independent Chair of the Children Safeguarding Board

I am pleased to introduce the 2014-15 Annual Report for the Lewisham LSCB. This has been a year of considerable challenges and demand pressures, including rising referral rates for child protection, pressures caused by budgetary constraint and the need to maintain effective ongoing partnership working against the austerity backdrop.

During the year there has been significant organisational change with Probation Services being restructured, Voluntary Action Lewisham undergoing significant reorganisation, and budgetary reductions in key front line services, including those provided by the Local Authority. Nevertheless the Lewisham partnership has worked hard to continue to configure and co-ordinate services in an effective and efficient way, through its Children's Partnership, and the work of the LSCB is both informed by, and takes account of, these changes.

The LSCB has continued to develop its capacity to ensure and assure the quality and effectiveness of safeguarding, in particular by increasing the strength of its monitoring capacity through improved performance data, and by its culture of constructive challenge across the partnership. Through our quantitative and qualitative analysis we have identified key areas of improvement in health safeguarding practice, most noticeably the need to strengthen the sense of professional curiosity amongst health professional and the need to involve fathers more actively in working with families where there are safeguarding concerns.

Our work on CSE has continued to develop and is underpinned by good operational and strategic systems for tackling this challenging area of safeguarding practice. The lessons of Rotherham and the Jay report have been drawn into this work, and this remains a key priority area for the LSCB. The LSCB has also undertaken themed audit work on neglect and as a result has a good action plan to improve work in this area. An initiative on bullying was launched, to provide schools with supportive material to assist their work in this area. The VAWG agenda was promoted through the LSCB in conjunction with Safer Lewisham, and likewise the Prevent agenda was also addressed. Our LSCB training and development programme was strengthened this year, with a more impact based approach to evaluation being adopted, to ensure that practice standards are improved and front line staff and their managers are effectively supported through this programme.

I would like to thank all those who have contributed to the work programme of the LSCB for their support and hard work, and most particularly the chairs of sub groups . I would also like to thank the Executive Board (the funders of the LSCB!) for increasing the budget in these difficult times to enable the Chairs days and the LSCB infrastructure to be improved. Looking forward I intend to make full use of this additional resource to improve the profile and reach of the LSCB, improve our engagement with children and young people, and develop the full potential of the LSCB website.

**Chris Doorly, Independent Chair
Local Children Safeguarding Board
August 2015**

Comments by the report author

I write this report on behalf of the Board as a reflection of the progress made in improving safeguarding for the children and young people of Lewisham during 2014/15.

It takes into consideration the views of Board members, data and some personal reflections. The report provides evidence and examples of the progress and activity the Board is making across safeguarding and the way it works to support and challenge our partners in safeguarding our children and young people.

The aim to deliver 'more for less' and make best use of contributions from partner agencies continues to be a challenge. A tight reign has been maintained on LSCB finances again this year which has enabled the Board to maintain a good financial contribution position as we move into 2015/2016.

This report will show that overall the Board is carrying out its duties to a good standard and effectively carrying out its statutory functions, as well as identifying areas where it can make an impact. There are always areas for development, which the Board acknowledge and form the basis of our future work.

It is not practical to capture in words all activity within this report, in particular the mind-set and culture that continuously develops across agencies, but the report aims to highlight and evidence the main aspects.

As you read through this report whether a Board member or interested party there are three questions I ask you to consider:-

Question 1: Are we properly focused on outcomes for children and are we making a difference?

Question 2: Are we doing the right things?

Question 3: Are we doing things right?

Marisa de Jager



**Interim Business Manager
Local Children Safeguarding Board
August 2015**

1. About Lewisham Local Safeguarding Children Board

Lewisham's Local Safeguarding Children Board exists as a statutory body and has a range of roles including developing policies and procedures and scrutinising and challenging local safeguarding practice.

This report highlights partnership activity to address the identified priorities for 2014/2015.

It is a statutory requirement under section 14A of the Children Act 2004 that LSCB's produce an annual report. Under Working Together guidance 2013 and the update under 2015 reinforces this requirement and states that '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...'

While the LSCB do not have the power to direct partner agencies, they have a role in making clear where improvement is needed. Each Board Partner retains their own existing line of accountability for safeguarding (Working Together to Safeguard Children, 2013). The role therefore of the Board is to have an independent co-ordinating and challenge role around safeguarding practice across its partner agencies. This is carried out through the Full Board and each of the task groups, details of which are outlined later in this report.

The structure and the sections of this report highlights achievements, challenges and priorities for 2014-15 as well as setting out the new priorities for 2016. The priorities will be incorporated into the LSCB Business Plan and will be managed by the respective task groups.

'Sharing responsibility for Early Help' was one of the themes of the Munro Review of Child Protection Final Report: A child-centered system (May 2011). This report sets out what is being done in Lewisham to meet this responsibility. Munro also highlighted the association between 'child abuse, neglect and parental problems such as poor mental health, domestic violence and substance misuse'.

Working Together guidance set out a new approach to learning and improvement for LSCB's and placed a duty on them to develop their own local frameworks. The Learning and Improvement Framework is well established now in Lewisham and is summarised in this report.

For the LSCB to be effective it is important that its business and any learning from multi agency reviews and audits are communicated to frontline staff. Learning is communicated to partners by means of learning events, briefings, workshops and summaries.

Information is also available to professionals on the LSCB website:

<http://www.lewisham.gov.uk/myservices/socialcare/children/Safeguarding-Children-Board/Pages/default.aspx>

The LSCB is the key statutory mechanism for agreeing how the relevant agencies in each local area will cooperate to safeguard and promote the welfare of children in that locality, and for ensuring the effectiveness of what they do.

Members of the LSCB are senior managers within their organisation who hold strategic roles in relation to safeguarding / child protection. They are expected to be able to speak to their organisations with authority, commit their organisations on policy and practice issues and hold their organisations to account on their safeguarding / child protection practice. The Boards sub groups report direct to the Executive Board who are the custodians of the LSCB Business Plan and ensure that allocated objectives are actioned by the groups.

This report is intended to provide the 'rigorous and transparent assessment' appropriately demanded and will also be submitted to the Chief Executive of the Council and the Chair of the Health and Wellbeing Board.

2. The LSCB structure and its governance arrangements

The LSCB structure and its task groups were established in 2012 following a comprehensive review. This has remained in place with good representation. The LSCB is a statutory board in its own right under regulations and guidance. It operates within the matrix of the local structure of partnerships and its own structure must be seen in this context (**Appendix A**).

The main board coordinates the main work of the LSCB. The work programme and tasks of the LSCB main board are laid out in the Business Plan 2012-15, addressing the collective priorities of the partnership in terms of safeguarding as it relates to safeguarding.

The LSCB Business Plan 2012-15 coincides with Lewisham's Children and Young People's Plan 2012-15 and the LSCB task groups are responsible for driving this work forward. The Lewisham Children and Young People's Plan can be viewed here:

<https://www.lewisham.gov.uk/myservices/socialcare/children/Documents/CYPP2012-15.pdf>

See also **Section 9** of this report for information regarding the work and activities of the task groups during 2014/2015.

The LSCB main board feeds into the Executive Board, whose main responsibilities are to direct and oversee the business of the LSCB and to ensure there is a focus on monitoring the strategic horizon and taking into account, understand and respond to the opportunities and threats posed by the national and local policy and resource changes.

The work of the LSCB contributes to the wider goals of improving the well-being of all children. Within the governance arrangements its role is to ensure the effectiveness of the arrangements made by individual agencies and the wider partnership to safeguard and promote the welfare of children.

Lewisham has benefitted from good partnership working and strong leadership in the children's services arena. There has been good feedback from inspections of Children's Social Care in relation to inter-agency case management.

In November 2014 *The Lewisham Protocol outlining safeguarding partnership arrangements* between the Local Safeguarding Children Board (LSCB), the Safeguarding Adults Board (LSAB), the Health and Wellbeing Board (HWB), the Children and Young People Strategic Partnership Board (CYPSPB), Community Safety Partnership Children in Care Council (CICC) and the Corporate Parenting Board (CPB) was agreed and implemented by the Executive Board. This is a robust protocol that focuses, investigates and improves the broader safeguarding practice in Lewisham to

ensure procedures and processes are in place to minimise risk and maximise the safety of children and young people in Lewisham. This protocol was shared with all the Chairs and respective Board members.

Business managers and Chairs of these Boards remain in regular contact to cross reference and link priorities and business plans to avoid duplication and to ensure accountability for safeguarding arrangements.

For a copy of this please see the *Governance document* under the Section “*About the Board*” on the LSCB website:

<http://www.lewisham.gov.uk/myservices/socialcare/children/Safeguarding-Children-Board/Pages/default.aspx>

Please see Appendix A for a breakdown of the LSCB’s budget for 2014/2015.

3. Chairing and Membership

The Lewisham LSCB has been chaired by Chris Doorly since 2011. The Chair is funded for 20 days per financial year to fulfil her role. This was increased during 2014-15 to 30 days pa in recognition of the increased complexity and span of the LSCB’s work. This includes chairing both Executive Board and LSCB main board, as well as representing the Board on the Children and Young People’s Partnership Board and at external events. Chris also chairs the Adults Safeguarding Board in Lewisham.

The composition of the board is in line with statutory partners listed in Working Together 2013. The LSCB has succeeded in continuing partnerships across the various agencies and agreeing governance arrangements. Please see **Appendix B and C** for a full list of LSCB members.

4. Context of the LSCB

4.1 National

Section 13 of the Children Act 2004 requires each local authority to establish a Local Safeguarding Children Board (LSCB) for their area and specifies the organisations and individuals (other than the local authority) that should be represented on the LSCB.

Please go to www.legislation.gov.uk/ukpga/2004/31/section/13 for more information.

The LSCB has a range of roles and statutory functions underpinned by Section 14 of the Children Act 2004, including developing local safeguarding policies and procedures and scrutinising local arrangements. The statutory objectives and functions of the LSCB are described as follow:

- 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 in the area, and
- To ensure the effectiveness of what is done by each such person or body for those purposes.

Working Together 2013 and the revised Working Together Guidance 2015 reinforces the increased responsibilities on the LSCB to deliver a stronger leadership role around local safeguarding practice and directly influence multi-agency and single-agency requirements as well as requiring the establishment of a single assessment approach and supporting framework. The revised regulatory framework also includes a judgement of the effectiveness of local safeguarding boards, with a

focus on assessing the impact of the board's activities on frontline practice and the positive difference made to children and local communities.

There has understandably been great attention given on a national level to the abuse suffered by children and young people from Child Sexual Exploitation, Radicalisation and Gang and Youth Violence. The actions taken with regard to this in Lewisham are set out in this report in **Section 7** of this report.

4.2 Lewisham in context – The Child's journey

4.2.1 Population

The information used to understand the needs and wellbeing of the people of Lewisham, is obtained from the Lewisham's Joint Strategic Needs Assessment (JSNA).

Stretching from the banks of the Thames in the north, to the borders of Bromley in the south, the 13.4 square miles of Lewisham encompass diverse communities, speaking over 170 languages. There are a large number of residents from black and minority ethnic (BME) backgrounds. BME school population continues to rise.



Lewisham's population size is estimated to be 284,325. Lewisham has a young population with 25.4% of the population being under the age of twenty. This compares against the inner London average of 22.7% and the London average of 24.5%. The Lewisham population is projected to grow across all age groups over the next five years. For this period the largest percentage growth rate is in the 20-64 year old age group.

There has been a sustained rise in the birth rate in Lewisham for several years, reflecting a similar rise in London and the country as a whole, although the trend in birth rate in Lewisham is expected to level off in future years. The population of children, in particular those aged 5 to 14, will continue to rise for the foreseeable future because of the previous rise in births.

Deprivation is increasing in Lewisham, which appears to be linked to the increase in child

protection rates. The 2010 Index of Multiple Deprivation ranked Lewisham 31st out of 354 local authorities in England. It is estimated that 20 335 children (ages 0-18) live in poverty in Lewisham. For further information please read here: <http://www.lewishamjsna.org.uk/>

4.2.2 Lewisham Multi Agency Safeguarding Hub and Early Intervention

a) Early Help

Working Together to Safeguard Children (2013) identifies the critical features of effective Early Help as well as outlines the 'continuum of need' as follow: *"Where need is relatively low level individual services and universal services may be able to take swift action. For other emerging needs a range of early help services may be required, coordinated through an early help assessment, as set out above. Where there are more complex needs, help may be provided under section 17 of the Children Act 1989 (children in need). Where there are child protection concerns (reasonable cause to suspect a child is suffering or likely to suffer significant harm) local authority social care services must make enquiries and decide if any action must be taken under section 47 of the Children Act 1989."*

Lewisham's strategic approach to early intervention follows the above Working Together guidance and accepts *Recommendation 10 of the final Munro Report on child protection of specifying the range of professional help available to local children, young people and families, through statutory, voluntary and community services, against the local profile of need set out in the local Joint Strategic Needs Analysis (JSNA).*

Lewisham continues to use the Common Assessment Framework (CAF) and Team around the Child/Family methodology to improve outcomes for children and young people with the purpose that the necessary services will be in place for the earliest possible support. This approach of early intervention ensures that all professionals across the partnership work in an integrated way to identify and meet children's needs as soon as possible in order to prevent escalation to Children's Social Care.

See **Section 11** for further information.

b) Lewisham Multi Agency Safeguarding Hub

The purpose of the MASH is to improve the identification of unknown risk by quickly building a fuller picture of the child and experience of the child's journey. It involves partners from across the borough to share knowledge about children and families in order to better assess risk and identify the appropriate support and services for the needs of children and families;

- The MASH aims to reduce delay in the screening process by prioritising the collation of the early information from the network and passing cases to the Assessment team only when the appropriate threshold has been met- getting it right first time for children and families and reducing re-referrals;
- Lewisham's MASH went live in December 2012.
- Lewisham's MASH professionals are currently screening all incoming Police Merlin reports/CAF/EDT and requests for information. Immediate safeguarding concerns and assessments are transferred to the Referral and Assessment Teams.

See **Section 11** for further information.

4.2.3 Looked after Children

Lewisham has 508 Looked after Children (LAC). This is a slight increase from the 501 Looked after Children (LAC) indicated at December 2013. See **Sections 5.2, 7 and 11** for further information.

4.2.4 Increase in S47 investigations and Children becoming subject to Plans

There has been a significant increase in S47 investigations and an increase in children becoming subject to Child Protection Plans during 2014/15, which has been a London and National trend. A report requested by the Lewisham Safeguarding Children Board into this matter concluded that the thresholds for the children subject to these plans were appropriate and there was a need to protect these children by making them subject to Child Protection Plans (CPP). Work was begun also to look at whether more could have been done earlier to stop these children becoming subject to a Child Protection Plan. Lewisham has a robust risk based partnership approach to safeguarding children which enables the partnership to ensure that appropriate support is provided to parents to ensure that children subject to a Child Protection Plan (CPP) are safe and sound in their own home. See **Sections 5.2, 7 and 11** for further information.

5. Key performance data

5.1 Performance and Management framework

The primary focus of the LSCB is on the 'staying safe' outcomes of the Children and Young People's Plan 2012-2015 – 'It's Everybody's Business', and to ensure that agencies are meeting their statutory requirements in safeguarding and promoting the welfare of children and young people. The LSCB is responsible for ensuring that the appropriate action is taken by the partnership to address any areas of concern in relation to the key indicators and holding agencies to account.

Working Together guidance refers to interagency working to safeguarding and promote the welfare of children under Sections 11 (4) and Section 16 of the Children Act 2004. The guidance reinforces the duty of Local Safeguarding Children Boards (LSCBs) to monitor the effectiveness of local services and legislative requirements. Put simply – *"safeguarding is everyone's responsibility"*. Chapter 3 of *Working Together* specifically outlines the responsibility for all LSCB members and the performance management function for LSCBs to *"use data and, as a minimum, should:*

- Assess the effectiveness of the help being provided to children and families, including early help;
- Assess whether LSCB partners are fulfilling their statutory obligations set out in chapter 2 (of the guidance);
- 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

It is important for the LSCB to have a clear view of what safeguarding looks like across the partnership in Lewisham and which areas are causing concern. The LSCB needs to hold agencies to account for improving and addressing areas of safeguarding which are causing concern.

Nationally collected data supports the availability of data for the purposes of accountability and transparency at national and local level and provides benchmarks of national performance of which performance can be judged locally. Performance management represents a systematic,

intelligence-oriented approach to managing and improving people, resources, processes and activities to achieve objectives, within a learning and improvement culture where all agencies and workforce within the LSCB remit can align their own priorities and actions to accomplish the LSCB's objectives. This can only succeed if there is access to robust, timely data. The LSCB has implemented a robust performance management framework in 2014/2015.

5.2 Tracking the Journey Of The Child

The number of contacts and new referrals received for the year ending 31/03/15

- 21962 contacts
- 2584 referrals

Number of repeat referrals and % in comparison with previous year

The year ending 2013/14
- 267 % of repeat = 11.1%

The year ending 2014/15
- 355 % of repeat = 12.5%
SN (15.9%), England (23.4%)

Number of referrals progressed to Child and Family assessment during the year ending 31/03/15

- 2790

Number of single assessments completed on time during the year ending 31 March 2015

- 2494 *89.1%
SN (74.1%), England (82.2%)

Number and % of S47's requiring investigation 2014/2015
% of S47 enquiries that went onto ICPC for 21013/14 – SN (49.3%), England (45.8%)

2014 - 2015	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
No. S47 enquires	68	91	134	133	79	86	120	123	122	139	112	161
% that												

Number of CP plans 2014/2015

2013 - 2014	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Avg.
No. children on CPP	251	279	291	271	280	303	326	322	310	305	307	302	296

2014 - 2015	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Avg.
No. children	297	287	293	307	299	313	330	349	363	378	389	379	332

How many children do we currently have LAC, including SGO's?

- 508 Current LAC (removing the 18yr olds)
- 15 Current open cases where an SGO was granted in 14/15

Number of permanency plans for all over 12's within 16 weeks coming into care
(a) had a care start date
(b) were in their first placement for 16 weeks or more

- 48 children

Number and % of Looked after children placed in the borough/ Number and % of looked after children placed outside of the borough

At the 31 March 278 (56.7%) looked after children were placed outside the LA boundary and 211 (43.1%) were placed inside the borough

Outside LA SN (61.4%) England: (30.3%)	Inside LA SN (38.6%) (70.0%)
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How many children 16 plus do we have in a stable placement?

21 children were subject to special guardianship orders, 19 (90%) were made to carers other than former foster carers

The table below gives placement of children in care who are aged 16 and 17 year ending 31 March 2015

Placement type	No. of children	%
Agency Foster Placement outside LBL	8	6%
Foster Placement with relative/friend within LBL	1	1%
In lodgings/living independently (no formal support)	9	7%
Homes and Hostels	15	11%
LA Foster placement within LBL	3	2%
Placed (under placement of Children's Regs 1991) with parent/person with parental resp	1	1%
Placement with other foster carer - not long term or IFA	24	18%
Placement with other foster carer- long term fostering	1	1%
Foster placement with relative or friend	1	1%
Placement with other foster carer	40	29%
Residential school	3	2%
Temporary Move	2	1%
Vol hostel/semi independence with support	24	18%
Young offender inst./Prison	5	4%
Grand Total	137	100%

The table below provides information of children in care during the year ending 31 March 2015 aged 0-16 by placement type

Placement by age	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	Total	%
Foster placement with relative or friend- long term fostering	0	0	0	0	0	1	1	0	0	1	1	0	2	0	0	0	0	6	3%
Foster placement with relative or friend- not long term or FFA	1	2	1	0	2	1	2	0	0	1	0	3	0	1	0	0	0	14	7%
In lodgings/living independently (no formal support)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0%
Secure unit	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	1%
Homes and Hostels	0	0	0	0	0	0	0	0	0	0	0	1	0	0	2	0	0	3	1%
Mother & baby unit	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0%
NHS/other estab providing medical/nursing care	4	8	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	13	6%
Placed (under placement of children regs 1991) with parent/person with parental resp	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	3	1%
Placed for Adoption with consent (under section 19 of 2002 Act) with	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0%

current foster carer																				
Placement with other foster carer - not long term or FFA	17	5	1	4	5	4	2	2	2	4	1	4	4	2	1	6	8	72	35%	
Placement with other foster carer- long term fostering	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	2	1%	
Foster placement with relative or friend	0	2	0	0	0	2	0	0	1	0	0	0	0	0	0	0	0	5	2%	
Placement with other foster carer	1	14	4	4	1	2	7	4	4	3	3	2	0	1	0	8	6	64	31%	
Regulation 24 Temporary approval of family of family & friends as foster carers	0	0	0	1	0	0	0	1	0	0	0	0	0	0	1	0	0	3	1%	
Residential care home registered under 1984 act	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1	3	1%	
Residential school	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	2	1%	
Vol hostel/semi independence with formal support	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	1%	
Young offender inst/prison	0	0	0	0	0	0	0	0	0	0	0	0	0	1		1	8	10	5%	
Grand Total	25	34	8	12	12	15	18	14	15	19	16	22	19	19	18	31	45	206	100%	
Percentage	12%	17%	4%	6%	6%	7%	9%	7%	7%	9%	8%	11%	9%	9%	9%	15%	22%	100%		

The data shows that Lewisham is still performing well compared to its statistical neighbours in the majority of areas of core child protection practice.

The considerable increase in referrals this year for example has not pushed performance away from a good and timely response, and sound decision making, as evidenced by the percentages of cases that meet criteria and the data on re referrals.

The LSCB stands alongside Lewisham's Children and Young People Strategic Partnership Board. The LSCB holds responsibility for identifying the safeguarding aspects of all of the Every Child matters five outcomes, and has a key role in overseeing the 'Staying Safe' outcome as identified within the Lewisham Children and Young People's Plan 2012 – 2015 (CYPP).

6. Partnership context and response to national priorities implemented locally

6.1 Community Rehabilitation Company (CRC) and the National Probation Service (NPS)

The LSCB has been briefed and updated continuously regarding transformation change activities with regards to the London Probation Trust which was dissolved in 2014 and with the work being transferred to two new organisations, the National Probation Service and Regional Community Rehabilitation Companies (CRCs). The new owner of London CRC is [MTCnovo](#) which operates CRC in London and Thames Valley on behalf of the Ministry of Justice (MoJ). MTCnovo took full ownership of the contracts on 1 February 2015 and is a venture between the third, public and private sector to provide rehabilitation and offender management services. The venture comprises of Management & Training Corporation (MTC) and novo – a consortium of a number of public, private and third sector shareholders including RISE, A Band of Brothers, The Manchester College, Thames Valley Partnership and Amey.

On 1 February 2015 the provisions in the Offender Rehabilitation Act came into effect. Any offender who serves a prison sentence of less than 12 months will be automatically supervised by CRC for a year following release. This is intended to break the cycle of reoffending, which is prevalent among those who serve short prison sentences. Work is now under way to implement these changes, as well as looking at new, innovative ways to help reduce reoffending under the new Rehabilitation Activity Requirement.

The Transforming Rehabilitation Programme has brought significant changes, notably the creation of a new, smaller National Probation Service (NPS). The focus of work for NPS is on court and parole reports, undertaking all initial assessments to determine which provider will manage a case, management of offenders who are MAPPA registered, pose a high risk of serious harm, or it is in the public interest to do so, victim liaison work, management of approved premises, advising the courts or Secretary of State on sanctions or recall to custody and consultation on changes in risk of harm.

The LSCB will remain sighted on the transformation changes to both CRC and NPS and ensure that all the necessary safeguarding links and processes are clearly defined within the new structure in the process of embedding this in practice. The new bodies will need to work with the LSCB in order to develop meaningful data sets and KPI's to assist the board in understanding how they are meeting their safeguarding requirements

6.2 Violence against Women and Girls (VAWG)

In response to domestic and sexual violence offences against Woman and Girls (VAWG) the Safer Lewisham Partnership continue to take responsibility for this area of work, which is supported by a unified and comprehensive approach to tackling violence against women and girls through a systemic VAWG Plan.

During 2014/2015 a review into the issues affecting gang associated women and girls was carried out following concerns reported in the press, which detailed the dangerous and troubling situations some women and girls encountered because of their association with gangs. During the course of the review, it was reported that violence against women and girls was regularly used as a means of conflict and/or retaliation between groups of boys and men. The secretive nature of this type of violence and the damage it could cause in the lives of women and girls were also reported on and key concerns about the concealed nature of violence and abuse.

Lewisham Borough historically has high levels of domestic violence and there remains a general problem with underreporting. The Safer Lewisham Partnership has kept the LSCB informed and updated about development of the Lewisham's violence against women and girls strategy, which highlighted the need for additional information and intelligence in a number of areas. Most concerning was the reports that that violence against women may also be affecting the lives and life chances of young women and girls.

In Lewisham there are targeted multi-agency approaches to disrupting youth violence and protecting women from domestic violence. Partners organisations in Lewisham share information about the most difficult cases and put in place processes to disrupt the influence of violence and abuse in the lives of affected women and girls. A range of different approaches are being deployed across London to raise awareness of gang violence and to prevent young people from becoming victims. The Safer London Foundation is at the forefront of this work.

See **Section 7** of this report for further information.

6.3 Youth Gangs and Violence activity

The Safer Lewisham Partnership also leads on gangs and violent activity in the area. Despite the inherent difficulties in defining gangs, all of the available information about gang membership demonstrates that gangs are almost all made up of boys and men. Nonetheless, in September 2014, it was reported that there had been an increase in the numbers of women associated with gangs as perpetrators. Police officers stated that the changing activities of gangs indicated a more prominent role for female members. It was reported that:

“Lewisham mirrors a trend across the capital where drug dealing, mostly outside London, is supplanting conflicts over territory and vulnerable females have a high value as couriers.’ (Report to Safer Stronger Communities Select Committee, 10 September 2014)

It was reported that recent operations in Lewisham indicated that gang members were increasingly using girls and young women to safe house drugs and weapons. It was also reported that gangs involved in so called ‘County Lines’ and drug dealing were using young women and girls who may previously not have had any contact with the local authority or the Police. It was recognised that this made it exceedingly difficult to predict the numbers of girls and women involved in gang related activity. The LSCB monitors and coordinates all activities through annual reporting of information.

MOPAC recommends that community safety partnerships (in Lewisham this is the Safer Lewisham Partnership) should adopt the ACPO definition of gang-associated women and girls to assist with the identification and assessment of women and girls at risk. The definition is as follows: “...a woman or girl who is a family member of or in an intimate relationship with a gang nominal’ (MOPAC 2013, p6)

The Safer Lewisham Partnership’s new coordinated VAWG plan sets out all objectives and actions. This has been presented to the LSCB in March 2015 to raise awareness with the partnership but also to cross reference business objectives and priorities and the different strands of the VAWG strategy.

See **Section 7** for further information.

6.4 Child Sexual Exploitation (CSE)

In relation to Child Sexual Exploitation (CSE) Lewisham has adopted and implemented *The London Child Sexual Exploitation Operating Protocol 2nd Edition*. The Protocol sets out the procedures for safeguarding and protecting the welfare of children from CSE through partnerships arrangements. Lewisham therefore assess, challenge and provide an enhanced, effective service to reduce the harm and threats posed to children and young people from CSE.

In March 2015 *The Operation Makesafe* campaign led by the Metropolitan Police Service in addition was launched in Lewisham to raise awareness of CSE within the local business community including hotels, pubs, fast food and other licensed premises.

See **Section 7** for further information.

6.5 Radicalisation and Extremism

The Lewisham partnership has proactively implemented the government's counter terrorist strategy, referred to as CONTEST to plan and manage responses in relation to radicalisation. Lewisham is one of several 'Prevent priority areas' in London. The Channel programme, an initiative led by the Police, is embedded in practice to ensure that areas of concerns are identified appropriately to provide support to those at risk of being drawn into violent extremism. Frontline staff have been given clear guidance in relation to the process and pathways of referrals to the multi-agency panel and information sharing protocols.

Section 7 outlines key activities by the LSCB to ensure coordination of the Prevent strategy implementation in Lewisham and how the LSCB and the partnership is working together to raise an awareness and understanding of the risk of radicalisation in the area and how key establishments such as Schools and Colleges in Lewisham play an important role in assisting in particular with identification of risk, harm and need for following the 'Trojan Horse' recommendations in Birmingham and the subsequent Government reports.

7. Delivering the LSCB priorities for 2014/2015

The LSCB has undertaken the following work during 2014/15 in respect of each priority.

7.1 Neglect remained a priority having been identified in the Serious Case Review bi-annual report as an area of national concern.

Activity highlights against this priority:

As a result a neglect resource document was developed and embedded in practice with the Lewisham partnership to ensure that all frontline practitioners and managers are familiar with guidance on the recognition of children in need, particularly those who have been neglected. The neglect resource document can be found on the LSCB website:

<http://www.lewisham.gov.uk/myservices/socialcare/children/Safeguarding-Children-Board/Pages/default.aspx>

In June 2014 the LSCB has endorsed the MESI Audit Plan which included multiagency audits of 5 children who had been subject to Child Protection Plans under the category of neglect and 10 cases of children supported by the Early Intervention Service. Serious Case Reviews in Lewisham in 2008/ 09 highlighted the need to improve multi-agency intervention in cases of neglect.

The cases of 15 children were randomly selected by the Early Intervention Service and Children's Social Care (CSC) for the purpose of the audit. Key agencies were involved in the case audit. The early intervention cases were selected from Common Assessment Frameworks (CAF's) completed by professionals and sent to Children's Social Care CSC. There was good evidence that 8 of the CAF's were initiated immediately after neglect was identified. In the remaining two cases, both mothers were previously Looked after Children (LAC) from Lewisham and now young adults with additional needs. The quality of the CAF's reportedly varied. In 9 cases practitioners shared relevant historic and current information, with consent or without consent. School and health practitioners were well placed to provide accurate analysis of the child's presenting health needs.

The LSCB has continued to draw from its audit findings and to work through its interim neglect task group in addressing this challenging area of work. It receives quarterly performance reports on CAF's, TAC's and outcomes of Early Intervention Services.

7.2 Child Sexual Exploitation continues to be a national priority, driven and informed by the work of the Children's Commissioner.

Child Sexual Exploitation (CSE) remains a key priority of the LSCB. CSE is an increasingly societal concern which is accelerated by the use of modern technology. It is a multi-faceted and has been highlighted following serious case reviews, rare prosecutions, Ofsted thematic inspections and most recently the publication of the Rotherham Inquiry and the Jay report recommendations.

Activity highlights against this priority:

Lewisham LSCB has compiled and embedded a robust action plan which incorporates recommendations and actions deriving from the Jay report, Ofsted thematic inspection, most recent studies, and research and practice guidance.

Progress and review of the action plan is monitored by the LSCB's CSE task group on a regular basis. The CSE taskgroup holds responsibility for the action plan and keep it under continues review. The Monitoring, Evaluating and Service Improvement (MESI) task group of the LSCB is supporting the work of the CSE task group by conducting multi-agency audits and sharing the learning accordingly.

The CSE task group reports to the LSCB on a quarterly basis.

CSE is also one of the three priorities of the Lewisham Violence Against Woman and Girls (VAWG) strategy as set out by Lewisham Community Safety Partnership and Lewisham Children and Young People's Plan 2012-15.

Lewisham borough has adopted the Pan-London CSE Protocol as its strategy and encourages professionals to refer to this document and use it as guidance when concerns arise that children might be at risk of or suffering sexual exploitation. The Protocol sets out the definition, principles, warning signs and categories of CSE. The Lewisham CSE procedures is based on the Pan-London Child Protection Procedures and provides the Lewisham partnership with clear guidance as to what action to take when concerned about CSE.

The LSCB ensures that children identified as being at risk of sexual exploitation are receiving support that is appropriate to their needs by reviewing the partnership response for all children and young people identified as being at risk of CSE.

Lewisham is utilising the Multi Agency Sexual Exploitation (MASE) meetings to share information for the purpose of mapping links, gathering intelligence and establishing a clear picture of CSE in Lewisham to ensure appropriate action is taken to safeguard children. This does not replace individual operational responsibilities for agencies but enhances the approach due to robust information sharing in a strategic environment. High risk young people and children are also presented at the Youth MARAC for multi-agency risk assessment. A representative from the Youth MARAC is also a member of MASE to ensure effective information sharing. These meetings are jointly chaired by the Police and Children's Social Care. Lewisham's Youth MARAC also combines referrals from Lewisham Hospital A&E and Kings College Hospital A&E departments for a variety of issues relating to violence, although these are not always gang or CSE related. A number of cases do however meet the criteria to go to Youth MARAC conference. Those which are known to be involved in gang related activity are referred to Serious Violence Multi -agency Team, and others are passed directly to Children's Social Care or other officers as appropriate and /or for MACE consideration.

Lewisham's Ending Gang and Youth Violence team are working closely with the Youth MARAC to develop good practice in strategic and operational planning. The Serious Violence Team works with the Early Intervention Child Sexual Exploitation leads to ensure that there is a uniform approach by school safeguarding leads in responding to the needs of gang associated girls and CSE related matters.

Police and Children Social Care also hold a joint CSE database. The police intelligence database ensures comprehensive profile mapping, not just in Lewisham but also to identify and engage with partners and share information across borough boundaries. The Pan London Police CSE database is also discussed at CSE task group meetings and provides a bigger picture as to the nature of the problem in Lewisham compared to other London Boroughs. Lewisham Children's Social Care holds a database of all children coming to notice due to suffering or at risk of sexual exploitation. This database is updated and tracked on a regular basis and shared with the Police to ensure appropriate intelligence gathering and intervention. Any themes emerging are discussed at MASE and CSE task group meetings.

'Operation Make Safe' was launched in Lewisham on 18 March 2015, targeting all commercial businesses and licensed premises with the aim to raise awareness and support businesses with ensuring they spot the warning signs and take appropriate action. This initiative and training will be further rolled out to other organisations and professionals such as schools and educational establishments, GPs and pharmacists, residential children's homes and foster carers and faith groups across Lewisham.

The LSCB, together with the Voluntary Action Team from Lewisham launched a faith Based Children's Project in Lewisham 2014/2015 and this was used as an opportunity to brief faith groups on Operation Make Safe and CSE.

In September 2014 the Safer London Foundation reported their increasing concerns about sexual exploitation, victimisation and abuse in schools. Safer London Foundation work across London to tackle issues of sexual exploitation, violence and abuse. Empower is a programme delivered by the Safer London Foundation to support women and girls affected by gang violence. The Foundation had officers embedded within multi-agency teams in local areas, including Community Safety, Children's Social Care and Youth Offending Teams. There is close liaison with the Child Abuse Investigation Team, Sapphire Unit, Missing Persons Units, Borough gang's teams & Trident Command in Lewisham.

The children's society works with young women individually and in groups to reduce the risk and impacts of CSE.

The LSCB is dedicated to ensuring the workforce has the appropriate knowledge and skills to identify and address sexual exploitation. The LSCB therefore commission a number of CSE training events and briefings which can be attended free of charge for all professionals working with children and young people in Lewisham. Individual agencies also provide CSE training for their staff on an ongoing basis.

Child Sexual Exploitation remains at the forefront of the work of the Lewisham Safeguarding Children Board to ensure all possible measures are taken to keep children safe from being sexually exploited. Communication in relation to CSE is through:

- LSCB website information:

<http://www.lewisham.gov.uk/myserVICES/socialcare/children/Safeguarding-Children-Board/Pages/default.aspx>

- LSCB Newsletter
- Lewisham Life
- Information leaflets and posters
- Operation Make Safe campaign publicity materials and presentations
- Young Mayor and advisors forum
- Children in Care Council
- School forums

7.3 Looked After Children, including Care Leavers and children placed out of borough and placement stability is an ongoing high priority for the LSCB due to the vulnerability of these children.

Activity highlights against this priority:

The number of Looked After Children (LAC) has remained fairly stable at approximately 508 (of whom 38 are disabled) over the last year. There has been a significant increase in referrals to Children's Social Care, an increase in S.47 investigations and children being made subject to Child Protection Plans in Lewisham. However there have not been a corresponding rise in LAC numbers as a result. This area is kept under review. The stability of LAC continues to be one of the highest priorities for the LAC service. Each child looked after by Lewisham has an individual care plan which reflects their unique needs and these plans are reportedly reviewed at six monthly intervals.

In Lewisham 77.9% of LAC are living with foster carers. The remainder live in semi-independent and residential units, specialist health units (children with a disability) and a small number are being assessed with parents as part of a rehabilitation plan. Since July 2014 Lewisham have been developing 'Staying Put' arrangements. This initiative allows young people to remain in foster care until the age of 21. If they are in full time education they can also remain with family during holidays from College or University. Encouraging the use of Staying Put is likely to support placement stability in the longer term. Currently, Lewisham has 33 young people subject to Staying Put arrangements.

Lewisham has introduced an evidence based approach known as The Secure Base. All social workers have been trained and work with colleagues in the child's network to provide additional resources and support to try and prevent placement breakdown.

Those children who are identified as living in fragile placements will have a placement stability meeting at an early stage. Agreement for placement moves is given at a panel chaired by the Director of Children's Social Care.

LAC are at increased risk of Child Sexual Exploitation (CSE). Therefore awareness raising and training of foster carers, teachers and other relevant professionals is taking place to ensure signs can be understood quickly and children safeguarded. LAC placed out of borough are at increased risk as some of their professional support network is at a distance, as well as information about local hot spots of CSE.

A risk assessment tool and awareness training for children's practitioners and the wider workforce ensures early identification of need, risk and harm elements. The MESI task group conducted a multi-agency audit on placement stability. Please see **Sections 5.2 and 11** of this report for the findings and learning from this audit.

7.4 Female Genital Mutilation (FGM) is an area which the LSCB has focussed on during 2014-2015, derived from the Violence Against Woman and Girls (VAWG) strategy.

The LSCB's focus was to improve the identification both of FGM risks and of actual cases, ensuring better protection and prosecution of offenders as appropriate.

Activity highlights against this priority:

Frequently FGM and other Harmful Cultural Practices are misunderstood and pose particular challenges for professionals with responsibility for safeguarding children from avoidable risks. The belief that such risks are rare and needn't concern us have been challenged in recent years not least by central government and Ofsted. The multi-agency children's workforce is urging against marginalizing the needs of children and young people whose lives could be devastated by harmful illegal, and in the worst case life threatening cultural practices.

Lewisham LSCB raised awareness of FGM at the Harmful Cultural Practice Conference in November 2014. This conference was held alongside specialist officers from the Met partnership team Project Azure and Project Violet about the associated risks to children, how to improve recognition of risks, some of the barriers to sharing information encountered in their work and ways to overcome those barriers. Lewisham LSCB joined forces with Greenwich, Bromley and Bexley Safeguarding Boards in delivering this extremely insightful conference. Feedback from the conference were very positive.

Lewisham's Communities Strategy 2008-2020 is accompanied by a Strategic Action Plan and sets out how the Partnership will work together to tackle crime and disorder priorities building on best practice around effective crime reduction and clear objectives and outcomes to be achieved. FGM is incorporated into this Action Plan.

To mark "*International Day of Zero Tolerance to FGM*", Lewisham together with the Africa Advocacy Foundation (AAF) had an interactive seminar on FGM on 5th February 2015. The aim was to bring together faith leaders, community groups and borough professionals to discuss FGM. The conference had over 100 people in attendance, with a local Imam and local pastor delivering presentations on faith perspectives on FGM. The health implications on FGM were also covered by a public health specialist. At the end of the day, a victim's perspective was shared by a community advocate who is campaigning to end FGM in practicing communities.

Feedback from the conference was overwhelmingly positive and welcomed by delegates in attendance, who have called for more local seminars on FGM and tools to equip professionals in tackling FGM.

7.5 Increase in Child Protection referrals.

Activity highlights against this priority:

Referrals to social care continue to rise. During 2014/ 2015 a decision was made to audit 84 cases which did not progress to a conference in the month of July 2014. The rationale for this selection is based on the assumption that Section 47 investigations were appropriate for the cases that led to an ICPC. The decision to convene a conference is quality assured by a highly experienced Team Manager for Child Protection Chairs and has been audited by an independent auditor who agreed that thresholds had been applied correctly.

The audit findings were that all Section 47 Investigations tested were appropriately carried out in the 96% cases as stated in this report. All Child Protection data is being monitored and findings were reported to the LSCB. This is a priority that the LSCB will continue to monitor.

See **Sections 5.2 and 11** of this report.

7.6 Bullying remained a priority area for the LSCB and activities were tracked through an action plan to support schools in their anti-bullying work, aiming to improve the quality and effectiveness of responses to bullying through best practice guidelines and through work to be commissioned on cyber bullying.

The LSCB is committed to providing safe environments for children and young people, and therefore to effectively addressing this priority.

Activity highlights against this priority:

In 2014/2015 the LSCB re-launched the anti-bullying resource document to the Lewisham partnership. This can be found on the LSCB website as follow:

The creation of this resource was as a result of discussions, workshops and focus groups with a number of organisations and in association with young people themselves to provide a useful and clear resource. This partnership document provides useful and up to date information to all organisations in Lewisham that offer services to children and young people. It includes up to date guidance and links to useful organisations. A link to the NSPCC Anti-Bullying Policy check-list is included to support organisations in developing or revising their own policies.

There has been considerable research undertaken by OFSTED, “No place for Bullying”, which investigated pupils’ experiences of bullying alongside how effective schools deal with bullying behaviour. The findings indicated that where the culture and ethos was positive and pupils developed both empathy and took responsibility for their actions bullying was reduced and positive attitudes were developed .

An annual Anti-Bullying conference was held in November 2014 which included Anthony Smythe from the Beat Bullying charity. Anthony was a key note speaker at the event and young people were able to discuss their experiences of being bullied and informed the audience how this shaped their lives. All schools were invited to the event and information was circulated through the teachers mailing system. All professionals present were provided with a copy of the LSCB Anti-Bullying Resource document.

7.7 Private Fostering remains a priority for the LSCB and we look to see an increase in the number of placements identified and improvements in the quality of the environment being offered.

According to the DfE information, Lewisham has the 3rd largest number of private fostering arrangements in London, with only Barnet and Tower Hamlets having higher numbers. Lewisham continues to have the highest number of private fostering arrangements being monitored by the local authority in comparison to neighbouring boroughs.

Activity highlights against this priority:

Children are placed in private fostered arrangements for a range of reasons such as:

- Parents are in custody or detained by immigration authorities (8%).
- Parent(s) suffering from serious health difficulties which made them unable to care for their children (28%).
- Young people whose relationship with their parent(s) have broken down and they are staying with friends/family (16%).
- Children who have been sent to the UK to stay with distant family members for a 'better life, often including educational purposes (16%).

During 2014/2015 the majority of notifications came from Other Local authorities (28%), followed by the schools admissions service and schools (21%). A large number of referrals are received from Guide Point Ltd (15%), an agency based in Lewisham that provides training courses to children/young people from abroad in the UK and places them with host families. These students are typically from China and attend St Dunstan's which is a private school located in Lewisham.

In 01/04/2014 – 31/03/2015 there has been a slight decrease in the number of notifications from the Health sector, this area will need to be targeted for further promotional work and awareness raising.

A target of 36 notifications was set for 2014/2015 and promotional activity was planned to ensure a widespread awareness of the requirement to notify the Local Authority. This target was exceeded and 38 notifications were received. 23 of these cases went on to become private fostering arrangements and 15 had other outcomes which are detailed below.

- In 4 cases the child/young person returned to the care of their parent/person with parental responsibility before the private fostering assessment was completed. This tended to be because the Council was notified at the latter period of the arrangement or when the carer was in a crisis situation which then resulted in the parents resuming care of their child.
- In 5 cases the private fostering arrangement was stopped and the child/young person was referred into the Children's Social Care referral and assessment team due to safeguarding concerns.
- In 3 cases following further checks by the private fostering social worker, it was discovered that the arrangements did not actually meet the criteria of private fostering.
- In 3 cases although we were notified of the arrangement in 2014-2015, the arrangements were not due to start until the new financial year.

It is reported that all privately fostered children were found to be in safe placements where their educational and leisure needs were met. In cases where the arrangements were unsafe the private fostering arrangement was terminated. Lewisham has prohibition processes in place.

A report with findings and activity will be submitted to the next board in September 2015.

7.8 Early Intervention is a priority for this year, with the LSCB due to undertake a review of the current thresholds to test whether they remain appropriate, and also to ensure that outcomes are clearly embedded in early intervention plans so that improved information on the effectiveness of these services can be assured.

Activity highlights against this priority:

The LSCB monitors key performance indicators for early intervention through the Performance framework and annual reporting by the service. See **Section 11** for further information.

7.9 Safeguarding in Health was a priority area, drawn from Serious Case reviews findings 2013/2014.

Activity highlights against this priority:

Two serious case reviews undertaken by the LSCB this year have shown some developmental areas for health professionals. The common theme in the two cases was a lack of professional curiosity about the lives of the parents, the need to be more cognisant in respect of fathers of new born babies, and the importance of timely recording of information and its transfer, especially given the mobility of the Lewisham population.

Actions plans were developed to address these areas, and embedded in practice.

The LSCB has received progress reports on the action plans throughout the year presented June 2014 and again in December 2014. Further audits are planned to test effectiveness and compliance and to monitor and evaluate that impact and outcomes in this area are improving. See **Sections 9 and 11** for further information.

7.10 Lewisham's LSCB Website has been under constant review and is regularly updated through working closely with the Lewisham communications unit.

Activity highlights against this priority:

Working Together to Safeguard Children (March 2013) does not set out any guidance for LSCB's on communicating and raising awareness. However, to fulfil its objectives and carry out its functions the LSCB needs to raise awareness in the wider community, including faith and minority communities and among statutory and independent agencies, including employers, about how everybody can contribute to safeguarding and promoting the welfare of children. This should involve listening to and consulting children and young people and ensuring that their views and opinions are taken into account in planning and delivering safeguarding and promoting welfare services.

A wide range of learning and training materials can be accessed through the website by the partnership. There is also up to date information for children and young people, parents and carers and members of the public.

During 2015/2016 we want to improve the website further to assist us with the above guidance, making it interactive and informative to both professionals and to the local community by using short video clips as an example.

7. 11 Road Traffic Safety was monitored by the LSCB in 2014/2015 and the impact of work is sitting with the Director of Public Health in this area. It was reported that in 2014 the number of deaths decreased significantly from 2013/2014.

An annual report is due September 2015 with findings.

7.12 Safeguarding in the third sector remains a priority area.

Activity highlights against this priority:

The LSCB awarded Voluntary Action Lewisham (VAL) £10,000 to deliver a comprehensive safeguarding training and support programme in Lewisham.

The training, funded by the LSCB aimed to help faith groups increase their awareness of safeguarding good practice and to improve their systems and processes when working with children and young people in any faith based setting. A target of increased referral rates for safeguarding from this sector was set to ensure this work had a defined impact on practice.

Despite the announcement of an internal restructure at VAL in December 2014, the Safeguarding programme will be launched on 30 June 2015.

7.13 The voice of Children and Young People. Whilst generally a strong feature of the Lewisham Partnership, we want to make sure that the LSCB continues to effectively listen to children and young people whilst not duplicating activities undertaken by the children's partnership.

Activity highlights against this priority:

We continuously strive to improve engagement and consultation with children who receive statutory Social Care Services.

Looked After Children:

For Looked after Children and care leavers both in Lewisham and out of borough there is an opportunity to provide their views through "view point."

Young people can contribute to their review and care plan in a number of ways. In 2013-2014 99.8% of young people aged 4 & above participated in their review, exceeding the target of 99.3%. This trend has continued in 2014-2015.

Viewpoint has been used by approximately 25% of looked after children, this increased to an average of 28.5% in February and March 2015.

All looked after children are informed of their right to an advocate to help them to have their voice heard. In 2015-2016 we can build on this by gathering data about how many young people are supported by an advocate and the effectiveness of this in ensuring their voice is heard.

A participation manager supports young people to have their voice heard and to be involved in service improvement. IRO's champion better outcomes for looked after children by discharging their statutory functions to ensure their wishes and feelings are acted upon, and that the authority and partners are held to account for delivering their care plan. Young people have told us that they do not like it when their social worker changes when they become eligible for leaving care services. A restructure of the service took place, amalgamating the service so that there is continuity of social worker during and beyond this transition. The annual report of the IRO was presented to the Corporate Parenting Board, in future this report will also be presented to the LSCB.

The key role of the Corporate Parenting Board (CPB) is to ensure that children and young people can make their views known on all aspects of the corporate parenting agenda. The CPB offers advice to the Young Mayor and Cabinet on corporate parenting issues and ensures an environment whereby Members and young people work together to address the needs, aspirations and future life chances of Lewisham's Looked After Children. It aims to empower children and young people to be involved in decision making with adults and involve them in the development and evaluation of services and to ensure their views are heard.

Parental Attendance at Child Protection Conferences:

During 2014-2015 parental attendance at conferences ranged from 76.4% to 58.6%, against the target of 80%. This represents a decline in attendance compared to 2013-2014, which ranged from 62.3% to 75.6%. It is important that parents are encouraged to attend conferences in order to support them to engage with the progression of the plan towards safe outcomes for their children. This decline has therefore given CSC cause for concern and will remain an area for focus in 2015 - 2016. Previously there was not provision to record when other significant family members attend, this is now in place on the recording system.

The parent for parent partnership has identified advocates to support parents during the child protection process. This is being reinvigorated to strengthen attendance and engagement with the process.

Children's Views about Child Protection:

The views of children were obtained by social workers and presented to conference in an average of 95% of cases during 2014-2015. This is reported to senior managers of Children Social Care every month and followed up to ensure the wishes and feelings of the child are taken into account.

The LSCB performance framework monitors that the voice of the child is evident in Early intervention, MASH and Social Care assessments, and that work undertaken are consistently of a good quality. The monitoring of outcomes from further development to evidence positive impacts on the lives of children and their families, as well as identifying areas for further service development are tracked and monitored by the MESI task group.

7.14 Inspection Findings have been incorporated into the work of the LSCB as appropriate.

Activity highlights against this priority:

During 2014/2015 and following the Ofsted thematic inspection in 2013/2014 the LSCB received update reports to track and gauge how well recommendations were implemented and change have been brought about following the reported findings.

7.15 Serious Case Reviews, Management Reviews and Audits previously undertaken by the LSCB will continue to be monitored until all of the outcomes are achieved from the

Activity highlights against this priority:

The LSCB case review panel is responsible for this area of work. During 2014/ 2015 two SCR's concluded and the case review panel undertook two management review. Please refer to **Section 9** of this report for further information.

7.16 Performance Management remained a priority for the LSCB during 2014/2015.

Activity highlights against this priority:

Our detailed business plan continues to draw on information as it unfolds, in order to effectively challenge throughout the year those areas of practice which cause the LSCB any concern, and to assure that these are quickly addressed. The LSCB has also embedded a newly developed and robust partnership performance management framework that ensures key performance indicators from across the partnership is reviewed and analysed.

See **Section 5** for further information.

8. Section 11 audits considered and key issues identified

Section 11 of the Children Act 2004 places a duty on key people and bodies to make arrangements to ensure that their functions are discharged with regard to the need to safeguard and promote the welfare of children. The application of this duty will vary according to the nature of each agency and its functions. Section 11 places a duty on:

- Local authorities and district councils that provide children's and other types of services, including children's and adult social care services, public health, housing, sport, culture and leisure services, licensing authorities and youth services,
- NHS organisations, including the NHS Commissioning Board and Clinical Commissioning groups, NHS Trusts and NHS Foundation Trusts
- The police, including police and crime commissioners and the chief officer of each police force in England and the Mayor's Office for Policing and Crime in London
- The British Transport Police,
- The Probation Service
- Governors/Directors of Prisons and Youth Offender Institutions,
- Directors of Secure Training Centres, and
- Youth Offending Teams/Services

Section 11 submissions for Lewisham organisations have been divided into two cohorts and has been presented to the LSCB on a rota basis for scrutiny and comments. The following agencies' section 11 reports were considered during 2014/2015:

- Community Services (including Crime Reduction and Supporting People, Sport and Leisure Services, Community and Neighbourhood development, Adult Social Care, Joint Commissioning)
- CYP Commissioning
- Youth Service
- Early Intervention Service
- Strategic Housing
- London Probation Service
- Community Rehabilitation Company
- CAFCASS
- Lewisham and Greenwich Healthcare NHS Trust
- Lewisham Clinical Commissioning Group
- CAIT
- Children Social Care

Section 11 audits were presented to the LSCB at a dedicated meeting in February 2015 where information was scrutinised and challenged. Further recommendations were made to include in respective action plans.

9. Task groups

The Boards task groups are the key mechanism for challenging practice and any gaps or areas for development in service provision, ensuring that the Board is contributing to make a difference to safeguarding practice across Lewisham. The groups are well supported by partner agencies and all elements have shown considerable progress against objectives set by them as part of the Business Plan. They are all functioning well and their work areas and their terms of reference are in the continue to be reviewed to ensure they remain fit for purpose.

9.1 Child Sexual Exploitation task group (CSE)

Chaired by: Geeta Subramaniam Head of Crime Reduction and Supporting People

The CSE task group was established to conduct an initial scoping exercise and to build on a protocol with the Metropolitan Police and other key agencies to tackle child sexual exploitation in the borough and to ensure Lewisham LSCB fulfil its statutory duties outlined in Safeguarding Children and Young People from Sexual Exploitation: Supplementary Guidance to Working Together to Safeguard Children, and to advise the Board on key CSE issues.

The CSE task group is drawing up a guidance and procedure document for dealing with CSE appropriately, based on the work done nationally by the office of the children's commissioner. In addition, the police PAN London Child Sexual Abuse Operating Protocol has been disseminated to the CSE task group for their consideration and consultation. This protocol was updated during 2014 and as adopted by the Lewisham partnership as part of the overall CSE strategy.

Currently there are local procedures in place with MACE (Multi Agency Child Exploitation) meetings implemented once a month. The action plans are robust and the Jay recommendation are incorporated as well as the Ofsted Thematic inspection findings. Regular training and briefing events takes place as part of the LSCB training programme and awareness raising as part of Operation Make Safe launched on 18.03.15 in Lewisham Borough.

Police and Children Social Care track the CSE dataset weekly.

Lewisham was also involved in a peer review with Croydon during 2014/2015.

See **Sections 7 and 11** for further information.

9.2 Monitoring, Evaluation and Service Improvement task group (MESI)

Chaired by: Eileen Collier, Service Manager Children's Quality Assurance, Lewisham CYP

This is a well-attended group with positive engagement from a variety of partner agencies. This task group is responsible for monitoring and evaluating the effectiveness of what is done by agencies both individually and collectively to safeguard and promote the welfare of children. This task group is responsible for quality assuring practice by conducting multi-agency audits to identify lessons to be learnt across the partnership. This task group is also tasked with scrutinising and challenging agencies section 11 audits to ensure safeguarding arrangements are robust and

effective in keeping children safe. There is a comprehensive audit plan that includes four main audits. These audits incorporate matters arising and based on the findings of the following:

- Serious Care Reviews
- Management Reviews
- Previous Audit findings
- Performance data

During 2014/2015 the MESI Group has been tasked by the Lewisham Safeguarding Children Board to audit the following areas and action plans were implemented and embedded in practice:

9.2.1 Placement stability

Looked After Children are one of the most vulnerable group of children and placement breakdown can have a detrimental effect on a child's well-being and long term outcomes. The LSCB therefore wanted to ensure that placements made are the most appropriate and taking into consideration the needs of the child to try to avoid a breakdown of placement as well as establish if alternative / remedial action could have been taken sooner to avoid placement breakdown. The audit was initiated to determine how agencies contribute to the stability of placements and then to identify any areas of improvement.

The MESI Group selected ten cases of Looked After Children. Five of these children were placed within Lewisham and five are placed out of borough.

Findings of the audit are summarised below as:

- The challenges for foster carers are generally greater than those for adopters, with issues of facilitating family contact, lack of certainty of permanence, move on, compounded at times by insufficient information about the child.
- There is evidence of delay in timely support for 'risky' placements. In order to achieve permanence for LAC in stable foster care placements, placement support should parallel the post-adoption support process for maintaining stable adoptive placements by having placement support meetings from the onset of the foster placement, not just as a reaction to issues when they escalate which could have been predicted as evidenced in this Review. Support/stability meetings of placements at risk of disruption should be chaired by the team manager, and SMART minutes of the meeting recorded on file.
- There is a need for better initial and ongoing assessment of risk of instability linked to care planning, and for the care plan to be progressed through coordinated professional partnership work, and to formally include a Placement Stability and Support Plan. There is a need for a record of clear placement plans outlining specific and realistic actions and support required (SMART) and agreed.
- Consideration to be given to increasing the number of dedicated respite f/carers for emergency use to step in more proactively if/when issues escalate, to reduce pressure from the potentially disrupting placement.
- There is evidence of a need to focus on building the resilience of existing f/carers by a commitment to maintaining an ongoing rolling programme of development/training targeting all foster carers.
- Consideration to be given for the IRO Manager to assume responsibility for LAC placement stability across the service areas of LAC, FSW, Adoption and CWD.
- To maintain and update a spreadsheet of placements at risk of disruption on a monthly basis,

collating information from placements, fostering, social workers, IRO monitoring case notes, and Performance to provide senior managers with placement stability information via an ongoing early warning alert system.

- Internal LAC processes to be accessible and streamlined for all staff in a SMART way with clear timescales to avoid delay, with a robust commitment to promote permanence and improve collaborative working to improve outcomes for LAC.
- There is a need for more effective and accessible provision of CAMHS, and more effective liaison/partnership working between education and CAMHS.

9.2.2 Police Protection Audit

The Police have powers under Section 46 of the Children Act 1989 to remove children to a safe location for up to 72 hours to protect them from 'significant harm¹'. Police do not require an order to take such step and it is sufficient for Police to believe a child is at risk of significant harm.

Findings reported:

During 2014/2105 Lewisham had a high number of Police Protections. Findings from the audit indicated that although good communication between the agencies was reported, there are differences in the interpretation and application of the threshold for Police Protection. It also found that despite good communication and effective child focused practice in the majority of cases, there is a lack of recorded evidence of strategy discussion and the impact that this action has on children.

9.2.3 DNA Health Audit

Following the reviews of the deaths of Victoria Climbié and Peter Connelly, NHS organisations were asked to ensure they had in place protocols or procedures to follow up missed appointments (HM Government 2009). Commissioners of health services therefore, include in the safeguarding performance monitoring a question on the presence of up to date safeguarding policies. The issue of missed followed up appointments is obviously important but has to take account of the resources available.

However, it is essential that promoting and safeguarding the welfare of children and young people is integral to all NHS Trust policies and procedures.

The National Service Framework for Children (NSF Core Standards 2004) states that:

'Children and Young People failing to attend clinic appointments following referral from their General Practitioner or other professional may trigger concern, given that they are reliant on their parent or carer to take them to the appointment. Failure to attend can be an indicator of family's vulnerability, potentially placing the child's welfare in jeopardy'. The NSF further states, 'A local system should be in place to identify children and young people who do not attend an appointment following a referral for specialist care, so that the referrer is aware they have not attended and can take any follow up action considered appropriate to ensure the child's needs are being met'.

The Care Quality Commission (CQC) review "Safeguarding Children. A review of arrangements in the NHS for safeguarding Children", July 2009 also identified that there should be a process in place for following up children who fail to attend outpatient appointments.

During 2014/2015 a multi-agency learning review in Lewisham of a case of neglect identified a significant theme around missed health appointments for the family concerned. The LSCB requested a review of the arrangements in place to ensure that vulnerable families who miss appointments are identified and that appropriate follow up measures are in place.

Findings reported:

- The audit of the policies was carried out in December 2014. In summary policies were provided and included references to referral to other professionals of children and families who fail to attend. One of the policies required updating as they were more than 5 years in circulation. This audit establishes that in Lewisham policies are in place.
- The following identifies themes of note.

Lewisham and Greenwich Trust (LGT)

The policy met the criteria of the audit and included flow charts of actions to take. It was considered by the reviewers as a good example of a DNA policy.

General Practice (GP)

The auditors did not request an individual policy from each GP practice in Lewisham. The Named GP for Safeguarding Children in Lewisham has issued a GP Safeguarding Standards Document. This document is posted on each GP surgeries own internal websites and is accessible via a GP portal on the Clinical Commissioning Group (CCG) website. The document contains a model standard GP safeguarding policy and procedures template. All GPs are asked as part of contract monitoring and Care Quality Commission (CQC) reviews to demonstrate that the practice has an up to date safeguarding policy.

South London and Maudsley NHS Foundation Trust (SLAM)

Two policies were audited for SLAM. SLAM CAMHS – Title of the Policy: “CAMHS Policy for Responding to Clients Who Do Not Attend Appointments (DNA)” This policy indicates that it is for review June 2015.

On review of the document in relation to “Does the policy include discussion of DNA families at safeguarding supervision?” It was found that it is not discussed specifically in supervision. However, the policy does state that the case should not be closed unless a discussion with a senior member of staff takes place if there is evidence of risks/concerns.

Crime Reduction initiative (CRI)

This policy is a standard operating (SOP) procedure on disengagement from services.

In respect to “Does the policy include discussion of DNA families at safeguarding supervision?”

“The policy refers to families already known to Children’s Social Care (CSC).” However, the SOP does not appear to advise discussion on families with children where there are risks of substance misuse behaviour or disengagement but children are not known to CSC. Auditor has discussed with CRI suggestion to include actions to take if risks from disengagement but children are not known to CSC.

9.3 Policies, Procedures and Training Task group (PPT)

Chaired by: Maureen Gabriel, Designated Nurse Safeguarding and Looked After Children, Lewisham CCG

The Department for Education (DfE) has published and updated the 2013 version of the Working Together guidance. This replaces 'Working together to safeguard children' (2013). Changes include:

- referral of allegations against those who work with children
- clarification of requirements on local authorities to notify serious incidents
- a definition of serious harm for the purposes of serious case reviews.

Consultation on these changes was shared across the Lewisham partnership and responses coordinated by the LSCB as follow:

[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.](#)

In Lewisham to meet the requirement to draw up local procedures we have always used the Pan London Child Protection Procedures to inform our practice and meet this requirement. The Pan London Procedures have been updated during 2013/14 after a rigorous consultation process.

Lewisham LSCB has its own interagency threshold document in line with the Working Together guidance, which can be found on the LSCB website.

This is a summary of the activity of the Policy, Procedure and Training group (PPT) to support the LSCB in meeting the responsibilities as outlined above in the Working Together statutory guidance.

Achievements/ challenges

- The application process for LSCB training courses is now fully electronic
- PPT partnership attendance increased and was stable during 2014-2015 with regular multi-agency attendance including the voluntary sector.
- Partner agencies continue to make a financial commitment to the LSCB which allows for the training programme to be provided to everyone who works with children and families in Lewisham at no cost. There is a non-attendance charge
- Evaluation was used during 2014-2015 but requires further revision to capture feedback 3 months post training course
- Notable Increased attendance on courses
- Work plan was completed
- On-going review of policy/ procedures e.g. mental health protocol

The training programme for 2014/15 included the following courses:

- Female Genital Mutilation
- Safer Recruitment
- Understanding Gangs and Gang activity
- Child obesity

- Sexual Violence
- Safeguarding children affected by parental substance misuse
- Working with challenging hard to help families
- Advance course on domestic violence
- Safeguarding level 2
- Race, culture and faith belief systems in safeguarding children
- Neglect - an analytical approach

Many of the courses above were repeated from last year as they proved to be popular. In addition to the above, a number of lunchtime briefing sessions were offered as part of the training programme. These bite size sessions are an effective method of learning and information sharing, which makes use of local professionals' knowledge and experience and is delivered mainly by practitioners not tutors:

- Missing children
- Young carers and hidden harm
- Child sexual exploitation awareness in Lewisham
- Safe sex and young people
- Fabricated and induced illness
- Forced marriages
- MARAC: Lewisham domestic violence process
- Learning from serious case reviews (local)
- Violence Against Women and Girls (VAWG)

The 3 level evaluation process introduced during 2014-2015; which is based on the London Safeguarding Board's framework has proved a challenge when trying to retrieve feedback from participants 3 months post course.

The 3 level evaluation is set out as:

- Pre-evaluation – to be completed before the training event
- End of course evaluation – to be completed after the training event
- Post course evaluation – to be completed 3 months from the training event to evaluate impact on practice. This includes feedback from supervisors on the impact of training on casework practice.

The PPT group are considering a strategy to address how to achieve a reasonable response after 3 months that can provide meaningful evaluation.

The training needs survey therefore currently provide an alternative method of receiving feedback on courses and is another opportunity to gain an understanding of the value of the courses and how the learning has been implemented in partner organisations.

The Work plan

The PPT completed the work plan including the LSCB receiving assurance on the effectiveness of the single agency training provided by individual partner agencies. Agencies presented on a rota basis their training strategies and course contents. It is envisaged that during the next year agencies will be asked to present the outcomes of the evaluation of their courses to the PPT. This would also facilitate the LSCB with further evidence of any gaps in training.

Therefore enabling the multi-agency training to be delivered to complement or supplement single agency training. The LSCB undertakes a comprehensive programme of workforce

development and training via the Policy, Procedure and Training (PPT) task group. This group is responsible for developing policies and procedures, monitoring and evaluating the effectiveness of single and multi-agency training in order to safeguard and promote the welfare of children. The PPT group will be responsible for driving the strategy and reporting progress regularly to the LSCB.

9.4 Communications and Publications Task group (C&P)

Chaired by: Business Manager, Local Safeguarding Children Board

The C&P task group is responsible for communicating and raising awareness of the need to safeguard and promote the welfare of children and how this can best be done by agencies, children and young people, families and the community.

The C&P group's core business is to promote the key messages of the LSCB, which are:

- Children and young people in Lewisham must be safeguarded
- It is everyone's responsibility to safeguard children and young people: everyone has a part to play
- Organisations in Lewisham are committed to working together to safeguard and promote the welfare of children and young people
- The LSCB coordinates and ensures the effectiveness of organisations working with children, young people and families in Lewisham

The C&P group has been updating the LSCB website on a regular basis during 2014/2015 and ensured important safeguarding documents being disseminated across the partnership, such as the revised Working Together document, PAN London Safeguarding procedures and reports by the Office of the Children's Commissioner. This group is committed to raising awareness and promoting National events across partner agencies which keeps the subject of Safeguarding high on local agenda and increases effective inter-agency working.

This group produces a quarterly newsletter which is disseminated across the partnership and published on the LSCB website. The newsletter is an effective tool for informing the partnership of new initiatives and services available and to promote ongoing safeguarding work across the Lewisham partnership.

9.5 Serious Case Review Panel

Chaired by: Eileen Collier, Service Manager Children's Quality Assurance, Lewisham CYP

9.5.1 Serious Case Reviews

The Serious Case Review (SCR) Panel is responsible for conducting Serious Case Reviews, as well as individual management reviews. Lessons and learning from these reviews are disseminated and shared across the partnership by means of briefing sessions and learning events.

During 2013/2014 Lewisham LSCB commissioned two serious case reviews. The cases referred were similar in that both involved the use of maternity and other health services where potential risks to the unborn child due to parental histories could have been better identified with a more questioning approach.

Case 1: Child O

This case is in respect of a child who sustained serious injuries in the care of her parents when she was twelve weeks old. Both parents have denied knowing how the injuries were sustained. Both parents have a history of abuse and neglect themselves, especially the father. The histories did not come to light during the course of their involvement with maternity and other health services although if professionals had been more curious and questioning this was likely to have been the case, especially as regards the father of the child. The baby suffered non accidental injuries for which the parents were convicted.

Case 2: Child S

This case is in respect of a baby who was admitted to hospital one week after birth due to a significant weight loss, jaundice and positive toxicology for heroin. The baby's mother has a longstanding history of drug use and had a previous child removed from her care. No referral had been made to Children's Social Care in line with the London Child Protection Procedures.

The serious case review process review findings identified by the Individual Agency Report writers, was tracked by means of SMART action plans.

Review Process:

Both SCR's were conducted using a systemic, thematic model, which included direct input from those practitioners who had contact with Child O and S. The SCR's were conducted in accordance with the guidance in Working Together 2013 and as a measure for learning to ensure children's safety. It is not an enquiry into what happened and separate from any criminal proceedings. Its aim is not to put blame on any practitioner or service, but to learn lessons in order to improve practice and better outcomes for children.

There were parallel police processes for one case which were ongoing at the time when this review was conducted and the conclusion was that the final report was not published until these processes have been finalized. Both parents in this case received a custodial sentence due to the harm suffered by their child.

Care proceedings were initiated and both children have been successfully adopted.

Detail of reviews:

The Serious Case Review (SCR) panel of the Lewisham Safeguarding Children Board (LSCB) decided that, in accordance with the provision of Working Together guidance, the SCR's should be conducted using a method, which included direct input from those practitioners most closely with Child O & S. This included submissions of Individual Agency Reviews (IAR's), practitioner Learning Events, key themes and addressing any matters by means of SMART action plans. These plans have been in place since the learning / areas of improvement were identified and most actions have since been completed and changes have been embedded in practice.

Key themes and lessons learned from the reviews:

Much of the learning was in relation to health systems. Key lessons identified:

“Invisible” father

1. Father’s social and medical history, criminal history, no reason for that to be connected to Mother.
2. Professional’s omission to routinely explore pregnant mother’s relationships, father of child etc.- reliant on self- reporting

Professional curiosity

1. Health professionals taking mothers presentation at face value rather than exploring possible deeper social issues has been addressed through training in improving professional curiosity to improve safeguarding of unborn babies.
2. Summarising and coding of GP records when mothers transfer to another practices – the Lewisham summarising protocol now introduced has been nationally acclaimed as best practice.
3. Greater consistency in pregnancy booking arrangements has been achieved across Health services in Lewisham.
4. Information exchange between Acute and Community Health Services and Maternity discharge forms have been improved.

Communication between professionals and recording/casework processes

1. Mainly in relation to GP records, summarizing and flagging of vulnerabilities.
2. Generally GPs in Lewisham can expect to have a 30% turnover rate of their patients annually.
3. How those patients’ medical records are transferred between GP Practices is critical in the sharing of relevant information.
4. GP Practices are responsible for summarising incoming records and then ensuring they are appropriately coded and flagged so that important information is available to the GP during an 8 to 10 minute consultation with each patient. Improvements have been made to achieve this locally.

9.5.2 Management Reviews

The SCR Panel considered two further cases and concluded that the criteria for a SCR was not met. However, it was felt that there were important issues to address in respect of both cases (**Cases F & R**) and Management Reviews were therefore completed.

Both reviews made some recommendations which are tracked by the LSCB by means of a SMART action plan. Some changes and improvements to partnership working has already been implemented as a result of these reviews.

The outcomes and learning from these reviews have been shared with the partnership by means of briefing sessions. These are ongoing as part of the LSCB annual training programme.

9.6 Child Death Overview Panel (CDOP)

Chaired by: Dr. Donal O’ Sullivan, Consultant in Public Health Medicine, Public Health

The Child Death Overview Panel (CDOP) is responsible for reviewing the deaths of all children in Lewisham. This became a statutory duty in 2008.

CDOP terms of reference are in line with the functions set out in paragraph 8 and 9 of chapter 5 of Working Together guidance. Lewisham CDOP aims to better understand how and why children in Lewisham die and use the findings from the comprehensive, multidisciplinary reviews to take action to prevent other deaths and to improve the health and safety of children in Lewisham.

CDOP submits an annual report to the LSCB, detailing the outcome of the reviews of the deaths of Lewisham children carried out in the year of the report. The report identifies any modifiable factors which can then form the basis of active work by the LSCB and others, to better prevent child deaths and to improve services for children and their parents. The Panel's report for 2014/2015 is to be submitted to the September 2015 meeting of the LSCB.

10. Executive Board

The LSCB main board feeds into the Executive Board (Appendix D), whose main responsibilities are to direct and oversee the business of the LSCB and to ensure there is a focus on monitoring the strategic horizon and taking into account, understand and respond to the opportunities and threats posed by the national and local policy and resource changes. The Executive also controls resources for the LSCB and can direct or support staff in making contributions and provide financial support.

The Executive Board keeps a log of potential risks for the LSCB. The Risk Register is a standing item on the agenda and it is the responsibility of the Executive Board to manage these risk appropriately to ensure these from escalating.

11. Safeguarding compliance – the Voice of the Lewisham Partnership

The LSCB receives a regular suite of information from the Local Authority Performance team which enable both Local Authority and some partnership information to be analysed. However the LSCB is in the process of prioritising the data it requires in the shape of a few simple key performance indicators from partners, these being indicators which should go to the heart of the safeguarding task and effectiveness. These will be identified in 2015/16 for implementation during this year, providing a baseline from which to assess progress over time.

Child Abuse Investigation Team (CAIT)

Report by: Greg Pople – Detective Chief Inspector, Sexual offences, Exploitation and Child Abuse South Region

The Child Abuse Investigation Command is part of the Sexual Offences, Exploitation and Child Abuse Command (SOECA) of the Metropolitan Police. Within SOECA the Child Abuse Investigation Teams (CAIT) remain as separate units. The primary objective of CAIT is to make London a safer place for children.

The teams aim to achieve this through preventing and detecting reported crimes against children. We investigate sexual abuse, physical abuse, neglect and emotional abuse. In addition we investigate Sudden Unexplained Death in Infancy, under what is known as Project Indigo. In addition to the above investigations we also deal with adult victims who have been abused during their childhood

CAIT works closely with partner agencies, predominately children's social care, on a daily basis to protect and keep children safe. We achieve our aim by having manager to manager discussions

with social care on all referrals received into the unit. We deploy officers to undertake joint visits with social workers, we conduct risk assessments and take actions to safeguard children. This includes the use of police protection and arrest of offenders where appropriate.

How have we made a difference to children?

We place victim care at the centre of our investigations, provide 24x7 experts in the field, and continually review crimes and risk profiles to ensure optimal responses for vulnerable children. Our approach to Total Victim Care within the Metropolitan Police Service (MPS) ensures monitoring on all crimes, to ensure that victims, parents and/or guardians are updated on a regular basis and have a good understanding of how the investigation is progressing at all stages.

The CAIT now provides a 24 hour, 7 days a week cover throughout the MPS. Experts are on duty at all times that can provide an improved service and deal with incidents as they arise. With this approach we are able to provide the best response to all vulnerable children, at all times. In addition there is a daily meeting chaired by Senior Management Lead 7 days per week with senior manager leads responsible for CAIT's in which all new allegations of crime are scrutinized to ensure correct action is taken and children safeguarded.

The Command reviews crimes on a daily basis, identifying children on a CP plan, incidents that may be critical, or outstanding suspects that are identified as an enhanced risk. Any crime not managed in accordance with the victim charter is flagged to the unit Detective Inspector to ensure we continue to fulfil our commitment to victims of crime.

What have we learned?

Over the past years SOECA has set up a new investigation unit, the Sexual Exploitation Team (SET), officially launching in February 2014. SET was established to address the increasing problem of child sexual exploitation and the difficulty in investigating this area of crime: "A common feature of CSE is that a child or young person does not recognise the coercive nature of the relationship and does not see themselves as a victim of exploitation" - Association of Chief Police Officers CSE Report -2013).

A dedicated Met wide team of experienced detectives is better placed to investigate this type of crime rather than CAIT teams. This is because CAIT have seen a marked increase in reported crime and could not effectively put resources into these difficult and protracted enquiries. The SET consist of two teams within the MPS and they deal with category 2 and 3 investigations and provides advice to Borough police with regard to category 1 incidents.

What do we need to do better?

Over the past years high profile cases in the media have raised public awareness of child abuse. In turn the CAIT team has seen a particularly high increase in work load. Not only increase overall in each crime type, but a rise in historic allegations, which are often protracted and therefore require more resources. This has had an effect on officer availability to deal with day to day referrals. The senior management team have secured an increase in staff workforce across the command to address the rise in crime allegations and a series of recruitment campaigns are underway across the region to fill the current vacant positions. In addition the south region has implemented a Regional Historic Investigation Team to manage complex and historic allegations of crime

across Lewisham and the whole south regional boroughs to ensure consistency and allow CAIT's to focus on the investigation of current allegations of child abuse

In addition the regional DCI lead (DCI Greg Pople) is currently leading on two initiatives to improve the service provided in relation to safeguarding children. One is the review into the co-location of Child Abuse Investigation team specialist within MASH hubs and the second is the implementation of a Safeguarding Children's Reference Group (SGCRG) met-wide to provide transparency and partnership collaboration in the investigation of child abuse and safeguarding children.

Lewisham Borough has seen an increase on reported child abuse for all offence types of 16% on the previous year which is a consistent trend across the MPS. Despite this the CAIT has continued to bring offenders to justice for child abuse and has seen a sanction detection rate for the year of 25.5%, 2nd in MPS.

Whilst there are no formal targets set for the 2015/6 year the command continues to make it the main priority of safeguarding vulnerable victims and bringing more offenders to justice in line with the One Met Strategy. In addition, collaborative working with partners is key to increase confidence within the MPS and the initiatives regarding the MASH co-location and SGCRG support this.

Lewisham Borough Police

Report by: Detective Chief Inspector Justin Davies, Lewisham Borough CID

Lewisham Borough Police is charged, among other objectives, with making Lewisham safer for children and young people. This has been achieved by crime prevention, crime detection and assisting in the assessment of the needs of children and their families by sharing information with partners and other relevant children support services.

To meet our safeguarding statutory requirements Lewisham Borough Police has worked toward achieving the following five 'Every Child Matters' outcomes: Be Healthy, Stay Safe, Enjoy and Achieve, Make a positive Contribution and Achieve Economic Well-Being.

At the heart of our priorities is a focus to protect the rights of the child and the lives of children and ensure that in the policing of child related investigations, the welfare of all children is paramount.

In addition to our emergency response a number of specialist units working within Lewisham Borough Police work towards the safeguarding of Lewisham's children and their families including the Community Safety Unit, Missing Person & Child Sexual Exploitation Team, Public Protection Desk and School Liaison Officers.

During the course of the year Lewisham Borough Police have worked to take effective action against offenders so that they can be held accountable through the criminal justice system while safeguarding the welfare of children and young people. Additionally we have utilised the collation of information and intelligence to identify both threats and opportunities for intervention to protect children, and to adopt a proactive multi-agency approach in conjunction with the Child Abuse Investigation Command where appropriate.

A key piece of work by Lewisham Borough Police throughout the year was to successfully launch Operation Makesafe. This is a campaign led by the Metropolitan Police Service in partnership with London boroughs raising awareness of Child Sexual Exploitation within the business community including hotels, taxi companies and licensed premises.

The campaign aims to identify potential victims of Child Sexual Exploitation and, where necessary, deploy police officers to intervene prior to any young person coming to harm.

Businesses such as hotels, licensed premises and taxi companies have been provided with awareness training to assist them in recognising the signs of Child Sexual Exploitation. They are directed to call 101, quoting Operation Makesafe, should they suspect suspicious behaviour or activity on their premises or in their vehicles.

Within Lewisham Borough in conjunction with the Local Authority we have sought to expand Operation Makesafe to refresh Lewisham's response to Child Sexual Exploitation embarking on a training program for safeguarding professionals including to date Police, Education, and Health and youth workers.

A key focus for the forthcoming year is to review our information sharing practices with our partners, be this through the MASE, MARAC or MASH to ensure that we are all maximizing our opportunities to identify, intervene or disrupt safeguarding issues for children and young people within Lewisham Borough.

Lewisham Clinical Commissioning Group (CCG)

Report by: Maureen Gabriel, Designated/Lead Nurse, CP/Safeguarding Children & Young People and LAC, Clinical Commissioning Group

Lewisham CCG became statutorily responsible for ensuring that the health organisations from which it commissions services provide a system that safeguards vulnerable people from 1st April 2013. Lewisham CCG has remained committed to fulfil its statutory duties and responsibilities to safeguard children and young people. This includes specific responsibilities for looked after children and supporting the Child Death Overview processes. This is the CCG's second year of reporting safeguarding activity and arrangements to the LSCB.

CCG's are not directly responsible for commissioning primary medical care (or other primary care services), but have a duty to support improvements in the quality of primary medical care. The CCG therefore in this capacity supports the Named GP for safeguarding children in meeting the General Practice responsibility to safeguarding children.

Co-commissioning arrangements were introduced in April 2015 and provide a number of different models for involving CCG's in the commissioning of primary care services. The scope of primary care co-commissioning in 2015/16 is general practice services only but there are plans to continue to develop this. From a safeguarding perspective, more joined-up commissioning at a local level has the potential to strengthen local safeguarding arrangements alongside the development of more integrated models of care across health and social care systems.

Lewisham CCG continues to secure the expertise of Designated Safeguarding Professionals; who take a strategic lead on all aspects of safeguarding across the LSCB area for all health agencies including health organisations not commissioned by the CCG.

The priorities identified for 2014/2015, from the CCG annual safeguarding report were:

- 1. Maintaining a focus on safeguarding improvement to ensure the CCG area can demonstrate sustained safeguarding improvement in the event of any safeguarding inspection.*

The Designated professionals worked closely with the local health providers to brief health

professionals and partner agencies on the Care Quality Commission (CQC) safeguarding review that was in progress during 2014/15.

Health organisations examined selected cases throughout the year to evaluate how health agencies worked together and with other partner agencies to meet the needs of the children and their families in the cases. Although the CQC review has ended and Lewisham was not reviewed as part of the process; health professionals report that there has been valuable learning in the summary and review of these cases. It is envisaged that the learning and the response to the identification of gaps will contribute to improved outcomes for children and their families.

2. Ensure national priorities continue to be embedded into CCG safeguarding assurance, Female Genital Mutilation, Child Sexual Exploitation and Missing Children

FGM is recorded by all clinicians across all health care settings, when it is identified. It was only mandatory for Hospital Trusts previously, from the 1st October 2014 health organisations started submission of FGM information centrally.

The CCG has ensured that there is appropriate representation from local health providers on local and national working groups in respect to the current safeguarding issues of Child Sexual Exploitation (CSE), Children Missing and Female Genital Mutilation (FGM). The CCG Health Safeguarding Group receives a quarterly report from health providers where there is an opportunity for the health providers to discuss the contribution to these important issues. The CCG is represented by the Designated Professionals at the safeguarding meetings held by the larger NHS Trusts and this is another opportunity to be assured on the progress of the intervention in these areas. NHS England also leads on these safeguarding issues and requests updates from health agencies on their contribution.

Improving Outcomes for Children

CCG's have a duty as prescribed NHS bodies to put and keep in place arrangements for the purpose of monitoring and improving the quality of health care provided by and for that body. Lewisham CCG has governance processes in place to support this.

The CCG has processes in place to ensure contract negotiations and monitoring has Safeguarding Impact assessments for all contracts and specifications, and for any new policies or strategies to have a Safeguarding Impact assessment.

The CCG holds a quarterly health safeguarding Assurance Meeting to ensure health providers are made aware of their statutory safeguarding responsibilities through the commissioning arrangements and provider performance management framework.

To ensure CCG board level scrutiny of the safeguarding system, the Designated Professionals deliver bi- monthly safeguarding reports so that all board members are aware of their safeguarding responsibilities. The reports also give the CCG board assurance to enable the board to make the correct decisions and recommendations. This includes a confidential report on updates on the health contribution to Serious Case Reviews.

Examples of measures to improve outcomes for children:

- The CCG, The Joint Children's Commissioning and Lewisham and Greenwich Trust, worked throughout 2014/15 to put together a business case for an additional nurse with a

dedicated role in the health of looked after children team. This post was requested to improve the access to health assessments for children looked after out of the borough.

- The CCG recognises that to safeguard children it is inherent to consider safeguarding in the context of quality. This is to also consider safeguarding as part of safety, effectiveness and the patient experience. Therefore the Designated Nurse from the latter part of the 2014/15 has broadened her role to include working with the integrated governance team on the identification, escalation, monitoring and learning from children and maternity safety and quality issues.
- This helps to triangulate incidents and may also identify further safeguarding issues that require evaluation and learning to improve practice and outcomes for children and families.
- During 2014/15 two Serious Case Reviews (SCRs) were in progress for Lewisham. The CCG has a role to coordinate the health contribution to SCRs.

The two SCRs involved mainly health organisations. The young children affected were not known to social care prior to the incidents of significant harm identified. The CCG is instrumental in reviewing the action plans of the health agencies that contributed to the SCRs at the CCG Safeguarding Assurance meeting and ensuring that the learning is disseminated.

Hidden Harm

Report by: James Lee Head of Service - Cultural and Community Development (job share) and Service Manager - Prevention and Inclusion

Substance misuse has been an important area for Lewisham, 28-33% of children's social care cases involve parental substance abuse and 57% of these have children on are Child protection plans.

We have worked hard to improve the lives of these children, trying to make our services get involved earlier; this has been done by improving multi-agency working through integrating early help into our adult service providers. This is supported by our universal guidance which has been updated: A guide to working with substance using parents and their children.

This is being embedded by:

- Early intervention work is now a requirement and included in all Lewisham Substance Misuse providers' contracts.
- This is supported by strong links between children's services and substance misuse services
- A single point of contact is provided to the substance misuse services and the children's workforce.
- Monthly group safeguarding supervision is provided by a social worker from LBL to the treatment services, with the safeguarding leads being supported weekly. Monthly meetings consider themes. Themes covered include private fostering, professional curiosity, WTSC 2013, information sharing, SCR.
- Early help is embedded within these meetings and practice is reviewed and challenged and followed up within the weekly provided to the safeguarding leads.
- Access to comprehensive specialist training is provided to ensure our workforce is able to help families affected by substance misuse early.
- Our young people's service now keeps young people longer so they don't have to access adult services until 25.
- Our young people's service now supports children who have been affected by an adults substance misuse.

The training includes early help and consists of:

- Hidden harm and Young Carers briefing session
- Working with adults with children (specialist training for workers who don't always see the child.)
- Safeguarding children affected by Parental Substance Misuse
- Drug awareness training (Basic to specialist)

In reviewing our Hidden Harm policy we have set the following key priorities for next year:

1. Consistent delivery, all our services have the same goals: Having a shared vision for our children ensuring we are intervening early and work together to keep them safe by having integrated processes and meaningful care pathways that naturally support joined up working.
2. Assessment and Identification: improving professional curiosity and joint working, supporting earlier identification of needs and more comprehensive assessments.
3. Workforce development: Supporting staff to access the available training.
4. Accessible services: make services available in more locations by building stronger links with children centres, young carers joining up services for our children. Have services available in the same locations.
5. Sustainable recovery based support: The support offered reflects families changing needs, ensuring the right support is offered at the right time making sure that improvements for children are sustained.

Children Social Care

Report by Eileen Collier, Service Manager Children's quality assurance CYP

In the autumn of 2014 a planned redesign of the Referral and Assessment service took place. This meant cutting a social work team as a result of the challenge of delivering unprecedented savings, in common with other public sector organisations.

The redesigned service included four Area Linked Teams, each of whom will be on duty one week in every four. Duty arrangements cover all child protection enquiries. All single assessments were completed by the area team in which the family reside. Area Linked Teams made links with local services to provide an integrated local response to families. The service was based on the following principles:

- Children at risk must be safeguarded at all times
- Interventions by statutory services must be proportionate and where appropriate, children should be supported by universal and early intervention services by team around the child plans.

The strategy included:

- Providing more support to strengthen the capacity in the partnership to respond to need and manage risk
- Close working with agencies to reduce contacts that do not meet CSC threshold.
- Maintaining social work capacity to target and safeguard children at risk of significant harm.

A Quality Assurance Framework and audit process assesses the impact of learning and improvement.

The Multi agency Safeguarding Hub (MASH)

Report by Eileen Collier, Service Manager Children's quality assurance CYP

A review of the MASH took place by Children Social Care in 2014 resulting in recommendations for change being approved by DMT. These changes are included in the annual report of the MASH presented to the LSCB in December 2014. The report informed the LSCB that that MASH was not working as well as had been originally anticipated as a result of:

- Fewer cases being "mashed" because the MASH criteria was too narrow.
- An increase in contacts
- Capacity issues on the Police Public Protection Desk
- There was no set times for triage meetings. Some partners considered their expertise was not being utilised.

The review brought about:

- Additional senior staff in the MASH Service
- A widened MASH partnership
- Broader MASH criteria

Early Intervention Service (EIS)

Report by Eileen Collier, Service Manager Children's quality assurance CYP

The EIS became part of the CSC service during 2014-2015. The annual report of the EIS presented to the LSCB in March 2015 set out the Performance Management Framework of the EIS, the services commissioned, and how outcomes for children are being measured. Scrutiny was provided by the LSCB.

The EIS aims to embed the Early Intervention vision borough wide. Children's Centres and Targeted Family Support services are commissioned to ensure that services are being delivered to help families at the point of need, therefore reducing risk and preventing escalation into statutory children's services.

The EIS has a robust and embedded quality assurance framework within which it measures outcomes delivered by commissioned services and significant improvements have been delivered as a result. During 2014-2015 the EIS has further developed its audit tools in line with Ofsted grade descriptors. The EIS will report into CSC's QA framework from April 2015.

A safeguarding audit in 2014 evidenced that all staff from children's centre commissioned services have undertaken Level 1 LSCB on-line training and that they have also attended higher levels. In EIS audits undertaken between June and December 2014 this was further confirmed. Children's Centre providers commissioned, with the support of the EIS, bespoke Level 2/3 safeguarding and allegations training which children's centre leaders attended. Audits by the EIS have shown that 100% of providers have a safeguarding policy and procedures and appropriate safer recruitment policies and practice, 100% of providers' staff are DBS checked and 100% of providers' senior managers demonstrated good understanding of safeguarding and had received appropriate levels of safeguarding training.

Training to up skill the workforce was identified and is co-ordinated by the EIS which includes:

- Level 3 Safeguarding and Managing Allegations training for CC Leaders;
- LSCB Level 1 on-line Safeguarding Training as a minimum for all staff audited via EIS Evidencing Audits;
- Assessment Practice Skills: Ensuring child focused practice for CC Leaders;
- Two Family Outcomes Plan training sessions for CCs, TFS and FIP;
- Two Sustained Tracking training sessions for CCs and FIP;
- Supervision for leaders and senior practitioners 2 x 2 day courses;
- Level 4 Award Working with Parents for family support workers across CCs, TFS, FIP, Jobcentre Plus and an Attendance & Welfare Officer (4 courses for 51 staff between October 2014 and March 2015).
- Level 4 Award Working with Parents 2 day Managers' training;
- Voice of the Child training for family support workers across CCs, TFS and FIP.

The training for providers has led to a significant improvement in the quality of outcomes for children set by commissioned providers during the year with 93% of these outcomes being achieved. Outcomes for children are part of the payment by results contracts and are closely monitored by the EIS through quarterly performance monitoring for which providers' Family Outcome Plans and case studies are submitted. In addition, improved outcomes are evidenced through case file audits and evidencing audits carried out by the EIS.

During 2014-2015 a restructure of the EIS resulted in significant service reductions in the team providing CAF and TAC support. An interim solution for the logging of CAF's by partner agencies has been introduced whilst an electronic e-CAF system is being implemented. The benefits of eCAF will enable more comprehensive data collection of the number of CAF's being completed in the borough as providers will no longer have to log CAF's with the EIS, as well as better tracking of outcomes for children.

The Service Managers for EIS and Referral and Assessment have worked jointly on the interface between the two service areas to provide a co-ordinated early help response to families who do not meet a threshold for statutory services.

Referral and Assessment Team Managers are linked to each Children's Centre Area and are able to offer advice and guidance. They also chair the two multi-agency Early Intervention Locality Panels for cases where, for example, the Team Around the Child/Family is not working effectively/ The EIS is also part of MASH.

The EI service providers also work with families stepping down from child protection and other statutory services providing continued support to sustain change and prevent re-escalation into statutory services, therefore improving the long term outcomes for children.

Children's Social Care (CSC) has a robust Quality Assurance Framework in place. It includes performance data, a wide range of audit activity, information about the participation and involvement of children, young people, their parents and carers, findings from complaints and compliments and staff feedback to enable us to understand what we do to safeguard children, how well we do it, and who is better off as a result.

CSC reports to the LSCB on a quarterly basis on safeguarding performance against key performance indicators, benchmarked against local targets, the performance of statistical neighbours, and the national average.

Performance data is robustly monitored to identify emerging themes and respond quickly to areas requiring additional focus.

Young People in Residential Placements

Report by Eileen Collier, Service Manager Children's quality assurance CYP

Children looked after placed in residential care are more vulnerable to poor outcomes resulting from insecure attachments. A Children's Placement Panel, chaired by the Director of CSC, met weekly during 2014-2015 to ensure that all placements were necessary and in accordance with the child's assessed needs. All residential placements were therefore approved by the Director of CSC.

Placements are made in accordance with the borough's preferred provider list. Statutory visits take place in timescale to ensure that children can make their views known about the placement and social workers can monitor compliance with Children's Home Regulations. A booklet is provided to inform young people about who they can tell if they have concerns about the placement or need to make an allegation of abuse.

An independent advocacy service is available for all looked after children and IRO's discharge their statutory responsibility to ensure young people know about it. IRO's almost always meet with looked after children alone and ensure they can convey their wishes and feelings.

In 2013-2014 and 2014-2015 the Director of CSC and Service Managers completed quality assurance visits to all children's homes where Lewisham children are placed. They monitor the quality of placements, and their effectiveness in implementing the care plan and to ascertain the wishes and feelings of the child in regards to their placement. This is now an embedded and valuable component of the quality assurance framework, to ensure that this cohort of looked after children are kept in focus.

Children Placed at a Distance from Home

Report by Eileen Collier, Service Manager Children's quality assurance CYP

Placement stability for children looked after is a high priority for CSC. Sometimes a distant placement is necessary in order to safeguard and protect the child including preventing those at risk of Child Sexual Exploitation or offending activity.

A review of those children placed at a distance (i.e. more than 20 miles) was conducted during 2014/2015 and was presented at DMT to provide assurance that all new statutory requirements in relation to these children and young people are followed.

Further reviews are planned for 2015-2016 and the Service Manager for Looked after Children, Leaving Care Services and Adoption will ensure that the "Distant Placement Procedure", is fully embedded into practice.

Young People Missing From Care:

Report by Eileen Collier, Service Manager Children's quality assurance CYP

Looked after children are vulnerable as a result of earlier trauma and abuse. This makes them more vulnerable to being sexually exploited, offending, gang related activity, and substance misuse. These concerns increase if young people go missing from care.

A joint protocol with the police was revised by the Service Manager, LAC, LCS, and Adoption in December 2014 to strengthen arrangements to safeguard children who are missing from care. When children are missing from care their Independent Reviewing officer will chair a meeting to ensure all possible actions are being taken to locate and safeguard the child. If a child remains missing, review meetings are held each week. Service managers chair meetings for children who remain missing for more than four weeks and make additional recommendations for all agencies to ensure a holistic plan is in place to safeguard the child and minimise missing episodes.

See **Section 5** for further information on performance and **Section 7** for information on how Children Social Care contributes to ensuring their safeguarding responsibilities in relation to Looked after children, Specialist areas and Child protection enquiries are met.

Youth Offending Service

Report by: Tanya Edwards Service Manager

During 2014/15 Lewisham YOS continued to reduce the number of first time entrants to the youth justice system, reduced the reoffending rate of young people and further reduced the use of custody. While the figures are still too high, this demonstrates a positive direction of travel for young people in Lewisham.

In order to continuously focus on achieving outcomes, emphasis is being placed on maintaining a highly skilled and trained workforce, implementing the new YJB assessment framework and associated data management systems, improving quality assurance processes and management oversight and ensuring that evidence based assessments and interventions are being used.

We need to strengthen our early intervention approach to young people and the interventions that are given to young people who receive out of court disposals in order to prevent reoffending. This is a priority for 2015/16.

A number of safeguarding themes have been identified and associated training and awareness raising programmes put in place. Training sessions have been booked for the service around Child Sexual Exploitation, Working with Young People to Address Violence in Teenage Relationships and Preventing Violent Extremism. Operational procedures are being reviewed and amended to address these areas.

Lewisham and Greenwich NHS Trust

Report by LSCB Executive Board Member: Claire Champion Director of Nursing and Clinical Quality

What did we do? Why?

Lewisham and Greenwich NHS Trust (LGT) provide a range of acute health care services at Queen Elizabeth Hospital (QEH) Woolwich in the Royal Borough of Greenwich and University Hospital Lewisham (UHL) and Community Health Services in the London Borough of Lewisham.

LGT also delivers the Family Nurse Partnership (FNP) programme within both boroughs. The FNP is offered to all first time teenage mothers.

How have we made a difference for children?

The Maternity Safeguarding Pathway has been updated to ensure that unborn babies, children and their families who could benefit from early support are identified as soon as possible.

The Safeguarding Team contribute to Lewisham Multi-Agency Safeguarding Hub (MASH) through information sharing to support multi-agency risk assessment and decision making to safeguard children.

The Safeguarding Children Policy has been reviewed to reflect integration of safeguarding services in line with local and national guidance.

We have increased multi-agency safeguarding training sessions.

Annual Safeguarding newsletter distributed to all staff in September 2014 raised awareness of Female Genital Mutilation (FGM), Domestic Abuse (DA) and Child Sexual Exploitation (CSE).

Safeguarding Operational Group uses a Learning and Improvement Framework to share good practice from CQC Inspections and Serious Case Reviews (SCRs) to benchmark LGT practice

A new electronic record keeping system is being rolled out across the Trust. This will provide better evidence of the child's journey through LGT services.

All children subject to a child protection plan are flagged on the system and routine notification of attendance is shared with allocated social workers.

Referrals to children's social care are now sent via secure email which resulted in more timely information sharing. Outcomes of referrals are routinely monitored in weekly safeguarding meetings.

Safeguarding Supervision is available to all key case load holders including midwives, school nurses/health visitors/ allied health therapists and sexual health services

Reflective learning forums are to be extended across acute sites.

Improvements in maternity services around routine enquiry regarding domestic abuse, FGM, mental health issues and vulnerabilities has improved early identification and early help for families using LGT services.

LGT delivers the Family-Nurse Partnership which is an evidence-based preventive programme for vulnerable young first time parents. It offers intensive and structured home visiting, delivered by specially trained nurses, from early pregnancy until the child is aged two.

Family Nurses build trusting and supportive therapeutic relationships with families, guiding first-time young parents, using behaviour change methods to help them adopt healthier lifestyles for themselves and their babies, enabling them to provide warm and nurturing parenting, and develop an aspirational plan for them and their babies' futures.

Evidence for and evaluation of effectiveness

The number of early help assessments and referrals to children's social care has increased, highlighting that staff are identifying children and young people who could benefit from early help or who are at risk of significant harm. This includes increased referrals for those who are at risk of FGM, domestic abuse and CSE.

The Trust has a strong governance structure, with a Safeguarding Operational Group, Safeguarding Assurance Group and the Adult and Children and Young People Safeguarding committee which is chaired by a Non-Executive to provide objectivity and rigour.

The meetings monitor, review and escalate the Safeguarding Risk Register, Strategic and Operational Action Plans and Annual audit programme.

There is good Trust representation at LSCB meetings and contribution to quality assurance framework.

Children's Safeguarding leads have been working with Lewisham CCG and Lewisham Public Health Teams to improve and develop services. An IDVGA programme will start on the UHL site and will extend to the QEH site. A Trust wide Domestic Abuse policy is being developed.

The Trust now routinely provides FGM data.

Training continues to reinforce and raise awareness of current safeguarding issues, for example the use of stress positions by parents as a method of discipline. The Trust contributes to the Self Harm Steering Group to improve understanding of self-harm and how best to support young people.

Views of parents/carers/children/young people

- Friends and Family test has been introduced across all of the CYP areas and feedback is monitored and shared with staff.
- Safeguarding and Parents notice boards are within key clinical areas.
- All areas have posters advising children and young people they can be seen alone if they wish to speak with a member of staff.
- A leaflet explaining child protection medicals has been developed.
- A Children's Complaint Leaflet is available across sites.
- Multi language posters on DA have been developed by maternity services.
- The use of interpreting services via telephone or face to face is available.

What have we learned?

A focus on early identification within maternity services means that:

- All women booking for their first antenatal appointment are offered to be seen alone for 15 minutes. Maternity Safeguarding Pathway has been extended across both acute sites.
- Midwifery team have developed A5 prompt cards to support staff to identify safeguarding concerns and actions to be taken to address these.

What do we need to do better?

- Improve children's engagement and feedback.
- Extended DA services across all sites.
- Support staff with Early Help.
- Extend safeguarding supervision availability.

Examples of effective practice

Cross-site working and sharing of best practice. Revised reporting structure for CYP safeguarding team within LGT ensures safeguarding has high profile and voice within many forums
Introduction of increased child protection medical sessions in community services to ensure that children with physical injuries are seen as soon as possible

LSCB Business Unit

The Business Unit of the Board are committed to continuous improvement at new ways of working. The need to appoint further support resources will be assessed over the coming year and the business structure will be evaluated to include a development officer role and a permanent LSCB administrator role. Further development of the LSCB website as well as taking on a more proactive safeguarding awareness role with professionals and the community are two areas of work currently being progressed.

Main Board

The Main Board met on four occasions with good attendance from all statutory and member organisations. Some of the areas reviewed, discussed and challenged included:

- Performance reports to include: Children Social Care, Police CSE figures, Police (PIB), LeSoCo, L&G NHS Trust, borough Police, Youth Offending Service – remand data, MAPPA and SLAM/ CAMHS
- LSCB performance framework
- CSC report and contacts
- Private Fostering Annual report
- CAMHS annual Safeguarding report
- Early intervention thematic action plan
- Early intervention Annual report
- Community Safety Annual report
- DBS audit – Schools assurance from agencies regarding checks completed
- DBS Annual report
- Mental health protocol
- Report on Lewisham’s demographics in light of the reported crime / criminal activity data / child abuse and protection / other key aspects
- VAL annual report
- Road Traffic Safety in Lewisham
- LADO Annual report
- Looked After Children Annual report
- DNA audit and action plan
- Placement stability audit
- Police Protection audit – supplementary report
- Young Carers Annual report
- Report on S47 investigations
- Clinical commissioning Group Annual safeguarding report
- Guide for when criminal proceedings coincide with chapter 4 Serious Case Reviews
- Advice report on thresholds for deaf children
- L&G trust update of maternity action plan
- Children missing from Education – supplementary report
- Safeguarding children with complex needs annual report
- MASH annual report 2014 and new MASH model
- Missing children annual report

See **appendix E** for the rota for the annual reports.

Executive Board

The Management Executive met on four occasions during this reporting period.

The Boards sub groups report direct to the Executive Board who are the custodians of the LSCB Business Plan and ensure that allocated objectives are actioned by the groups.

The focus and purpose of this group is to ensure that the LSCB are able to be satisfied that children are being appropriately safeguarded across Lewisham.

The Executive reviewed the following:

- Serious Case Reviews and SCR publications(Case O & S)
- Protocol between boards
- Child Sexual Exploitation
- LSCB Performance Framework – for all partner agencies
- Proposal of staffing arrangements
- S11 proposal
- Learning from peer reviews for the LSCB
- Risk register
- Ofsted (LSCB self-assessment and gap analysis; Analysis of inspections completed)
- Lewisham and Greenwich NHS Trust – inspection findings and actions
- Measuring outcomes across the partnership
- LSCB Website
- CYP Partnership Consultation Group
- LSCB Annual Report preparation (Key priorities for 2015/16)

12. Summary analysis of how well safeguarding is going in Lewisham

Lewisham achieved an outstanding grading in its previous Ofsted Inspection. Nevertheless there has been no sense of complacency or loss of drive to achieve improved results for children and young people in the Borough. The LSCB Executive have committed additional resources to the LSCB in order that its role can continue to develop, and with the appointment of a development officer this coming year it is intended that the Board will be able to make a yet greater contribution to the local partnership in safeguarding. The Main Board have continued to offer scrutiny and constructive challenge through their commitment to both the board meetings and sub groups. The presentation of Annual Reports and Section 11 audits to the LSCB, in particular, have evidenced the journey of development of the safeguarding profile within the work of each service or partner. The lay members have contributed a further dimension of both challenge and perspective, depending on their background and knowledge, and this adds yet another layer of value in to the work of the Board.

Events this year have shown that the quality and understanding of the collective workforce is key to effective safeguarding. It is to the credit of the Health system in Lewisham that vigorous and effective steps have been taken to improve the recognition and co-ordination of safeguarding concerns in primary practice and in healthcare generally. This will continue to be monitored through relevant action plans. During the coming year, given the increases in referral rates (which have been evidenced to be genuine increases and not caused by misapplication of thresholds) there will continue to be challenges in ensuring that the child protection system operates effectively at the highest level of need, especially given reductions in resources. The Board will work to ensure that collective workforce needs are identified and supported through the work of

the board and single agency plans. The MASH arrangements have been evolving in Lewisham and continue to do so- a further report and analysis will be provided to the LSCB this coming year, to ensure we are obtaining maximum value from this resource.

Neglect will continue to be a concern given the nature of the demographics in Lewisham and the findings of previous audits. We have a good action plan in force and will need to evaluate the impact of this work in due course to ensure that lessons have been embedded and staff continue to deploy the necessary skills to identify and address this issue. We will undertake some work to improve our understanding of the safeguarding needs of children with complex needs and also for young people whose transition plans will take them through into adult life. These are gaps in our current safeguarding analysis that we plan to address this year.

Generally our activity data shows Lewisham still to be performing well , with some dips occurring during the year, mainly due to operational pressures, but overall the trends have remained relatively stable against the backdrop of increased demand. Looked After Children numbers have risen slightly, but overall analysis of the CAF and Early Help offer set against other data would indicate that the partnership continues to address needs in a preventive way and the overall system is stable and well managed with effective partnership working . The development of E Caf's will improve the collection and analysis of data around Early Help.

The work of preventing CSE is progressing well with good partnership working around MASE meetings and Missing as well as Operation Makesafe raising community awareness. Nevertheless the lack of prosecutions, and strong links between CSE and gang associated activity in Lewisham, make this a challenging area and one which will continue to have a high focus and priority.

Other areas which have been developed this year are our work on FGM and the initiatives around radicalisation, and VAWG. These areas are all cross cutting with the work of the Community Safety Partnership and other strategy groups in Lewisham, and therefore during the coming year it is proposed that more attention is paid to ensuring our co-ordination of this work is as effective and tightly managed as possible, to ensure maximum impact. They will remain priorities in the forthcoming year.

The LSCB will look to ensure in the forthcoming year to ensure that the Childs Voice is strongly embedded in all activity, and that there is increased measurement of outcomes in terms of the clear impact on the well being of children and young people. Whilst Lewisham has excellent consultation processes with young people, we want to ensure that a specific focus on the view of young people around safeguarding is embedded in the work of the Board.

13. Future Priorities for the LSCB

The overall role of the LSCB is to monitor how well safeguarding of children and young people is going in Lewisham, and to ensure and assure that children and young people are being kept safe. To achieve this the Safeguarding Board needs to do two things, it needs to have the right information to determine how well safeguarding is going, and it needs to act effectively to address any weaknesses by either taking action itself, or by holding to account those responsible so that they act to address the situation.

The LSCB, like the Partnership, puts children and young people's interests, wellbeing and safety at the centre of everything it does. The LSCB aspires to arrive at a situation whereby it has a good understanding of how well safeguarding is going. To this end, the performance management

framework has now been embedded in practice in order to improve the voice of children and young people, and to ensure that it has a thorough and comprehensive understanding of the quality of practice derived from both qualitative and quantitative data sources.

The priorities for next year are drawn from a number of sources. These include national priorities as set by Government policy or legislation. They also include priorities drawn from local findings such as recent Serious Case Reviews, multi-agency audits, performance management data or other local information sources. The LSCB also draw on local and national inspection findings, reviews, research and other best practice sources to challenge and improve its scrutiny. Taking into account all of these sources, the LSCB's priorities for 2015/16 include the following:

Priorities for 2015-2016:

We will focus on

- ensuring the continuance of a safe child protection system for Lewisham in the face of rising demand, including reviewing the role of the MASH
- tackling Child Sexual Exploitation, in particular, ensuring that cases are brought to court and convictions secured
- ensuring that the learning about neglect across the partnership continues to be developed, the lessons implemented and actions monitored for impact and outcomes
- contributing as appropriate to the VAWG agenda, in conjunction with Safer Lewisham
- continuing to campaign and to act in partnership to combat violence against women and girls (VAWG) and in particular to continue to act to prevent FGM
- Encouraging parents whose children have benefited from child protection plans and other similar support to offer support to other parents who are struggling to make the changes required.

We will support the achievement of our priority objectives by:

- ensuring that the early help offer continues to be effective and to meet agreed thresholds
- Continuing to ensure that the Child's Voice is prevalent throughout the safeguarding arena
- developing a stronger sense of outcomes achieved for children and young people
- continuing to improve the LSCB's performance information systems and quality of analysis
- auditing and improving the care planning for children with complex needs
- continuing to develop the strength of the Third sector and the Faith sector as regards safeguarding issues
- Improving the LSCB website and information /communication to front line staff
- improving our knowledge of workforce issues and ensuring capacity and quality is good
- improving the co-ordination of governance across the Lewisham network, to ensure cross cutting areas of work are well co-ordinated.
- undertaking an audit and review of the transition arrangements in conjunction with Adult Social Care
- ensuring the workforce is stable, confident, and of a good quality as regards safeguarding work, including looking to improve the ways the LSCB can support the front line children's workforce.

Appendices

Appendix A: LSCB Budget

Lewisham Safeguarding Children Board Budget

<u>INCOME</u>	2014/15	2015/16	Increase to balance
	£		
CCG contribution	18,311	40,321	22,010
CYP contribution	36,621	58,631	22,010
London Probation	2,000	2,000	
CAFCASS	550	550	
Met Police	5,000	5,000	
L&G NHS Trust	9,155	31,165	22,010
SLAM	9,155	31,165	22,010
INCOME TOTAL	80,792	168,832	88,040
<u>EXPENDITURE</u>			
LSCB Training	20,000	10,000	
Independent Chair	12,000	18,000	
Business Manager	43,948	62,807	
Administrator	25,772	32,191	
Development Officer (PO2)		45,831	
EXPENDITURE TOTAL	101,720	168,829	
Balance from previous year	us 37,025		
Forecast of balance at year end	16,097		

Appendix B: LSCB Membership

Name	Organisation / Role
Christine Doorly	Independent Chair
Marinda Beaton	LSCB Business Manager
Dr Abimbola Adeyemi	Consultant Community Paediatrician & Designated Doctor, Clinical Commissioning Group
Dr Judy Chen	Named GP, Clinical Commissioning Group
Dr Faruk Majid	Senior Clinical Director, Lewisham Clinical Commissioning Group
Joy Ellery	Director of Knowledge, Governance and Communications, Lewisham & Greenwich Healthcare NHS Trust
Chris McCree	Acting Assistant Director of Nursing & Safeguarding, SLAM
Pat Barber	LGA Governor Representative
Louise Hubbard	Assistant Chief Officer, Probation
Cheryl Spender	Safeguarding Adults Strategy Development Officer
Cllr Helen Klier	Cabinet Member for Children and Young People
David Travis	Head of Student Services, LeSoCo
Jonathan Sharpe	Brent Knoll School
Liz Jones	Executive Principal, Abbey Manor College
Jonathan Slater	Strategic Development Officer for CYP, Voluntary Action Lewisham
Genevieve Macklin	Head of Strategic Housing, Customer Services
Graham Norton	Ambulance Operations Manager, London Ambulance Service
Dr Donal O'Sullivan	Consultant in Public Health Medicine, Public Health
Bernice Walters	Service Manager for Quality Assurance, Children's Social Care
Chris Smart	South Regional DCI, CAIT, Metropolitan Police
Ian Smith	Director of Children's Social Care
Geeta Subramanian-Mooney	Head of Crime Reduction & Supporting People
Sue Tipler Deputy: Louise Comely	Head of Standards and Achievement, Directorate for CYP Principal Educational Psychologist
Nick Topliss	Borough Manager, CAMHS, South London & Maudsley NHS Foundation Trust

Neil Evans	Superintendent, Crime and Operations, Metropolitan Police Service
Maureen Gabriel	Designated/Lead Nurse, CP/Safeguarding Children & Young People and LAC, Clinical Commissioning Group
Zafer Yilkan	Service Manager, CAFCASS
Warwick Tomsett	Head of Commissioning, Strategy and Performance
Georgina Nunney	Principal Lawyer, Legal Services, (LBL papers only)
Dawn Smith	Lay Member
Filomena Brockwell	Lay Member
Derek Churchman	Lay Member

Appendix C: Executive Board Membership

Name	Organisation / Role
Christine Doorly	Independent Chair
Marinda Beaton	LSCB Business Manager
Frankie Sulke	Executive Director for Children and Young People, Directorate for Children and Young People
Dr Faruk Majid	Senior Clinical Director, Lewisham CCG
Tim Higginson	Chief Executive, Lewisham Hospital
Cllr Helen Klier	Cabinet Member for Children and Young People
Russell Nyman	Chief Superintendent, Metropolitan Police
Justin Armstrong	South Regional DCI, CAIT, Metropolitan Police
Ian Smith	Director of Children's Social Care, Directorate for Children & Young People
Martin Wilkinson	Chief Officer, NHS Lewisham Clinical Commissioning Group
Danny Ruta	Director of Public Health
Chris McCree	SLAM

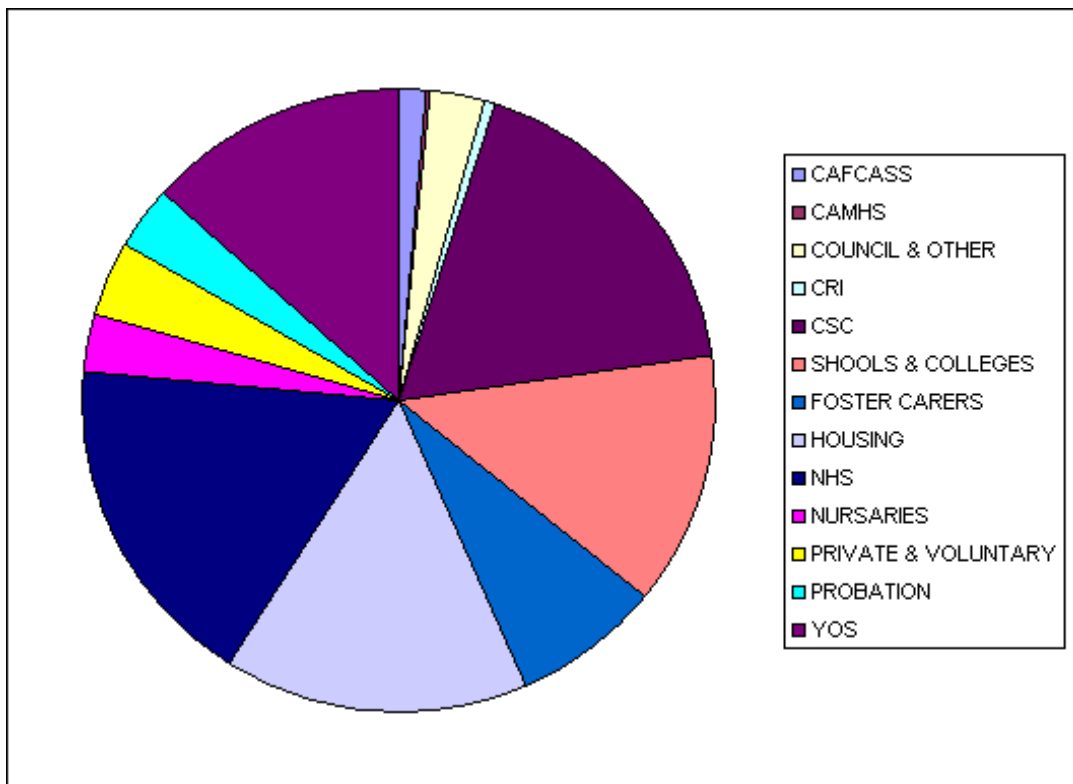
Appendix D: Rota for annual reports to the LSCB

March:	
Agency:	Person responsible:
Early Intervention (to include threshold suitability, outcome of sample audit of safeguarding outcomes achieved)	Kate Platt
Community Safety Partnership (including MARAC)	Geeta Subramaniam
Young Carers	Naeema Sarkar
Clinical Commissioning Group Annual Report	Faruk Majid
MAPPA Performance Report	Becky Canning (Probation)
Looked After Children (including placement stability)	Tina Benjamin
June:	
Agency:	Person responsible:
HR report on CRB systems	Andreas Ghosh
Child Death Overview Panel	Donal O'Sullivan
Voluntary Action Lewisham	Lillian Brown
September:	
Agency:	Person responsible:

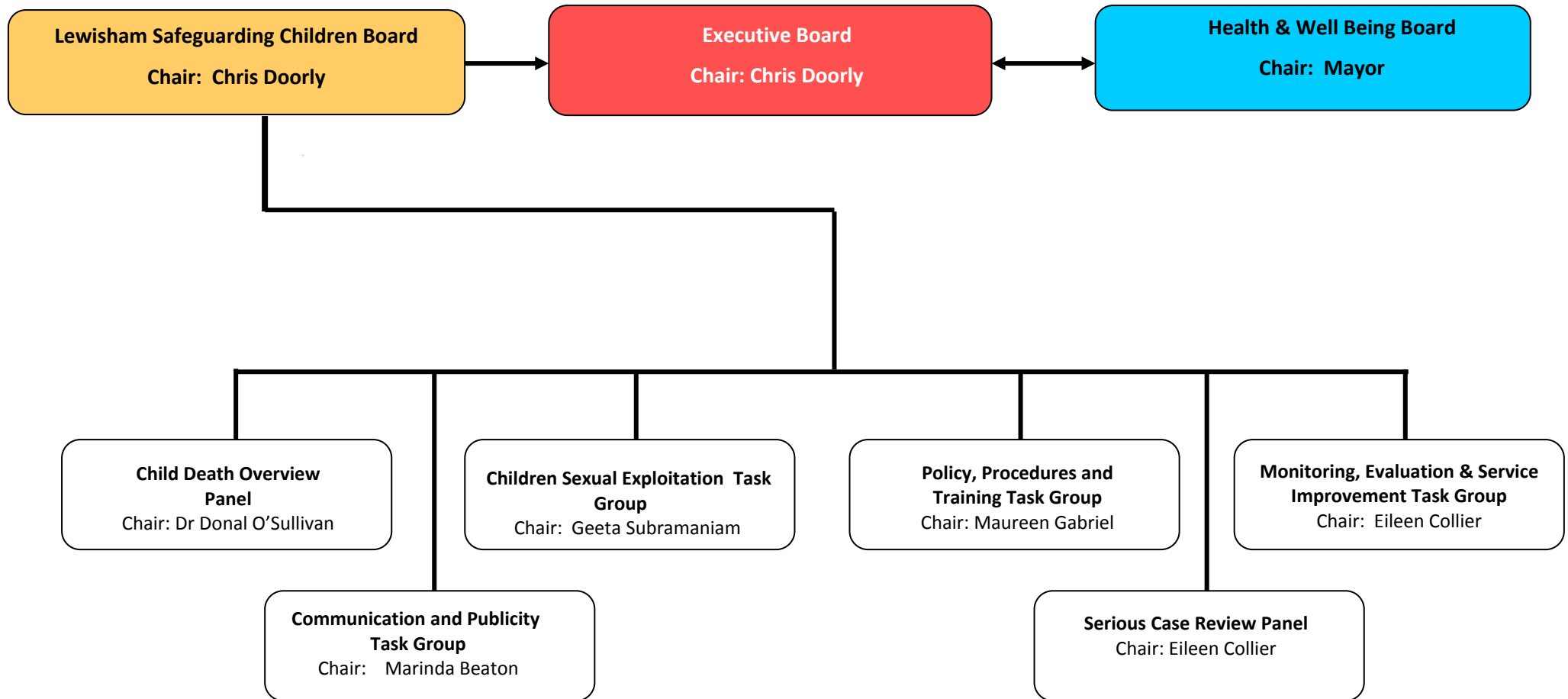
CAMHS	Paul Archer
Road Traffic Safety in Lewisham	Donal O'Sullivan / Liz Brooker
LADO Annual Report	Eileen Collier
Private Fostering	Naeema Sarkar
Children Missing from Education	Claudia Smith
LSCB Annual Report	Marinda Beaton / Chris Doorly
December:	
Agency:	Person responsible:
MASH Annual Report	Naeema Sarkar
Missing Children	Naeema Sarkar
Lewisham & Greenwich Healthcare Annual Report	Claire Champion
Child Sexual Exploitation	Geeta Subramaniam
Safeguarding Children with Complex Needs	Anne Wallace

Appendix E – training attendance 2014/2015

CAFCASS	CAMHS	COUNCIL & OTHER	CRI	CSC	SCHOOLS & COLLEGES	FOSTER CARERS	HOUSING	NHS	NURSARIES	PRIVATE & VOLUNTARY	PROBATION	YOS
4	1	8	2	52	39	22	46	51	9	12	10	39



Appendix F – LSCB structure



ORGANISATION

The LSCB meets every 2 months during the year and has a membership made up of representatives from all statutory partners and others concerned with safeguarding children in line with Working Together. To see our full list of members, please refer to Appendix B&C.

CHAIR

In order to provide effective scrutiny, the LSCB continues to be led by an independent Chair, Chris Doorly.

This is done in line with Working Together and the Chair continues to have a direct link to the Director of Children’s Services and the Cabinet Member of Children.

ATTENDANCE

The Board and its Task Groups continue to experience good and appropriate attendance from all partners.

The LSCB has been through a recruitment drive for a Lay Member in 2013/2014 and though unsuccessful we have since advertised for a Lay Member position.

Appendix G Glossary

Violence against Women and Girls (VAWG)
Community Rehabilitation Company (CRC)
National Probation Service (NPS)
Management & Training Corporation (MTC)
Multi Agency Public Protection Arrangements (MAPPA)
Child Sexual Exploitation (CSE)
Counter – terrorism strategy (CONTEST)
Children’s Social Care (CSC)
Looked after Children (LAC)
Common Assessment Framework (CAF)
Female Genital Mutilation (FGM)
Voluntary Action Lewisham (VAL)
Corporate Parenting Board (CPB)
Independent Reviewing Officer (IRO)
Multi Agency safeguarding Hub (MASH)
Monitoring, Evaluation and Service Improvement task group (MESI)
Children with disabilities (CWD)
Community adolescent mental health service (CAMHS)

Lewisham and Greenwich Trust (LGT)
The Department for Education (DfE)
National Health Service (NHS)
Policy, Procedure and Training (PPT)
Communications and Publications Task group (C&P)
Serious Case Review (SCR)
Child Death Overview Panel (CDOP)
The Child Abuse Investigation Command is part of the Sexual Offences, Exploitation and Child Abuse Command (SOECA)
Metropolitan Police Service (MPS)
Sexual Exploitation Team (SET)
Safeguarding Children's Reference Group (SGCRG)
Multi Agency Sexual Exploitation (MASE)
Multi Agency Risk Assessment Conference (MARAC)
Care Quality Commission (CQC)
Clinical Commissioning Group (CCG)
Early Intervention Service (EIS)
Disclosure and Barring Scheme (DBS)
Targeted Family Support (TFS)
Family Intervention Project (FIP)
Children Centre (CC)
Team Around the Child (TAC)
Children and young people (CYP)
Children Social Care (CSC)
Leaving Care Service (LCS)
Queen Elizabeth Hospital (QEH)
Domestic Abuse (DA)