



City & Hackney Safeguarding
Children Board

Annual Report 2014/15



Foreword by the Independent Chair

My second full year in the role of independent chair has been as rewarding as it has been challenging and I feel privileged to have worked alongside some of the very best public and voluntary sector leaders in the country. Operating in these austere times has meant that each of them has had to face the reality of doing the same, or more, with less and some have had the added pressure of managing root and branch restructuring and organisational change. All however, have maintained a strong commitment to supporting our work in the City and Hackney Safeguarding Children Board.

It is important to acknowledge that leadership has not been limited to those in senior managerial roles and I want to take this opportunity to thank all those people on the frontline, the voluntary sector staff, educators, health and children's social care practitioners, youth workers, probation and police officers and the myriad of other groups from housing to transport and local businesses, who all played a part in helping make our children safer.

As you read through the pages of this report you will gain an insight into the work of the Board, how we audit partners, reflect on case reviews, learn, invest in partnerships and achieve a positive impact in children's lives. There is no doubt this report reflects much good and outstanding work, but we know we can do more. We are committed to continuous improvement and understand the importance of identifying children living in environments where they are subject to neglect or emotional abuse and the consequences of living in a home where abusive relationships generate a climate of tension and fear. We know that these circumstances can create a range of vulnerabilities and as a Board, we are determined to tackle these issues from every possible angle, including improved practice, better community engagement and stronger strategic partnerships.

As independent chair, I am committed to ensuring that our children and their families are seen, heard and helped, so this year I've met and listened to more children and residents, engaged with faith groups and collaborated with local volunteers working to combat a range of safeguarding issues. Invariably they all supported and appreciated the work we do and wanted to play their part in helping to build safer communities. The resounding message I heard was that people, young and old, simply want to feel safe. Moving forward, I intend to build on this level of good will and increase the frequency of such meetings. I also plan to capitalise on the use of our new digital platforms to help us listen to children and their families by sharing information and surveys that seek regular community feedback.

Magnifying the voice of local people has also been achieved over the last year by appointing two Hackney residents, Sally Glen and Shirley Green, as Lay Members to the Board. They now compliment the work of our extremely active lead members, Alderman Dhruv Patel from the City of London and Councillor Anntoinette Bramble from Hackney, both of whom remain important participants at the Board and regularly meet with me to probe and test the focus, impact and the performance of partners.

As well as engaging with our communities, we have used the last year to build on the stronger governance arrangements now in place. We have done this by engaging in intelligent alliances that compliment rather than compete or duplicate effort. Under the leadership of the Chief Executive in Hackney Council and the Town Clerk in the City of London, we have formed closer links between the Health and Wellbeing Boards, Adult Safeguarding Board and Community Safety Partnerships within the City and Hackney. This approach has provided greater strategic oversight, clarity of individual roles and the identification of opportunities for more focused collaboration and mutual support.





Moving forward, the Board will coordinate and ensure the effectiveness of child safeguarding by concentrating on three delivery priorities. The first priority will aim to focus on the local safeguarding context, critically what works in the context of our children's lives. Whether they are at home, in school, on our streets or in the public places and other spaces, offline and online, that our digitally absorbed young people frequent; context is key.

Secondly we will continue to invest in early help and we remain committed to early intervention when a need is identified or problems arise. Finally, our leadership style will be ambitious, open, reflective and child centred; we will always advocate on behalf of our children and crucially, not only will we welcome constructive challenge, but actively encourage it.

Over the next reporting period we will continue to build on the good work of partners in responding to domestic violence and abuse, neglect, CSE, harmful sexual behaviours and children who go missing from care, home and education. We will also continue to combat abuse linked to faith, belief and harmful practices, as well as increasing our efforts to better understand how to prevent our young people being radicalised or engaged in gang activity and associated acts of violence. We will continue to seek out opportunities to learn and improve, and as independent chair, I will not hesitate to initiate serious case reviews if and when appropriate and to share the learning if we get things wrong.



Looking forward I am confident that the partnership we represent will continue to grow and effectively address the challenges that we have both the capacity and competence to meet. However, some challenges simply cannot be met by our efforts alone. Some require the support and legislative power of central government. Unregistered schools and the communities who use them represent just such a safeguarding challenge for us. I know that efforts are being made to address this matter at the highest levels of local government and I will do what I can to support and expedite an appropriate resolution.

Finally, at the time of writing I have learned that Alan Wood CBE, the Director of Children's Services in Hackney, is moving on. It would be remiss therefore not to take the opportunity to recognise the leadership role he has played and the difference he has made in the lives of so many children at a local and national level. He will be greatly missed and I wish him every success in the future.

Jim Gamble
Independent Chair



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About the Annual Report



The CHSCB annual report for 2014/15 is a transparent assessment on the effectiveness of safeguarding and the promotion of child welfare across the City of London and the London Borough of Hackney.

Pages 10 to 16 set out the governance and accountability arrangements for the City and Hackney Safeguarding Children Board (CHSCB). They provide information about the structures in place that support the CHSCB to do its work effectively.

Pages 20 to 43 set the context for safeguarding children and young people in the City of London, highlighting the progress made by the City partnership over the last year and the challenges going forward.

Pages 44 to 76 set the context for safeguarding children and young people in the London Borough of Hackney, highlighting the progress made by the Hackney partnership over the last year and the challenges going forward.

Pages 77 to 89 highlight the lessons that the CHSCB has identified through its Learning & Improvement Framework and the actions taken to improve child safeguarding and welfare as a result of this activity.

Pages 93 to 96 describe the range and impact of the multi-agency safeguarding training delivered by the CHSCB and a brief account of the single agency training delivered by partners.

Pages 97 to 98 set out the priorities going forward and the key messages from the Independent Chair of the CHSCB to key people involved in the safeguarding of children and young people.

In line with statutory requirements and best practice, the CHSCB annual report 2014/15 has been sent to the following:

THE CITY OF LONDON

- The Chairman of The Policy and Resources Committee
- The Town Clerk
- The Lead Member for Children's Services
- The Director of Community and Children's Services
- The Chair of the City Health and Wellbeing Board
- The Chair of the Safer City Partnership

THE LONDON BOROUGH OF HACKNEY

- The Mayor of Hackney
- The Chief Executive
- The Lead Member for Children's Services
- The Corporate Director, Children and Young People's Services
- The Chair of the Hackney Health and Wellbeing Board
- The Chair of the Hackney Community Safety Partnership

CITY & HACKNEY / OTHER

- The Chair of the City and Hackney Safeguarding Adults Board (CHSAB)
- Hackney's Youth Parliament and City Gateway
- The Mayor's Office for Policing and Crime



Glossary of Terms



ABH	Actual Bodily Harm	HCVS	Hackney Council for Voluntary Service
BME	Black and Minority Ethnic	HLT	Hackney Learning Trust
CAF	Common Assessment Framework	HUHFT	Homerton University Hospital Foundation Trust
CAFCASS	Children and Family Court Advisory and Support Service	IRI	Independent Return Interview
CAIT	Child Abuse Investigation Team	LA	Local Authority
CAMHS	Child and Adolescent Mental Health Services	LAC	Looked After Child / Children
CCG	Clinical Commissioning Group	LADO	Local Authority Designated Officer
CDOP	Child Death Overview Panel	LSCB	Local Safeguarding Children Board
CHSAB	City and Hackney Safeguarding Adults Board	MAP	Multi Agency Panel
CHSCB	City and Hackney Safeguarding Children Board	MAPPA	Multi Agency Public Protection Arrangements
CHYPS	City and Hackney Young People's Service	MARAC	Multi Agency Risk Assessment Conference
CPA	Community Partnership Advisor	MASE	Multi Agency Sexual Exploitation
CPP	Child Protection Plan	MAT	Multi Agency Team
CRIS	Crime Reporting Information System	MPM	Management Planning Meeting
CSC	Children's Social Care	NHS	National Health Service
CSE	Child Sexual Exploitation	NSPCC	National Society for the Prevention of Cruelty to Children
CYPPP	Children and Young People's Partnership Panel	OFSTED	Office for Standards in Education, Children's Services and Skills
DBS	Disclosure and Barring Service	PPU	Public Protection Unit
DfE	Department for Education	PSHE	Personal, Social and Health Education
DVIP	Domestic Violence Intervention Project	PSP	Pupil Support Plans
EIP	Early Intervention and Prevention	SCR	Serious Case Review
ELFT	East London Foundation Trust	SDVC	Specialist Domestic Violence Court
ESOL	English for Speakers of Other Languages	SEND	Special Educational Needs and Disability
FGM	Female Genital Mutilation	SLT	Senior Leadership Team
FJR	Family Justice Review	SRE	Sex and Relationship Education
FRT	First Response Team	TRA	Tenant Resident Association
GLA	Greater London Authority	UASC	Unaccompanied Asylum Seeking Children
GP	General Practitioner		



The Board



WHAT IS THE CHSCB?

The CHSCB is the key statutory body overseeing multi-agency child safeguarding arrangements across the City of London and the London Borough of Hackney.

Governed by the statutory guidance in **Working Together to Safeguard Children 2015** and the **Local Safeguarding Children Board (LSCB) Regulations 2006**, the CHSCB comprises senior leaders from a range of different organisations. It has two basic objectives defined within the Children Act 2004; **to co-ordinate the safeguarding work of agencies and to ensure that this work is effective.**

KEY ROLES AND RELATIONSHIPS

The Independent Chair

The Independent Chair of the CHSCB is Jim Gamble QPM. Supported by a Senior Professional Advisor, a Board Manager and a dedicated team, the Chair is tasked with ensuring the Board fulfils its statutory objectives and functions. Key to this is the facilitation of a working culture of transparency, challenge and improvement across all partners with regards to their safeguarding arrangements.

The Chair is accountable to both the Town Clerk of the City of London and the Chief Executive of the London Borough of Hackney. He met with both leaders frequently during 2014/15. The Director of Community and Children's Services for the City and the Director of Children's Services for Hackney also continued to work closely with the Chair on related safeguarding challenges.

Whilst being unable to direct organisations, the CHSCB does have the power to influence and hold agencies to account for their role in safeguarding. This influence can touch on matters relating to governance as well as impact directly on the welfare of children and young people.



The City: In 2014, the Chair, the Town Clerk and Director of Community & Children's Services, identified the need to further strengthen the CHSCB footprint in the City of London. To enable partners to apply a much clearer focus on local safeguarding arrangements, a City Executive group was created to drive forward the Board's business plan in the context of the City of London. To ensure scrutiny and challenge is facilitated appropriately, the Chair leads this forum.



Hackney: In April 2014, the Police convened a "Gold Group meeting" in response to the murder of a child and her mother in Hackney. At this meeting, concerns were identified by the Police regarding their response to reports of domestic violence in this case. The Chair immediately contacted the Borough Commander requesting reassurance that all the risks that could be mitigated by the Police had been addressed. This was provided swiftly, with the Police detailing the actions taken in terms of strengthening leadership and the additional resources being committed to Community Safety Unit. This case was later considered by the CHSCB Serious Case Review Sub Group with a combined Domestic Homicide Review and Serious Case Review being initiated.



The City & Hackney: In September 2014, the Chair set up a meeting with professional leads for Child Sexual Exploitation (CSE) across the City of London and Hackney. The purpose of the meeting was to establish reassurance that the partnership response to CSE remained robust and that there were no identified local deficits similar to those uncovered by Professor Alexis Jay as part of her inquiry in Rotherham. No similar issues were identified and whilst there was evidence of strong and positive work progressing across both areas, no agency was complacent about the risks or challenges in responding to this issue. The outcomes of this work were formally reported to the main Board.

THE CITY OF LONDON CORPORATION AND HACKNEY COUNCIL

Both the City of London Corporation and Hackney Council are responsible for establishing a Local Safeguarding Children Board (LSCB) in their area and ensuring that it is run effectively. A dual LSCB has been in operation for a number of years given the range of individual organisations that bridge both areas. The ultimate responsibility for the effectiveness of the CHSCB rests with the political leaders of both the City of London Corporation and Hackney Council. The Town Clerk in the City and the Chief Executive of Hackney are accountable to these roles. The Lead Members for Children's Services in both areas have the responsibility for making sure their respective organisations fulfil their legal responsibilities to safeguard children and young people.



The City & Hackney: A 360-degree feedback process was undertaken focussing on the Independent Chair's performance. The survey was sent to 27 Board members with 21 responding. The responses were overwhelmingly positive, illustrating confidence in how the Chair was providing strong leadership on behalf of the CHSCB. The full analysis of this exercise was shared with both the Town Clerk in the City



of London and the Chief Executive in Hackney to assist them in their roles of holding the Chair to account for his performance and that of the CHSCB as a whole.

PARTNER AGENCIES

All partner agencies across the City of London and Hackney are committed to ensuring the effective operation of CHSCB. This is supported by a **Constitution** that defines the fundamental principles through which the CHSCB is governed. Members of the Board hold a strategic role within their organisations and are able to speak with authority, commit to matters of policy and hold their organisation to account.



The City: Over 2014/15, the interface with the schools sector in the City continued to be supported by the City Safeguarding Education Forum. This forum has been vital in ensuring the education sector in the City are kept abreast of key safeguarding initiatives and engaged in Board activity. Tangible impact is seen through the engagement of schools in a follow up safeguarding review; participation in the Notice the Signs awareness campaign and an increase in the number of referrals made by schools in the last quarter of 2014/15.



Hackney: Following the completion of a local case review by the CHSCB, an agreed action was for Hackney Homes to become a formal member of the CHSCB. Through the leadership of the Chief Executive of Hackney Homes, this engagement has ensured an improved focus on safeguarding children, with significant training being provided to front-line staff (including housing operatives such as electricians / gas fitters) and the identification of safeguarding champions to help support staff raise concerns as appropriate.

DESIGNATED PROFESSIONALS

The Designated Doctor and Nurse take a strategic and professional lead on all aspects of the health service contribution to safeguarding children. Designated professionals are a vital source of professional advice. Across the range of CHSCB activities, these designated roles have continued to demonstrate their value during 2014/15.



The City & Hackney: “A case was escalated to me by the Designated Nurse of the City & Hackney Clinical Commissioning Group (CCG) concerning the lack of mental health provision for a young person placed out of borough in a residential school. This was reported as being due to a local CCG decision on access to services meaning that the young person was required to travel back to Hackney to receive

therapy. The Designated Nurse, despite numerous efforts, had been unable to resolve this matter to ensure local provision was made available. I raised the issue formally with the other area LSCB Chair and challenged the local CCG policy as not being appropriate. The other LSCB confirmed the case would be discussed with partners at an imminent LSCB meeting. I was subsequently advised that services would be made available for the young person although the other Board suggested this was a health commissioning matter and any related issues should be taken through those governance routes. I responded expressing my gratitude for this being considered and for a resolution being found for the young person. I disagreed this was solely a health commissioning matter, confirming my position that challenge was entirely appropriate and in accordance with the expected role of an LSCB chair.” Jim Gamble, Independent Chair

RELATIONSHIP WITH OTHER BOARDS

There is a clear expectation that LSCBs are highly influential strategic arrangements that directly influence and improve performance in the care and protection of children. There is also a clear expectation that this is achieved through robust arrangements with key strategic bodies across the partnership. During 2014/15, engagement continued with the City & Hackney Safeguarding Adults Board (CHSAB) and the respective Health and Wellbeing Boards and Community Safety Partnerships across both the City of London and Hackney. There were also additional opportunities for the CHSCB to interface with elected members through the scrutiny functions operating in both the City and Hackney. **Inter-board protocols** for the City of London and Hackney set out the interface across these forums to ensure clarity of strategic alignment and management of risk. From the CHSCB’s perspective, this helps ensure that the voice of children and young people and their need for safeguarding is kept firmly on the agenda in terms of multi-agency work involving vulnerable adults, health and wellbeing and the local response to crime.



The City & Hackney: In 2014, The Senior Professional Advisor to the CHSCB attended the CHSAB on behalf of the Chair to present an item on Child Sexual Exploitation. The Chair of the CHSAB agreed to this item being presented to senior leaders responsible for adult safeguarding given the need for agencies to continually apply a “think family” approach to their intervention and the connection of this agenda to the exploitation of vulnerable adults.

The Board continued to experience good attendance during 2014/15 with new members adding additional value to co-ordinated partnership working.

BOARD MEMBERSHIP & ATTENDANCE

The Board met four times, including a business planning session, during the 2014/15 and had a membership made up of representatives from all statutory partners and others concerned with safeguarding children. A list of current Board Members is set out at the back of this report. The attendance rates by agency for 2014/15 to the 3 full Board meetings are set out below. The represents how many seats there are per organisation.

Independent Chair	100% attendance
The City of London Community & Children's Services	100% attendance
The City of London Police	100% attendance
Lead Member – City of London	66.7% attendance
Lead Member – London Borough of Hackney	33.3% attendance
Hackney Children and Young People's Services	100% attendance
Met Police - Child Abuse Investigation Team	100% attendance
The Metropolitan Police Service - Hackney Borough	100% attendance
Hackney Learning Trust	100% attendance
Hackney Homes	100% attendance
Hackney Council for Voluntary Services	100% attendance
Hackney Health & Community Service (Adults)	100% attendance
Hackney Primary School representative	33.3% attendance
Hackney Secondary Head representative	100% attendance
The London Community Rehabilitation Company	100% attendance
The National Probation Service	100% attendance
Children and Family Court Advisory and Support Service	33.3% attendance
Homerton University Hospital NHS Foundation Trust	66.7% attendance
City & Hackney Clinical Commissioning Group	100% attendance
City & Hackney Public Health	66.7% attendance
NHS England	66.7% attendance
East London NHS Foundation Trust	100% attendance
Lay Members	100% attendance



Over 2014/15, the CHSCB members regularly reviewed performance through reference to a risk register and partner agency updates being submitted to each Board meeting.

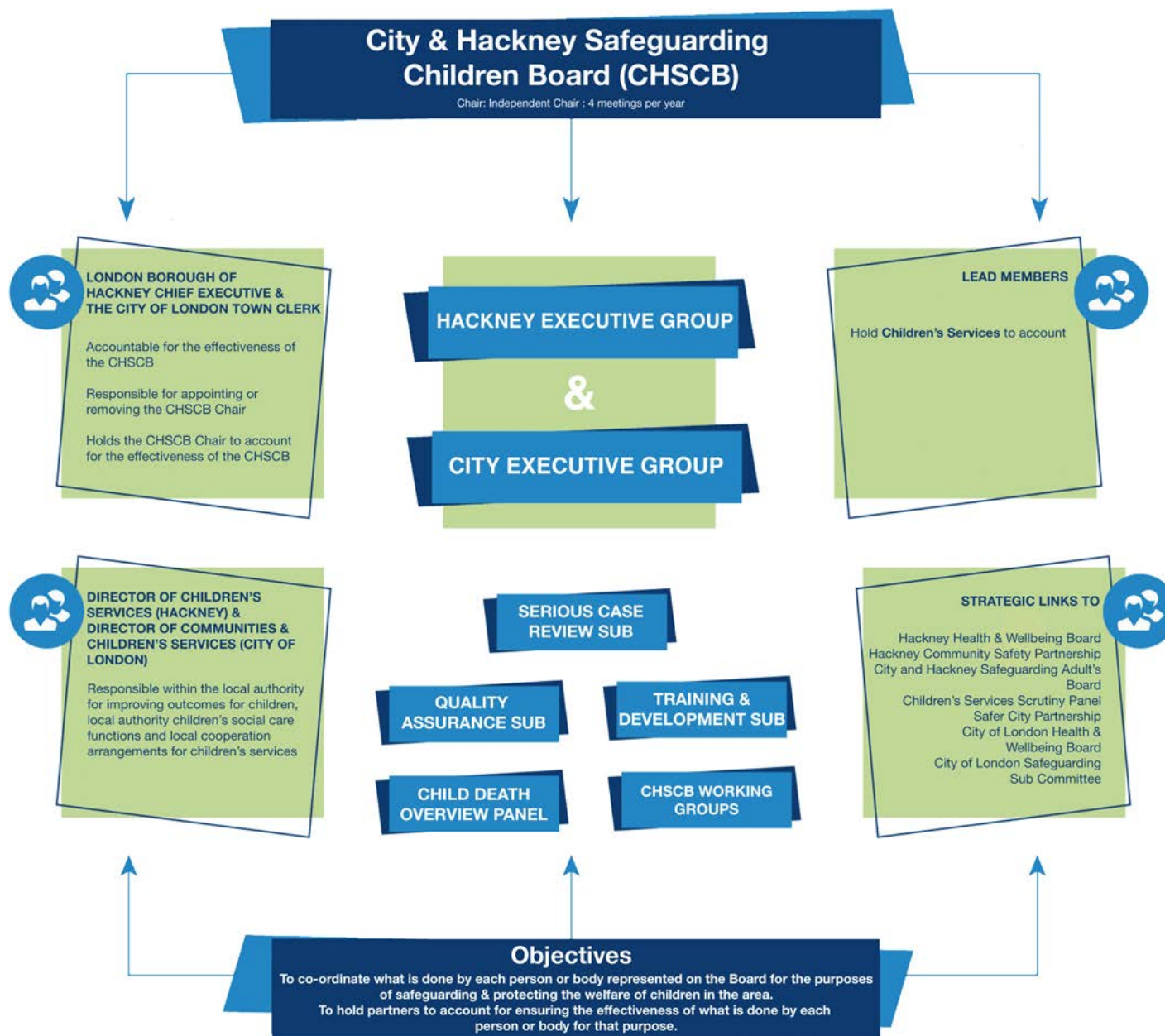


The CHSCB also introduced a rolling self-assessment process to reflect on its progress against the expectations of the single inspection framework.





CHSCB STRUCTURE





Having the right finances to deliver impact is key.

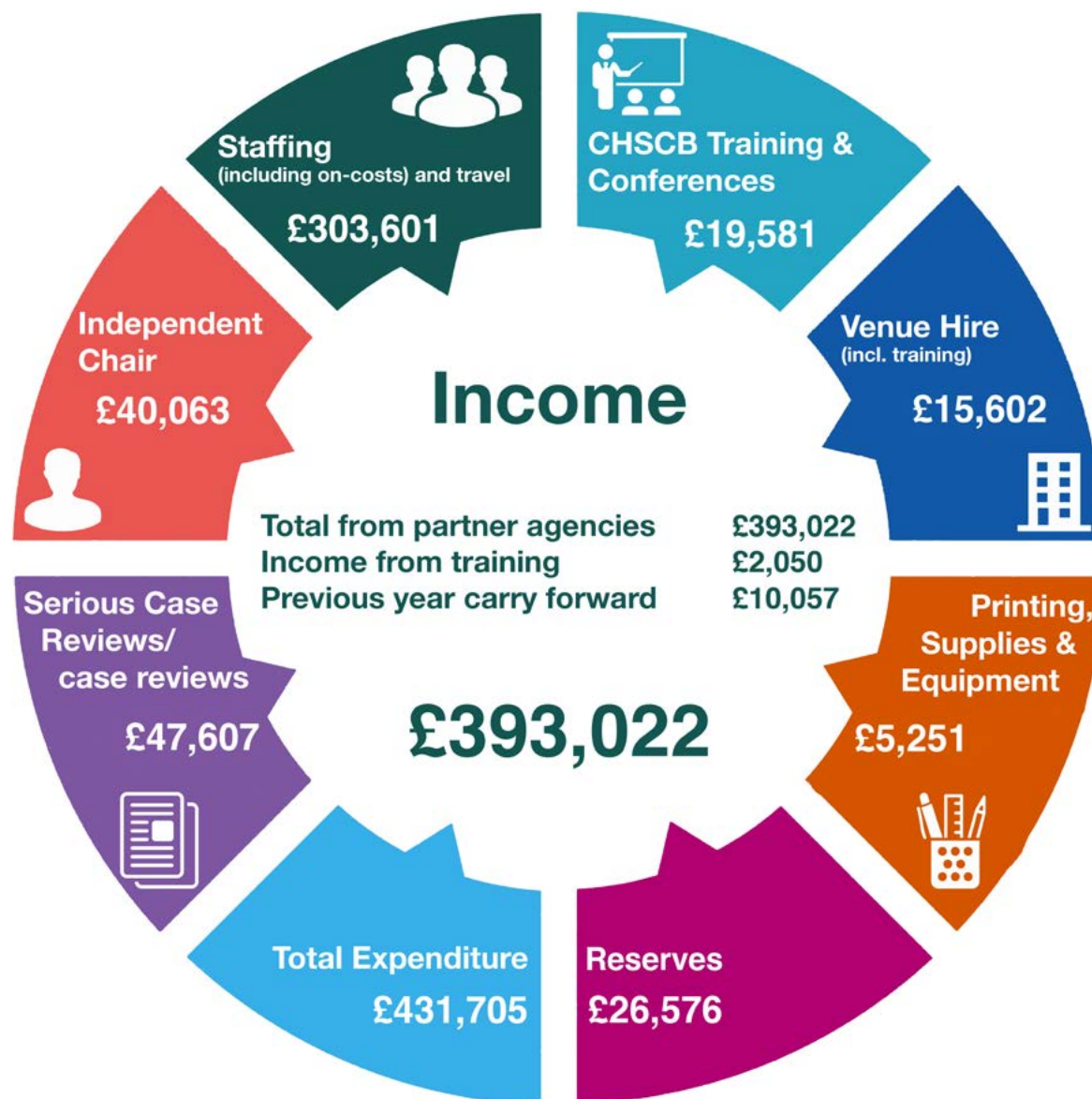
FINANCIAL ARRANGEMENTS

Partner agencies continued to contribute to the CHSCB's budget for 2014/15, in addition to providing a variety of resources, such as staff time and free venues for training. Contributions totalled £393,022, with Hackney CYPS contributing 73% of the total agency funding. Charges for non-attendance at training events provided an additional income of £2050.

£26,576 of reserves were accessed to help cover the increased expenditure in 2014/15 arising from Serious Case Review costs, additional work by the Independent Chair and staff vacancies in the Board team being filled. An under-spend of £10,057 was carried forward from the previous financial year making the total income available to the board £431,705. This income ensured that the overall cost of running the CHSCB were met.

There were funding reductions in 2014/15 from both Health (£12k) and the Metropolitan Police (£7k). In year costs were managed through the CHSCB accessing its reserves. Combined with additional costs arising from ongoing case reviews, budget pressures for 15/16 have been identified, considered and mitigated by CHSCB partners.

- Hackney CYPS facilitated access to free training venues saving a projected £16k going forward.
- The City of London Corporation has also enabled access to free training venues and has further increased its contribution by £6k.
- City of London Police, an agency that has not previously contributed, committed to providing £2k in funding for 15/16.





Our Lay Members have played an important role supporting stronger public engagement and understanding of children's safeguarding issues.

WHAT OUR LAY MEMBERS SAY

The attendance of Lay Members at Board meetings and a variety of other forums has been key to offering a different perspective, helping everyone to stay in touch with local realities and the issues of concern in our communities. Whilst meeting statutory requirement, both our current Lay Members are Hackney residents. The CHSCB and the City of London Corporation are actively recruiting a City resident to ensure focus and balance.



"Over the last year, I have spent time getting to understand the work of the Board and have met with senior leaders from a variety of organisations. I have attended a range of meetings where I have contributed to the discussion and offered my own perspective based on my 30 years of living in Hackney. Over the next year, I intend to focus on meeting with young people, parents and carers. A really interesting project will be the peer review process where I will helping the Board test and challenge the safeguarding self-assessments undertaken by organisations through the Section 11 audit process." Professor Sally Glen



"I have spent the last year consolidating my understanding of the key priorities of the Board, the impact that the different agencies are making to keep children safe and how the voice of children parents, carers and the wider community influence decisions made. As a lay member a key role is to offer constructive challenge to the Board and act as a voice for the community. It has been my role to raise issues, ask questions based on what families and community organisations supporting families tell me. These conversations have influenced some of the challenges I have raised at Board meetings and my work programme for next year." Shirley Green





The CPA provides consultancy, support and specialist training to staff on behalf of the CHSCB.



COMMUNITY PARTNERSHIP ADVISOR CONSULTANCY

With significant expertise on issues related to child trafficking, so called 'honour' based violence, forced marriage, female genital mutilation and children abused through faith, belief or culture, the Community Partnership Advisor (CPA) is a unique role, and is often called upon by other local authorities for assistance. During 2014/15, the CPA provided support and consultancy in 70 individual cases. All of the cases considered involved children, young people and families living in Hackney. There were no cases from the City of London with 5 additional consultation requests being made by other local authorities.



"...the initial consultation helped me to better understand the religious element of the case. I found it especially helpful to have the presence of the CPA during a joint visit with the father... I was able to use the work of the CPA to inform the assessment and facilitate further conversation with the mother, which I believe

increased her engagement in the assessment process. Following our intervention the father stopped threatening the mother". Social Worker, Hackney CYPS



The CPA met with a group of 6 young people over 2 sessions following a consultation with a worker in Young Hackney. The group had expressed a belief that "bad" behaviour was due to the influences of evil spirits.

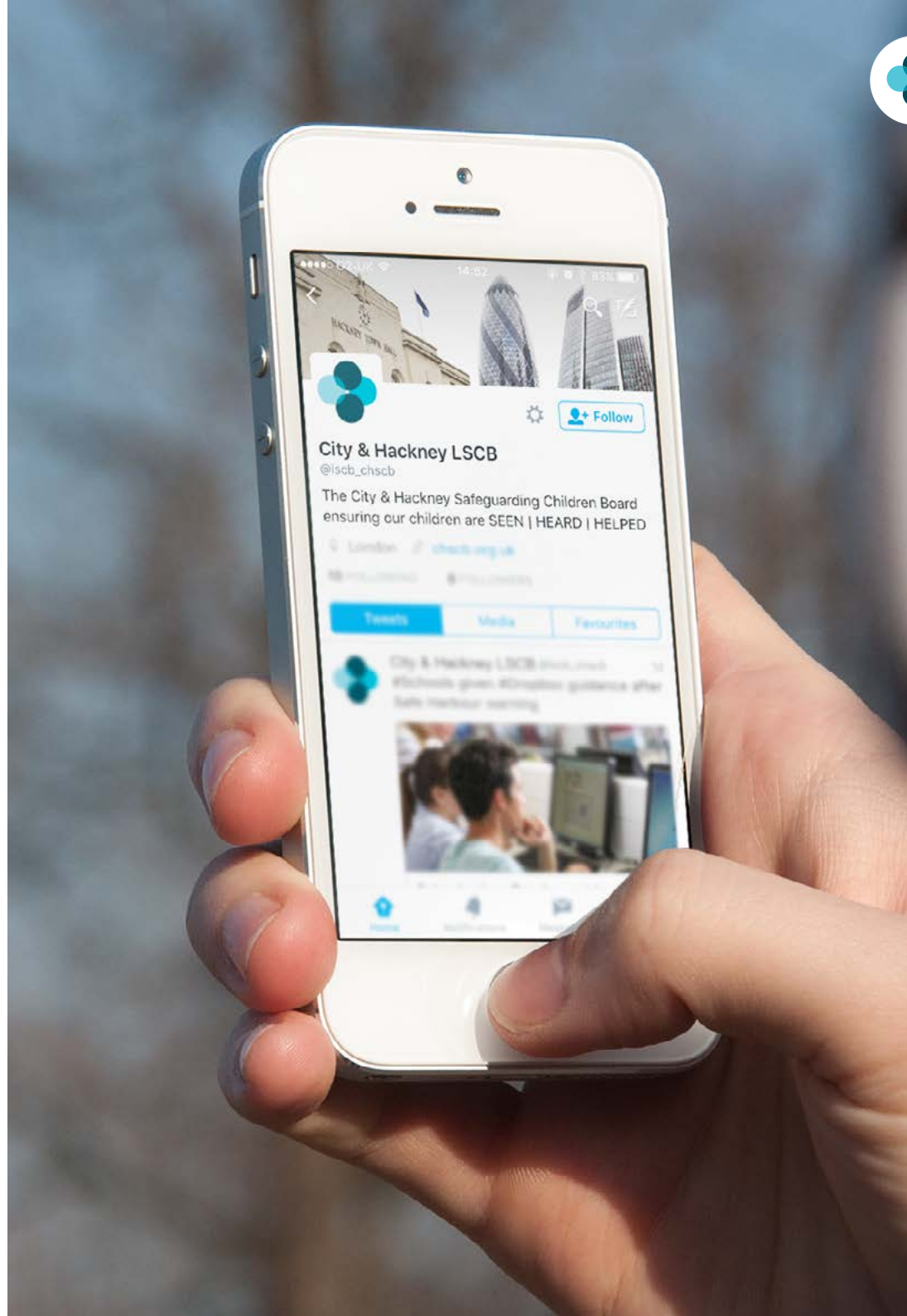
Specialist support was requested from the CPA to help challenge these views with the young people concerned. The work of the CPA focused on hearing their views and helping the young people understand the context of this behaviour being abusive.

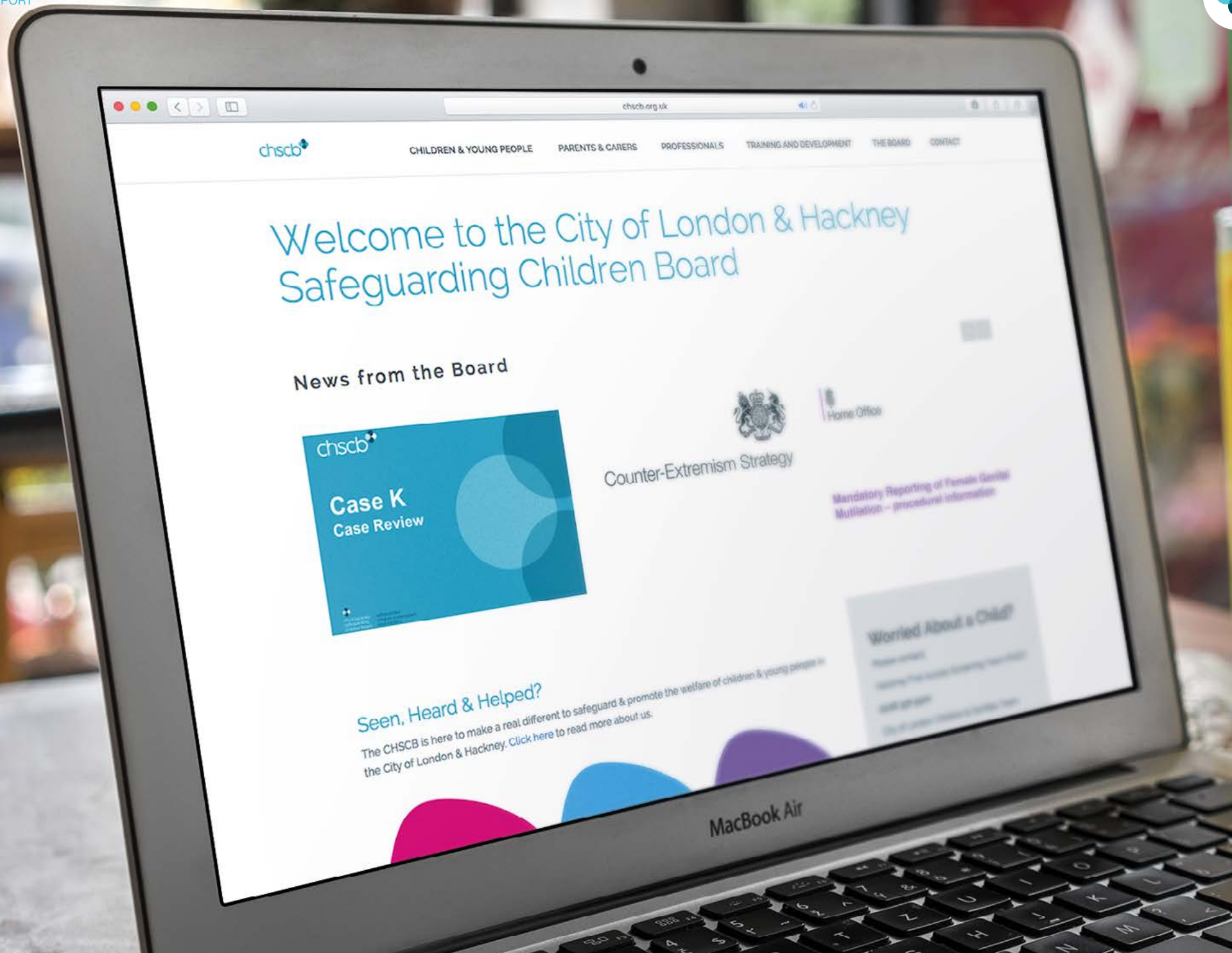


Communication

Significant work has been undertaken by the CHSCB in developing its ability to communicate with all stakeholders.

A new website has been central to this work, alongside the creation of a Twitter account and a re-designed e-briefing for staff. All these platforms will be fully operational in 2015/16.







The City of London Safeguarding Snapshot 2014/15

The City Safeguarding Snapshot 2014/15



1062 children live in the City
25% of total population



21% of children living in low-income families

30 Team Around the Child meetings held

0 City children and young people identified as being at risk of CSE

5 children and young people not resident in the City identified at risk of CSE by the Police - protected with liaison with home authority.

2 incidents of children & young people going missing from care.

Approximately 32% of children in receipt of free school meals

0 incidents of children & young people missing from home.

81 contacts to the City Children & Families Team Hub

20 referrals / 0 re-referrals

17 statutory social work assessments completed by The City Children & Families Team

22 days – average timeliness of assessments

9 child protection investigations

3 Children on a Child Protection Plan as of March 2015.

7 open Children in Need cases as of March 2015

1 child with a disability



8 children & young people looked after as of March 2015

14 domestic violence notifications made to the police where children and young people were in the household



4 repeat incidents of domestic violence

2 MARAC meetings involving children

5 allegations against staff working with children and young people

0 Private Fostering arrangements as of March 2015

477 multi-agency professionals attend Notice the Signs briefings





Safeguarding Context in the City of London



There is an improved focus on what really matters in the City of London... context is key.

The categories and themes set out in this section do not cover all the factors influencing the risk to children and young people within the City of London. The focus is on key local vulnerabilities and related themes, about which the CHSCB needs to have heightened scrutiny in terms of effective multi-agency practice to protect children and young people.

CITY DEMOGRAPHICS

Approximately 1062 children and young people live in the City of London. It is an economically diverse area. 21% of children and young people live in low-income households whilst the others live in families where income is £300 a week more than the London average. Within the Square Mile, there are large disparities between areas. The Barbican West and East residential areas are among the 20% most affluent areas in England. Golden Lane and the rest of the City are among the 40% most affluent. Portsoken Ward, however, is among the 40% of most deprived areas in England. The City's residents are predominantly white and speak English as their main language, although around 43% of the children and young people are recorded as coming from Black and Ethnic Minority (BME) backgrounds. The Bangladeshi community makes up 4% of the population.

Domestic abuse is a key issue in the City with the majority of child protection investigations in the City involving domestic abuse concerns. There are no children involved in the criminal justice system currently and no teenage pregnancies. Academic attainment for City resident children is higher than the national average – 67% of Key Stage 4 students are likely to gain at least five A* to C, including English and Maths. The numbers of children and young people Not in Education, Employment or Training (NEET), obesity rates, infant deaths and underweight babies, hospital admissions for self harm, deliberate injury, alcohol-related injury and the number of pregnant smokers are all low with numbers ranging from 0 to 5 in each category. There are no children currently identified as victims of child sexual exploitation who live in the City. Very few children are reported missing from home or care during the year.

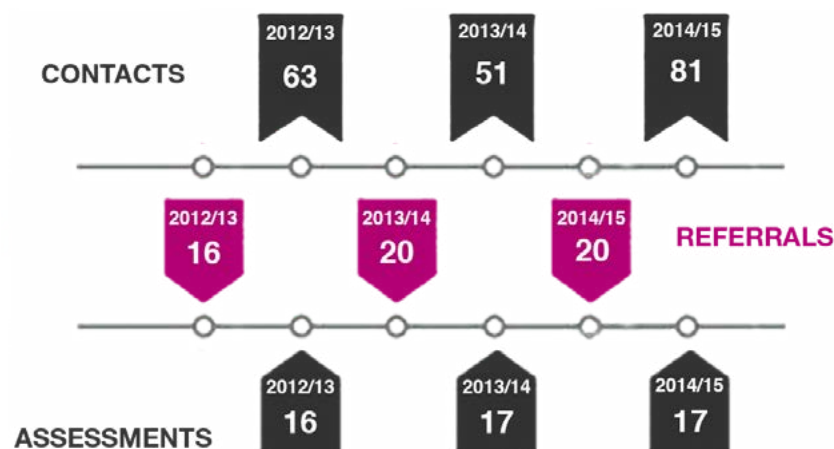
Within the City, there is one maintained primary school (with a Children's Centre attached) and five independent schools. It has no maintained secondary schools. The majority

of children attending these schools come from other boroughs and most of the local authority's secondary school age children go to school outside of the City.

CONTACTS, REFERRALS AND ASSESSMENTS

The Children and Families Team Hub acts as a single point of contact for referrals to both Early Help Services and Children's Social Care (CSC) in the City. It provides responsive screening activities and ensures all contacts are immediately progressed as a referral if the threshold for a statutory social work assessment is met. Signposting activity requires staff to have a continually updated knowledge of local services alongside a comprehensive understanding of the City Of London Thresholds of Need.

In 2014/15, 81 contacts were made with the Children and Families Team Hub regarding a range of issues concerning the welfare of children and young people. This is a 63% increase on 2013/14. There were 20 referrals accepted for a statutory social work assessment. This is the same as 2013/14, with numbers remaining broadly consistent over the last 3 years. There have been no re-referrals in the last 2 years. **City's lower than average repeat referral rate is considered by the CHSCB to be indicative of high quality social work assessments and timely access to appropriate support.**



The overall numbers of contacts and referrals are, however, lower in the City than in other Local Authority (LA) areas. The referral rate in 2014/15 (209.4 per 10,000) was lower than all other comparable LAs in London (580.4 per 10,000).

The rate of child protection (Section 47) enquiries in 2014/15 was 94.2 per 10,000. The threshold for Section 47 is appropriate and whilst lower than national rates (138.2 per 10,000) children are not being unnecessarily subjected to Section 47 enquiries in the City. 100% of enquiries are completed within 10 days or less, 100% of Initial Child Protection Conferences take place within 15 days of the strategy meeting where the decision was taken to convene an enquiry. **This means that in the City children receive a timely service when safeguarding concerns are apparent.**

Analysis of performance during the year continued to suggest lower levels of referrals than should have been the case, and, whilst still below national levels, the numbers of children in need were suggesting referral rates should be higher. **In addition to this analysis by senior managers, the City also raised concern about the low levels of referrals from a number of key agencies, including schools and the police.** To address this a number of actions were taken with partners:



The Notice the Signs campaign reached 477 professions and members of the public to raise awareness of safeguarding.



The City Thresholds of Need document was rewritten and subsequently re-launched by the CHSCB. Procedures relating to front door case management were reviewed with clearer management guidance put in place to ensure that the Children & Families Team Hub opened cases as a referral appropriately.



Police were asked to refer all contacts, even if the child was not resident in the City, so that there was better liaison around which cases met the threshold and to build up a picture of trends and patterns from repeat contacts, which might be relevant to Child Sexual Exploitation.



Agencies were challenged about their referral rates at the CHSCB City Executive group.

As a consequence there was an immediate rise a sharp rise in contacts in Quarter 4 of 2014/15, with 32 contacts (17 from the Police & 5 from schools). This increase did not result in a corresponding increase in referrals and assessments, although **any subsequent trend in 2015/16 will be kept under close review by the CHSCB, with**



the City remaining alert to the possibility of increased social work capacity if required.



The low rate of Children in Need in the City should be treated with some caution. Children and families in the City are closely supported by early help and other universal services, including post birth visits from the Children's Centre Outreach worker. The strength of these services is likely to affect the low referral rate. Other factors include the fact that many children are likely to live in households with higher levels of income. Referrals relating to this demographic are likely to be lower for two reasons. Firstly, these children are likely to have less need arising from material deprivation and secondly, their need is potentially hidden because professional parents may not wish to involve children's social care services, and the local authority has a far greater challenge in keeping track of where these children live and attend schools.

The Children and Families Team Hub aims to ensure that only those children meeting thresholds for statutory assessments are progressed as referrals. Local Authorities undertake these assessments to determine what services to provide and what action to take. The full set of statutory assessments under the Children Act 1989 can be found **here**.

The Children and Families Team completed 17 assessments during 2014/15 and there has been no significant change over the past three years. **100% of assessments undertaken in the City are completed within 45 days or less meaning that children and families are receiving a timely service in this aspect of intervention.**



The rate of child protection (Section 47) enquiries in 2014/15 was 108.6 per 10,000. The threshold for Section 47 is appropriate and whilst lower than national rates (124.1 in 2013/14) it is in line with statistical neighbours and higher than some other large London Boroughs. Children are not being unnecessarily subjected to Section 47 enquiries in the City. 100% of enquiries are completed within 10 days or less, 100% of Initial Child Protection Conferences take place within 15 days of the strategy meeting where the decision was taken to convene an enquiry. **This means that in the City children receive a timely service when safeguarding concerns are apparent.**

All Section 47 enquiries undertaken in the City are led by a suitably qualified and experienced registered social worker. Audit activity by the CHSCB and the City of London confirms that the findings from child protection enquiries are clear and that decisive action is taken when required. The City of London has an extremely low requirement to implement immediate protection arrangements with just one EPO being issued by the courts in the last 5 years.

CHILDREN ON CHILD PROTECTION PLANS

Following a child protection enquiry, where concerns of significant harm are substantiated and the child is judged to be suffering, or likely to suffer, significant harm, social workers and their managers should convene an Initial Child Protection Conference (ICPC). An ICPC brings together family members (and children / young people where appropriate) with supporters, advocates and professionals to analyse information and plan how best to safeguard and promote the welfare of the child / young person. If the ICPC considers that the child / young person is at a continuing risk of significant harm, they will be made the subject of a Child Protection Plan (CPP).

Children who have a CPP are considered to be in need of protection from either neglect, physical, sexual or emotional abuse; or a combination of one or more of these. The CPP details the main areas of concern, what action will be taken to reduce those concerns and by whom, and how professionals, the family and the child or young person (where appropriate) will know when progress is being made.

Only 3 children were subject to a CPP in the City during 2014/15. Whilst numbers are low, caution should be observed in analysing these figures because variations of one or two children on a CP plan can have a major impact on the rate per 10,000 and this performance can therefore fluctuate.

No children were on a child protection plan for over 2 years with 100% being taken off a child protection plan within twelve months or less. None of the children who have been placed on a child protection plan have been previously subject to a child protection plan. Where children were deplaned, they received a child in need plan with support which was effective. **This is very good performance and means that the work with children at risk of significant harm is timely and effective and that children are not subject to case work drift.**

LOOKED AFTER CHILDREN

A child or young person who is "looked after" is in the care of the local authority. They can be placed in care voluntarily by parents struggling to cope, they can be unaccompanied asylum seeking children; or in other circumstances, Hackney CYPS and partners will intervene because the child or young person is at risk of significant harm.

As at 31st March 2015, the City was responsible for looking after 8 children and young people, 5 of whom were Unaccompanied Asylum Seeking Children (IASC). Multi-agency case auditing by the CHSCB in 2014/15 evidenced strong and child focussed support being provided to looked after children.

PLACEMENT STABILITY, TYPE AND LOCATION

In 2014-15 no children looked after by the City had three or more changes of placement over the year. This is very good performance, against the national average of 11%, and 13% for statistical neighbours. This means that children looked after in the City enjoy good stability and placements that meet their needs well. The number of young people in care in the same placement for two and half years or higher is 76.9% for 2014-15. This is good performance and is better than statistical neighbours at 64.9% and the England average of 67%. The difference between this figure and 100% is just one young person in the cohort who has not yet reached 2 years in the same placement. **This means that children in the City are living in stable and suitable placements.**

The local authority does not have its own fostering service due to the size of the looked after children population, but spot purchases from the Pan London consortium. Ofsted rates all independent fostering agencies used by the City either Good or Outstanding. There are sufficient suitable placements available to meet the needs of the City's looked after children and young people. All placements are outside of the local authority but only 1 is placed over 20 miles. This placement is kept under close review to ensure that it continues to meet the young person's needs and is appropriate.



DOMESTIC VIOLENCE AND ABUSE

Ensuring a coordinated and robust response to domestic violence and abuse is a priority for the CHSCB. The Safer City Partnership initiated a comprehensive review of the response to domestic violence and abuse in 2014 and this will be subject to further monitoring by the CHSCB in terms of its influence on arrangements to safeguard children and young people. Further detail on the progress made in response to domestic violence and abuse is set out later in this report.

- 14 domestic violence notifications received by the police (reducing from 19 in 2013/14)
- 2 MARAC meetings held
- 4 incidents of repeat domestic violence
- 14 of the 17 social work assessments undertaken in 2014/15 featured domestic violence

CHILDREN AND YOUNG PEOPLE AT RISK OF SEXUAL EXPLOITATION

Multi-agency work to identify children and young people who may be at risk of Child Sexual Exploitation (CSE) across the City of London continues to be driven as a priority for the CHSCB and partner agencies. The range of achievements over 2014/15 are set out later in this report. No child sexual exploitation cases involving a City resident child were identified in 2014/15, although partners remain clear about the multi-agency response required. The City of London Police did identify and protect 5 young people at risk of CSE who were not City residents. Swift and appropriate communication was made to the home authorities of the children concerned.

CHILDREN MISSING FROM HOME, CARE AND EDUCATION

Children missing from home, care and education is a priority for the CHSCB. The partnership response has been steered by a multi-agency missing children working group and the development of a CHSCB strategy and City specific action plan. Achievements made by partners in responding to missing children and young people are included in this annual report. In 2014/15, no children were reported missing from home or education. 2 young people went missing from care.

ELECTIVE HOME EDUCATION

As of March 2015, there were 2 children identified as being educated at home in the City of London. Children subject to these arrangements are closely monitored in the City, with staff visiting those who are educated at home on a six monthly basis (the requirement being annually), to ensure they are accessing the educational requirements, and making good progress.

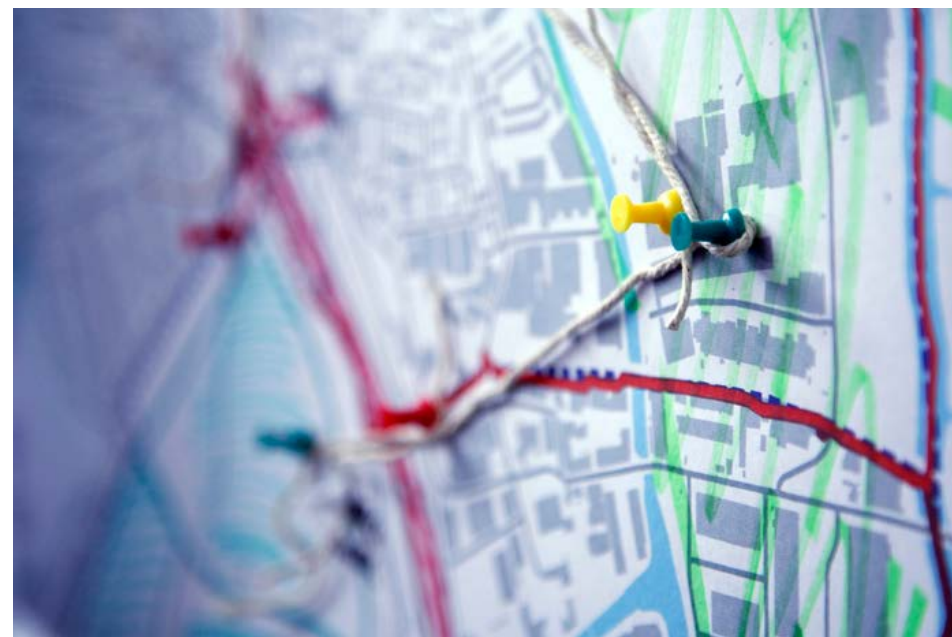
PRIVATE FOSTERING

A child under the age of 16 (under 18, if disabled) who is cared for and provided with accommodation by someone other than a parent, person with parental responsibility or a close relative for 28 days or more is privately fostered. A full analysis of activity in the City over 2014/15 is available in the Private Fostering Annual Report 2014/15.

The arrangements for managing private fostering in the City accord with statutory requirements. The local authority has clear procedures in place for managing private fostering referrals although there have been no private fostering cases referred in the last 3 years. A range of activity has been undertaken to raise awareness of private fostering in the partnership and with the community, with work in this area remaining subject to ongoing activity.



During 2014/15, the City of London revised and reissued a range of promotional material to ensure Private Fostering is kept high on the agenda of partner agencies. Supported by the CHSCB, new posters and leaflets on private fostering for professionals, parents and carers and young people have been updated and continue to be distributed on a regular basis to a wide range of relevant groups including schools, GPs, children's centres, faith groups, housing offices and libraries.





Awareness raising training around Private Fostering has also taken place on a regular basis. Last year there were 8 events targeting residents and staff to raise awareness of the issue. Staff in the Children's Centre have also been trained in identifying privately fostered children and a training tool is available for agencies. The Annual Private Fostering report for 2014/15 is presented to the CHSCB to address the position on Private Fostering and a renewed plan to drive this will be taken to the CHSCB as part of this process. Measures going forward include strengthening the links with schools and hospitals that cater for City children but are outside the City boundaries and setting up robust systems to track which secondary schools children move on to.



The CHSCB introduced an Annual Survey of Independent Schools in the City to check that they have identified all children who might be privately fostered. In 2014/15, whilst this process did not identify any City resident child, one child who lives in another borough, but attends a City school was identified as living in a private fostering arrangement. Assurance was sought from the school that this child had been notified to the relevant authority and that appropriate support was in place. This was confirmed.

CHILDREN WITH DISABILITIES

At the beginning of September 2015, there were 14 children and young people with disabilities known to the Education and Early Years Team. 6 of these children were not known to the Education and Early Years Team at the beginning of September 2014. 1 child has since left the City. The children are more or less evenly split across the primary and secondary age range (5 primary and 6 secondary). There are 2 young people at specialist colleges.

8 of the pupils are subject to a statement of special educational needs (SEN or an Education, Health and Care (EHC) plan and the 2 have Learning Difficulty Assessments (LDA's). 3 of the children do not have a statement of SEN or an EHC plan. 6 are on the autistic spectrum and 1 is currently under assessment. 7 of the children are receiving support from the Early Help or Social Care Team (6 accessing short breaks) and the 2 young people at specialist colleges are supported by Adult Social Care.

MAPPA

Multi-Agency Public Protection Arrangements (MAPPA) are the statutory measures for managing sexual and violent offenders. The Police, Prison and Probation Services (Responsible Authority) have the duty and responsibility to ensure MAPPA are established in their area and for the assessment and management of risk of all identified MAPPA offenders. The purpose of MAPPA is to help reduce the re-offending behaviour of sexual and violent offenders in order to protect the public from serious harm, by ensuring all agencies work together effectively. MAPPA registered offenders make up 83% of the caseload of staff in the National Probation Service (including offenders on community orders, in custody and released on licence)

Between April 1st 2014 and March 31st 2015, 4 MAPPA meetings were held. The offenders involved were subsequently screened in and out of the process when actions completed and risk lowered. MAPPA statistics for 2014/15, identify there were 7 registered sexual offenders in the City out of a total of 6604 living in London. This is considerable lower than other London boroughs where there numbers range between 108 – 368 offenders per borough (2015/2015 MAPPA annual report).





Progress in the City of London



There is a well-embedded Early Help Strategy in place led by the Early Help Sub Group in the City.

EARLY HELP

Early help services across the City of London are delivered by People's Services and a range of partners, including schools, children centres, one GP surgery and health colleagues as well as other local service providers, including the community and voluntary sector. The range of services available to children, young people and their families are set out within the City of London Resource guide for Practitioners and these continue to adapt and evolve based on the needs of the local population.

The early help arrangements in the City have been in place now for a number of years and are embedded with agencies. The Children and Families Team comprises 3 social workers and a Senior Practitioner and 2 dedicated early help workers. Close working exists between the Early help team and the Outreach and Family Support Workers attached to the Education and Early Years Service and Children's Centre at John Cass Primary School. The interface between early help and child in need/child protection is clear through the management of all referrals via the Children and Families Team Hub. The duty social worker takes all referrals and is able to step down cases for an early help response easily and rapidly where this is appropriate. The Early Help team is well resourced, and trained in the Solihull approach for working with hard to engage families. They take on the lead professional role for local agencies and co-ordinate the Team Around the Child.

This means that all children needing an early help service in the City receive a well-resourced, dedicated service, which is provided by trained staff, supervised by a Social Work Team Manager. This arrangement also enables the Team Manager to oversee the step up and step down process and decision making to ensure that they are appropriate and reflect the needs of the child.

The Early Help Strategy for the City of London was published in 2014/15. With a focus on ensuring the right help is provided at the right time and in the right place, the strategy is focussed on five key strategic objectives and is being driven by the Early Help Sub Group of the City CHSCB Executive group. The strategy's ambitions complement a range of existing enhanced universal and targeted services supporting early help that include:

- A Family and Young People's Information Service (FYi) who seek to visit all children born in the City and make parents aware of the Early Help services available.
- A Family Information Service Directory
- Outreach by the Family Information Service
- A range of parenting, literacy, numeracy, and speech and language classes/courses for parents
- Short Breaks scheme
- Educational opportunities for families in the library settings
- Free child care for 2, 3 and 4 year olds
- Every Child a Talker programme
- The HENRY Course to promote healthy eating, nutrition and good parenting.
- There have been no teenage pregnancies in the City for a number of years, which is due in part to the preventative programme led by City Gateway.

The number of inappropriate referrals is considered low in the City and partners know what to do if they are worried about a child. Data also shows an increase in the use of Early Help on last year, with a rise from 15 referrals into Early Help in 2013-14 to 36 in 2014-15. **This is encouraging and shows that the use of the Early Help pathway and CAF is bedding in well across the partnership. The rate of referrals for statutory child protection or child in need services was also maintained at the same level further suggesting that the Early Help offer is effective.**

Work to revise the [City of London Thresholds of Need](#) document was also initiated in 2014/15 and subsequently re-launched to CHSCB partners. The publication of this document is a statutory requirement for LSCBs as set out in Working Together 2015. It details the process for the early help assessment and the type and level of early help services to be provided; the criteria, including the level of need, for when a case should be referred to local authority children's social care for assessment and for statutory services and clear procedures and processes for cases relating to the sexual exploitation of children and young people. CHSCB awareness raising on this aspect will continue through 2015/16.



THE MULTI-AGENCY PRACTITIONERS FORUM

Supporting the partnership understanding of early help, a monthly meeting for practitioners delivering early help services is held in the City. This Multi-Agency Practitioners forum (MAPF) provides an opportunity for front-line staff within a multi-agency context to discuss practice matters, encouraging consistent and effective service delivery.

During 2014/15, the Family Information Service collated and produced a new City of London Resource Guide for Practitioners bringing together details of all the services a practitioner working in the City might need to contact in the course of supporting a family – from pre-natal and maternity right through to adult care. Through use of their local knowledge, the MAPF was instrumental in identifying the relevant content, with most

services being delivered via the broad range of agencies represented at this important forum.

Priorities going forward:

- Early Help remains a priority for the CHSCB going forward into 2015/16. The CHSCB will continue to evaluate the effectiveness of early help services in the City of London through the use of its Learning and Improvement Framework.





Children and young people who are exposed to domestic violence and abuse can grow up in a vacuum of what is expected in terms of a positive and healthy relationship.

DOMESTIC VIOLENCE AND ABUSE

It is estimated that in the past year 7.1% of women and 4.4% of men have experienced intimate violence. Applying these figures to local populations would suggest that 200 women and 100 men in the City of London have experienced intimate violence in the past year. Responding proactively and in collaboration with the Safer City Partnership (SCP) remains a key priority for the CHSCB, recognising both the short and long term impact on the safety and welfare of children and young people.

During 2014/15, the SCP undertook a comprehensive review of domestic abuse arrangements. It identified strengths in the work of the police and the Independent Domestic Violence Advocate (IDVA) in providing effective support to adult victims, based on extremely positive victim feedback and an increased number of referrals. Police have trained their frontline staff to identify domestic abuse and this has led to a rise in identification of cases. The police have also undertaken innovative work with local businesses around prevention of stalking and harassment.

The review also identified a range of improvements required and an action plan was agreed that is being taken forward:

- Strengthen the strategic joined up work of key agencies – housing, public health, health providers, CCG, voluntary sector, police and Social Care, and the Health and Wellbeing Board under a broader remit of Violence Against Women and Girls (VAWG). The VAWG strategy would encompass domestic violence and abuse, female genital mutilation, forced marriage, “honour” based violence, prostitution and trafficking, sexual violence including rape, sexual exploitation, sexual harassment, stalking and faith-based abuse.
- Appoint a VAWG Coordinator for 3 years to lead partnership work and joint commissioning.
- Develop a joint commissioning strategy based on pooled budgets

- Develop clear pathways for victims and explore colocation of agencies, notably the IDVA, Police and Children and Adult Social Care to improve multi-agency services.
- Develop a robust outcome based framework for evaluating the impact of VAWG work.
- The need to develop programmes for perpetrators

In terms of progress over 2014/15, the following examples evidence the positive work undertaken by the partnership:

RAISING AWARENESS

In partnership with the City of London Corporation, The City of London Police ran a series of half-day training/workshops with partners between January and March 2015 called “Behind Closed Doors”. This enabled agencies to know how to respond appropriately to domestic abuse incidents and reached 113 members of staff from a wide range of partners including the voluntary sector and health agencies, and included every Police Officer in the City.

TRAINING FOR THE WORKFORCE

Since March 2014 the CHSCB has delivered safeguarding training on domestic abuse to 20 staff from the City who have come from adult social care, the police, substance misuse agencies, schools and ELFT.

To strengthen the understanding around domestic abuse in the City and to link research to practice, a seminar was held in November 2014 with the Department of Social, Therapeutic and Community Studies, Goldsmiths. The seminar included 70 key policy makers and practitioners working in the areas of social work, health, education, housing, community safety, and law enforcement. Attendees found the event extremely helpful in developing their thinking around domestic abuse.



SERVICES FOR DOMESTIC VIOLENCE AND ABUSE

A directory of services was developed in 2012 for the public and professionals to ensure that victims have access to the support that they need. This provides an extensive range of resources for victims including safe house services, services specifically for ethnic minority service users and Lesbian, Gay and Transgender victims, and advice lines for children. It also included resources for male perpetrators and advice lines for men around domestic abuse.

Adult victims of domestic abuse receive support the Sanctuary scheme which has been commissioned since April 2013. Since then, Sanctuary have provided support to 9 victims of domestic abuse who have presented to the Housing Service, 4 of which involved children.

Currently, perpetrators are referred to the Westminster Domestic Violence Intervention Project and children who need therapeutic support receive help from CAMHS. The service needs to make greater use of the perpetrator project and support for children needs to be more bespoke to the needs around domestic abuse. Specialist support for children living with domestic abuse is currently being commissioned.

MARAC

Operational arrangements for MARAC (multi-agency risk assessment case conference) processes are clearly defined in the City. The City MARAC operates a lower threshold than in other local authorities, and takes cases where a preventative approach would be helpful. This is good practice and enables children with these families to have a better co-ordinated multi agency service. In 2014/15, only 2 cases were referred for a MARAC. Both had a risk assessment completed by the police. One case was subsequently referred for a statutory social work assessment. The other was stepped down to early help services. A new Primary Care MARAC Liaison Service funded by the CCG, is also available to ensure clear communications with the one City surgery as needed.

IDENTIFICATION AND REFERRAL TO IMPROVE SAFETY (IRIS) PROGRAMME

The Identification and Referral to Improve Safety (IRIS) programme was established in 2007 in response to evidence indicating a high prevalence of domestic violence among women attending GP surgeries. The programme trains primary health care professionals to identify domestic violence and abuse and creates a mechanism so women can be referred to specialist domestic violence services. Since July 2014, all City and Hackney GPs have signed up to the service, which is delivered by Nia, a voluntary sector organisation.

Priorities going forward:

- The City and the CHSCB recognise that the arrangements for children who live with domestic abuse need further development.
- The CHSCB will continue to monitor the implementation of actions arising from the review and hold agencies and the SCP to account for performance in this area.
- A review of services for children and a Violence Against Women and Girls (VAWG) strategy for children is being prepared to go to the CHSCB for agreement and implementation.
- This will address the early help arrangements for families experiencing the onset of domestic abuse, the procedures, pathways, protocols and training required for staff working with domestic abuse and VAWG, direct work and therapeutic support for children who live with domestic abuse, perpetrator programmes, and parenting support for parents.





Neglect can be a catalyst to future vulnerabilities for young people.

NEGLECT

The impact of neglect on children and young people is enormous, yet it can be difficult to define and research shows that it often co-exists with other forms of abuse and adversity. It is also the most common reason for child protection plans in the UK. Neglect can be a catalyst to future vulnerabilities for young people, for some who have experienced Neglect there are additional risks of harm as they grow up.

The CHSCB identified neglect as an area of priority reflected through the initiation of two multi-agency case reviews, where chronic neglect had been the key issue. The learning from Child E is set out later in this report. The learning from Child K will be disseminated in 2015/16. Whilst neither case had arisen in the City, learning is equally relevant.

Key themes include:

- that children should be **seen, heard and helped**, with the importance of conducting **home visits** and seeing children in different environments
- the need to identify and **name Neglect as a potential concern**
- when working across children and adult services remembering to **“Think Family”**
- the additional vulnerability of **children with disabilities**
- the duty to respond and **escalate concerns**.

NEGLECT BY AFFLUENCE:



Specific to the City of London is the need not to ignore the potential of neglect by affluence, particularly in the context of an area that has pockets of families with significant wealth. Multi-agency case auditing undertaken by the CHSCB during 2014/15 identified circumstances in which affluent parents were also neglecting the needs of their children; affected by a range of issues that had nothing to do with poverty or material wealth – but the impact of mental health and low mood. Specific actions have been taken forward by the partnership in the City in this regard, but it a timely reminder that agencies need to be alert to the needs of children and young people whatever their family circumstances.

The CHSCB partnership work in responding to Neglect is progressing into 2015/16 with a summary of key achievements including:

- Establishing a multi-agency Neglect working group coordinating the development of a CHSCB Neglect strategy and action plan.
- A number of learning events held in both the City and Hackney to share the key themes and learning from Child E.
- Neglect incorporated into single and multi-agency training programmes available to all practitioners.
- Homerton hospital updating their hospital policy when children are not brought to appointments.
- The CHSCB has undertaken audits focusing on Neglect to identify learning.
- Development of a multi-agency escalation policy
- Communications focussing on children being seen, heard and helped.

Priorities going forward:

- The CHSCB will agree and sign off the Neglect strategy and associated action plans for the City and Hackney in 2015/16.
- Monitoring of the implementation of relevant actions will continue by the CHSCB
- Further reassurance work will be undertaken to test the learning arising from the two case reviews and multi-agency audits regarding Neglect have been embedded across the safeguarding system.



The partnership response to Child Sexual Exploitation in the City of London is maturing and continues to be effectively co-ordinated through the CSE working group.

CHILD SEXUAL EXPLOITATION

Sexual exploitation is child abuse, with those children and young people who become involved facing significant risks to their physical, emotional and psychological health and wellbeing.



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

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

CSE also needs to be placed firmly in the context of abusive relationships and specifically; the impact that domestic violence can have on how a child or young person views relationships. For a child or young person growing up in such an environment, the impact of their experiences can create limited and limiting expectations with regards to what constitutes a healthy relationship; thus increasing their susceptibility to exploitation in the future.

During 2014/15, much has been done to further the collective understanding of CSE in the City and to prevent, identify and tackle the problem. Following thorough consideration

being given by partners to the lessons arising from the report into CSE by Professor Alexis Jay and its impact locally, the **CHSCB Child Sexual Exploitation Strategy** was finalised in February 2015.

The strategy sets out the CHSCB vision and principles and identifies five key strategic areas: knowing our problem, knowing our response; strong leadership; prevention and early intervention; protection and support; and disruption and prosecution. The strategy is accompanied by a detailed City specific action plan. At a strategic level, CSE is a standing item on the City of London Corporation Safeguarding Committee and forms part of the Town Clerk's supervision of the Independent Chair.

THE CITY OF LONDON CSE PROFILE

Although there are no known children who have been victims of CSE in the City, the City Children and Families Team completed a review of all open cases and identified 2 with associated vulnerabilities because they had gone missing in 2014/15. Both these cases have been discussed at the City Multi-Agency Exploitation Meeting (MASE) to ensure appropriate safeguards were in place for these two young people.

During 2014/15, the City of London Police also engaged with 5 young people who were not City residents, but who had been identified as being at risk of CSE through Police contact. Following securing their immediate protection, relevant and appropriate communication was made with the home authorities where the young people lived. There are no children involved in gangs in the City, or any known gangs within the City itself, although gangs are known to cross the boundaries and travel through the square mile.

Gang activity and risk to young people is closely monitored through the use of Police, Youth Service and Safer City Partnership data. Intelligence links with other LAs and the Police in these areas are being developed to ensure good co-ordination and sharing of information.



Partner agencies engaged in the City continue to share intelligence that may influence the knowledge of the CSE profile. Of significance is the City's location as a major transport hub and work is ongoing to engage British Transport Police, Transport for London and the Metropolitan Police to develop a strategy to identify and detect CSE occurring through major transport hubs in London.

The Police have invested in ensuring that they have an appropriate and skilled response to CSE crime: they have obtained the services of specialist legal advice to help in preparing CSE cases, all CSE related work is reviewed by the Evidence Review Officer to assess the quality of the evidence and maximise the chances of getting a conviction. The Vulnerable Victim Support Co-ordinator provides support to potential CSE victims going to trial.

MULTI-AGENCY SEXUAL EXPLOITATION MEETINGS

The City has a Multi-Agency Sexual Exploitation meeting (MASE), which meets to identify children who could be victims as well as suspected victims of CSE. The City MASE works preventatively in considering children who may be at risk of CSE but also considers all children who have gone missing in addition to others where low level vulnerabilities have been identified.

The City has intelligence sharing links with Hackney MASE and the Tower Hamlets MASE and is engaging in 2015/16 with the East London MASE chair's network. However, more developments are needed to ensure that the City has cross border links to intelligence sharing in other boroughs, and the Metropolitan Police, in view of the fact that the City of London Police is not automatically linked into all of the Met's intelligence sharing systems.

AWARENESS RAISING – OPERATION MAKESAFE

The City of London Police engaged alongside the Met Police in the launch of Operation Makesafe on 18 March 2015. This is a campaign led by the Met in partnership with London Boroughs and the City of London Police to raise awareness of CSE within the business community including hotels, cab companies and licensed premises. It aims to identify potential victims of CSE and, where necessary, deploy police officers to intervene before any harm occurs to the young person.

The City event raised awareness of CSE and the specifics regarding Operation Makesafe. Representatives attended from 7 City hotels and businesses and combined with representation from The City of London Children Services, Safer City Partnership, CHSCB and Hackney agencies, a total of 60 people were in attendance. There will be a launch of a Hotel Toolkit in 2015. To support the ongoing communication regarding CSE, provisional plans have also been developed by the CHSCB to launch a wider awareness



raising initiative in 2015/16 aimed at children, young people parents, carers and the wider community. This initiative, Say Something if You See Something, has engaged young people in the City via City Gateway.

AWARENESS RAISING – SCHOOLS

The City's primary school has engaged in the Drug Awareness Resistance Education (DARE) programme, which helps children and young people build skills such as self-confidence, resistance to peer pressure and knowledge of safe lifestyles. While it is not CSE specific, it delivers skills relevant to safeguarding against that risk. There is further work to ensure that the PSHE curriculum across City Schools addresses CSE systematically and ensuring that online safety is promoted.

AWARENESS RAISING – CITY GATEWAY

A girls' school attended by City of London children in a neighbouring borough was identified as at potential risk for CSE. In response City Gateway Youth Service provided a residential event for City young people to raise awareness and strengthen resilience targeting boys and girls from the Bangladeshi community who had a low level of relationship and sexual health awareness. City Gateway also include discussion around CSE and consent in their work programme around sex and relationships education.

Awareness Raising - The CHSCB Annual Conference – Supporting further awareness raising on CSE, the CHSCB agreed to theme its annual conference on CSE. Scheduled to be held in the Guildhall in the City of London, this conference will take place on 8 May 2015. A full evaluation will be set out in next year's report.

PROMOTING HEALTHY ATTITUDES TO RELATIONSHIPS – CITY GATEWAY

Key to tackling CSE is the need to build understanding and resilience in young people. Over 2014/15, City Gateway ran the following related activities as a result of needs identified through conversations with young people:

- 4 workshops focussed on relationships and self-image at a girls only (12 – 18 years) residential held in May 2014. The preparation for this included some sexual health support.
- As a result of the residential feedback, 4 photography/drama sessions at Artizan Arts sessions focussed on self-image and confidence in Sept/October 2014.
- The boys-only 'Man Up a Mountain' residential in October 2014: 8 boys attended and the sessions included positive conversations about relationships and gender.
- 2 sessions for a girls' network were held in March 2015 focussing on Domestic Violence and Domestic Abuse.

- Consultations with 4 young people (2 boys and 2 girls) at the City Youth Forum for the communications strategy of the MASE, which included discussion about sexual abuse.
- The Half term residential in April 2015 included a number of conversations regarding relationships and the role of women.
- The promotion of the Come Safely initiative which enables young people to access free contraceptives from a range of sources in the City and around London.

CSE PEER REVIEW

In October 2014 the London Safeguarding Children Board (LSCB) and Association of London Directors of Children's Services (ALDCS) requested that all London authorities complete a peer review of practice in relation to child sexual exploitation (CSE). The City of London and Camden were paired for this task.

The sessions helped the City and the CHSCB reflect on the strategic and operational response to CSE, drawing emphasis, amongst other aspects upon the following issues that feature in the City CSE action plan:

- Cross boundary issues including information sharing with neighbouring boroughs in respect of the movement of young people. While the City of London does not have any known local gang activity, community based intelligence suggests that there might be some gangs that come in and out of the City. Sharing intelligence with relevant local authorities will be key to adopting a successful regional approach to tackling CSE.
- Camden and City of London both have major transport hubs. The peer review noted the importance of engaging British Transport Police and Transport for London (TfL) in developing regional approaches to identifying vulnerable children in these locations.
- The night time economy for some London local authorities will present a unique set of challenges which will need to be addressed at a regional as well as local level. City of London and Camden both have significant night-time economies. Police intelligence is shared via the Police National Database and force intelligence bureau. The City police will share information with teams in other boroughs on a case specific basis.



The City is taking the initiative to improve its awareness and oversight of the safeguarding of children missing from home, care and education.

CHILDREN MISSING FROM HOME, CARE AND EDUCATION

Ensuring that partner agencies provide the most appropriate safeguarding response for children who go missing from home, care and education remains a priority for the CHSCB. In 2015, the London Safeguarding Children Board updated the London Child Protection Procedures and Guidance and agreed a protocol for children missing from care, home and education. According with statutory guidance, the City of London Corporation agreed to adopt the pan-London work as the basis for the local protocol that includes City specific guidance.

During 2014/15, the CHSCB Missing Children Working Group developed and implemented the missing children strategy and a City of London specific action plan. The strategy and action plan built upon existing progress focussing upon raising awareness and increasing accountability amongst partner agencies, prevention of missing episodes and reducing repeat missing episodes through collaborative multi-agency working. Within the City of London, there are effective multi-agency arrangements in place that provide a coordinated response when children go missing from home, care or education.

CHILDREN MISSING FROM HOME AND CARE

The City Police lead on all children who go missing from home or care and a coordinated response takes place with the City Children and Families team, working closely with the child's parents or carers. Numbers of children who go missing in the City of London are very low. There have been no children missing from home reported in the last 12 months and only 2 children who have gone missing from care in the previous 12 months.



A review of all looked after children took place at the end of December 2014 to screen them for risk of CSE. 2 children were identified who were considered vulnerable to CSE because they go missing. These were reviewed by the MASE and the vulnerability factors have been addressed in case planning and subsequent planning meetings.

NCH Action for Children is commissioned by the City of London to give missing children a return home interview within 72 hours. These interviews are followed up with therapeutic support depending on the outcome to address risk-taking behaviour. This is in line with statutory guidance published by the Department of Education in 2014. Return home interviews are reviewed and used by the City Executive Group to understand the reasons why children go missing and inform strategy and service delivery. An Annual Report on missing children is made to the CHSCB each year. However, although there are attempts to do it, the low numbers impede the meaningful identification of trends and patterns at this point.

CHILDREN MISSING FROM EDUCATION

There are no children reported as missing from education at present and there have not been any for five years. The City has a unique challenge in that the majority of its children are educated outside the local authority or in the private sector, which goes some way to explain this figure.

The Education and Early Years' Service reports on attendance for all City children attending primary schools in the City and Islington, making up over 90% of all children attending maintained education. Where there has been a concern of non-attendance, this has been picked up by the Education Welfare Officer for the City, either as a direct intervention in the case of a child attending Sir John Cass's Foundation Primary school, or liaising with the school and local authority if the child is not attending a City school. To date, no primary aged child has fallen below the 85% non-attendance rate, which would be the trigger for Troubled Families criteria, except in the very rare cases of ill health which have all been followed up.

However there are no secondary schools in the City and the majority of City-resident children attend a large number of schools outside the local authority. This impedes the City from being able to track and monitor children who are missing education. The number of



safeguarding or attendance referrals from these schools to the City is extremely low.

The local authority knows where most children are in the maintained sector through its secondary schools transfer system, but it is much harder for the City to monitor children who attend non-maintained schools, which is approximately 60% of the secondary school population and 50% of the primary school age population. This is because parents who elect to move into private secondary school provision either in the City or outside, or who leave the City of London to live in another area, do not usually inform the local authority and there is no system in place to track them.



To address the barriers created by resident children being schooled outside the City, the local authority is setting up a data sharing agreement with its neighbouring Boroughs to help it keep track of where resident children are being educated and also when they move school. In addition, the local authority is sending a letter to each school to ask them to monitor City children and notify the City of any attendance or safeguarding issues through the Educational Welfare officer. These two measures will help strengthen the links between the City and the schools where children are educated in the maintained sector.



The City is also asking all its independent schools through the School Safeguarding Forum to identify those children who are City resident and notify attendance issues and safeguarding concerns. Those children educated within the private sector are more difficult to identify but the local authority is exploring options within the sector to help it identify where its resident population are being educated. These steps are unusual for a local authority, but are necessary given the specific demography and characteristic of the secondary population in the City.

Priorities going forward:

- The CHSCB will continue to oversee performance and the actions required to support the CHSCB strategy on missing children.
- The CHSCB to better understand the reasons why children go missing through the intelligence gathered via the IRI role delivered by Action for Children
- A closer alignment of the work involving CSE and Missing children will occur, with the respective working groups and action plans coming together.
- Further scrutiny of the progress made regarding tracking children missing education.





Agencies in the City of London have improved their focus on FGM, its local relevance and how the partnership needs to respond.

FEMALE GENITAL MUTILATION

Agencies in the City of London have improved their focus on FGM, its local relevance and how the partnership needs to respond.

In April 2014, it became mandatory for NHS healthcare professionals to record Female Genital Mutilation (FGM) in a patient's healthcare record, if they identify that a woman or girl has had FGM. In September 2014, it also became mandatory for Acute Trusts to collate and submit basic anonymised details about the number of patients who have had FGM to the Department of Health. Changes to the Serious Crime Act mean that health care professionals, teachers and social care workers are required to report 'known' cases of FGM - visually confirmed or revealed by a girl (under the age of 18) affected - to the police. Working closely with Public Health, partner agencies and the Health and Wellbeing Board, the CHSCB will continue to influence and monitor the effectiveness of the partnership response to FGM.

Progress in 2014/15:

- A City of London needs assessment has been conducted outlining the likely scale of the issue in the City and the approach to addressing FGM.
- A FGM single point of contact (SPOC) in the Police Public Protection Unit has been established. The SPOC has been trained and works with the Met Police on operations at airports during summer holidays to identify those at risk.
- A Vulnerable Victims coordinator holds weekly outreach surgeries to enable the community to discuss FGM / raise awareness on this issue.
- The Vulnerable Victims coordinator and SPOC have delivered bespoke FGM training to a variety of frontline police officers and staff.
- A poster awareness raising campaign on FGM was initiated in early 2015, with visibility in the GP surgery and libraries.
- In February 2015, an FGM awareness day was held in the City to target business employees.

- Awareness / raising sessions are being held with foster carers and FGM is an active agenda item on the City of London Looked After and Care Leavers Improvement Group.

During 2014/15, the Independent Chair of the CHSCB hosted a number of meetings with the voluntary sector and survivors. Hearing the voices of survivors has significantly helped further the understanding about the needs of women and girls affected by FGM and this has assisted in developing the main themes of the FGM strategy. Reflecting the CHSCB's commitment to engage with our local communities, the Independent Chair also led the way in working in partnership with a group of survivors, voluntary sector organisations and a local Imam to produce a video aimed at increasing awareness of FGM.

The CHSCB's drive towards improving practice and sharing learning was also illustrated in the following:

- The CPA contributing towards the development of the Home Office FGM e-learning tool for professionals.
- The CPA being a member of the Home Office FGM Advisory Partnership Group playing a key role in helping to revise the multi-agency FGM statutory guidance which was published in June 2014.
- The International Development Secretary extending an invitation to the CPA to attend a multi-agency round table discussion on FGM to assist the Government in developing its policy in preparation for the Girls Summit.
- The Chief Social Worker in England engaging the CPA to provide advice on what is required by the social work profession to tackle the issue at a strategic and operational level.
- Requests from other local authorities for the CPA to present our approach to safeguarding girls and women at risk of FGM and providing training to the Metropolitan Police Project Azure (Police team specifically working on FGM), Hackney's Community Nursing Team and General Practitioners.



FGM IN THE CITY OF LONDON

- From the data available, it is clear that very few City resident women and girls are at risk of FGM.
- There are no high-risk communities living in the City of London.
- Latest census data (2011) identifies only 13 City resident women (age 16-74) were born in North Africa and 32 born in Central and Western Africa; parts of the world where FGM is most prevalent.
- There were no girls aged between 0-15 living in the City who were born in countries where FGM is prevalent (although girls of women who were born in FGM prevalent countries may also be at risk)
- 0 cases of FGM were referred to the City Children and Families Team in 2014/15
- There are no hospitals in the City of London, with City resident women giving birth in Hackney, Tower Hamlets and Islington. Building on the protocol already in place between the Homerton Hospital and Hackney CYPS, a similar multi-agency protocol will be developed in 2015/16 to ensure clarity of pathways between the City Children & Families Team, Homerton Hospital, University College London Hospital and Royal London.

HARMFUL PRACTICES

To assess the strength of multi-agency work in responding to forced marriages, so called “honour” based violence and abuse linked to faith and belief, the CHSCB undertook a Harmful Practices Health Check in 2014/15 engaging relevant statutory partners and voluntary sector agencies. The health check sought to establish assurance in regards to senior management commitment, roles and responsibilities, lines of accountability, the focus on victims, effectiveness of inter-agency working and information sharing, staff training and awareness raising. The analysis and actions arising from this work will be reported and taken forward in 2015/16.

Priorities going forward:

- To monitor the implementation of the FGM action plan in Hackney, holding agencies and the Hackney Health and Wellbeing Board to account for further driving the partnership response to this issue in terms of awareness, recognition and response.
- To analyse the outcomes from the Harmful Practices audit and implement any associated actions.





The CHSCB will increase its efforts to both work alongside and hold the CSP to account for its effectiveness in safeguarding children and young people at risk of radicalisation.

PREVENTING RADICALISATION

The CHSCB will increase its efforts to both work alongside and hold the SCP to account for its effectiveness in safeguarding children and young people at risk of radicalisation.

Radicalisation is driven by an ideology that sanctions the use of violence and encourages the rejection of a cohesive and integrated society. Often those who are most vulnerable are deliberately targeted through a narrative that makes this ideology seem as both attractive and compelling. The City of London has experienced first-hand the devastating effects of radicalisation in recent years. From the bombing of the London Underground at Aldgate in 2005, marches by the far-right organisations in 2014 and the recruitment of young people in 2015 from a neighbouring borough to join an international terrorist group. In order to protect our communities, partner agencies in the City must provide those at risk of radicalisation with the support and guidance needed to turn away from violence.

The Counter Terrorism and Security Act received Royal Assent on 12th February 2015. As part of this, the legal duty and statutory guidance expects Local Authorities to assess the threat of radicalisation in their areas and to take appropriate action. The City of London has not been identified as a Priority Area and as such, receives no additional Home Office funding to deliver its Prevent programme. The Safer City Partnership (SCP) retains overall governance of this agenda, which includes a focus on ensuring there are sufficient arrangements in place to safeguard children and young people. The CHSCB identified the threat of radicalisation as a priority area for its business planning going forward. The CHSCB will continue to monitor the progress of the SCP in responding to the threat of radicalisation through its forward planner in 2015/16. Progress and impact to date in the City, in addition to the range of scheduled work required is set out below. No child or young person resident in the City was identified at risk of radicalisation in 2014/15.

- The City of London Police produced a Counter Terrorism Profile highlighting risk and protective factors specific for the City of London.
- The Prevent Information Sharing Agreement has been refreshed.
- Pre-screening and Channel referral process has been developed and agreed.
- An initial Prevent delivery plan has been produced and works in line with the three objectives set out in the Prevent Strategy.
- Development of an effective communication for Prevent, including Channel referral pathway for distribution to staff within the City of London Corporation is underway.
- Develop post incident counter narrative communications as extremist groups use post incidents to recruit.
- City of London Prevent Strategy to be circulated for consultation.
- A Prevent working group continues to move forward on Prevent.
- Development of a Prevent delivery plan - monthly meeting with the Prevent and Safeguarding leads from Specified Authorities relevant to the City of London is being progressed. The aim is to include internal Safeguarding Champions and external Prevent leads and Safeguarding Champions from Health, Probation, Further and Higher Education.

Priorities going forward:

To monitor the implementation of the Prevent strategy and response to radicalisation in the City, holding agencies and the Safer City Partnership Board to account for further driving the response to this issue in terms of awareness, recognition and response.



The upward trend in referrals to the LADO over the last 5 years continues to reflect a system improving in its ability to identify and refer issues of concern.

LOCAL AUTHORITY DESIGNATED OFFICER

The upward trend in referrals to the City of London LADO over the last quarter of 2014/15 reflects improved awareness.

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

Reporting to the Assistant Director of People Services, the LADO role in the City is held by the Safeguarding and Quality Assurance Service Manager. These arrangements are fully compliant with the revised LADO guidance issued in Working Together 2015 and further supported by the publication of revised LADO operational guidance. A full analysis of how allegations against staff have been managed in the City during 2014/15 can be read in the LADO Annual Report 2014/15. LADO referrals in the City are dealt with in accordance to statutory guidance, in a timely way and have been effective in protecting children. One of the outcomes included referral to the DBS for barring in one case.

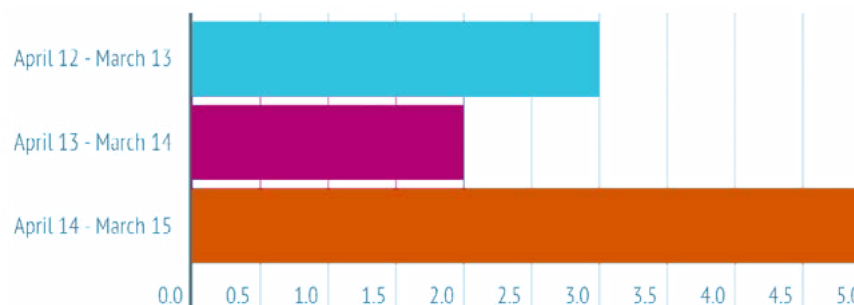
Overall numbers, however, remain lower than other LAs and statistical neighbours, although there has been a rise last year from 2 to 5 LADO referrals. The local authority has taken significant steps to raise the awareness of LADO processes and it is believed that this has helped raise the number of referrals, even though they remain low overall.

These steps include:

- Compliance audits were completed with agencies following the last inspection to ascertain whether people knew safer recruitment processes and when to refer to the LADO

- A specific review was commissioned by the City of London on the City of London School for Girls, the City of London School and the Guildhall School for Music and Drama. This encompassed safer recruitment, broader safeguarding, missing education and the LADO processes.
- The Guildhall schools received appropriate training to address safeguarding issues identified by the audit. The Education Forum provides updates in relation to guidance on working with children.
- All six private nurseries and the Children Centre attached to the one primary school in the City have been visited and taken up LADO training.
- 477 professionals were spoken to in the Notice the Signs campaign which promoted safeguarding and the work of the LADO.

LADO REFERRALS

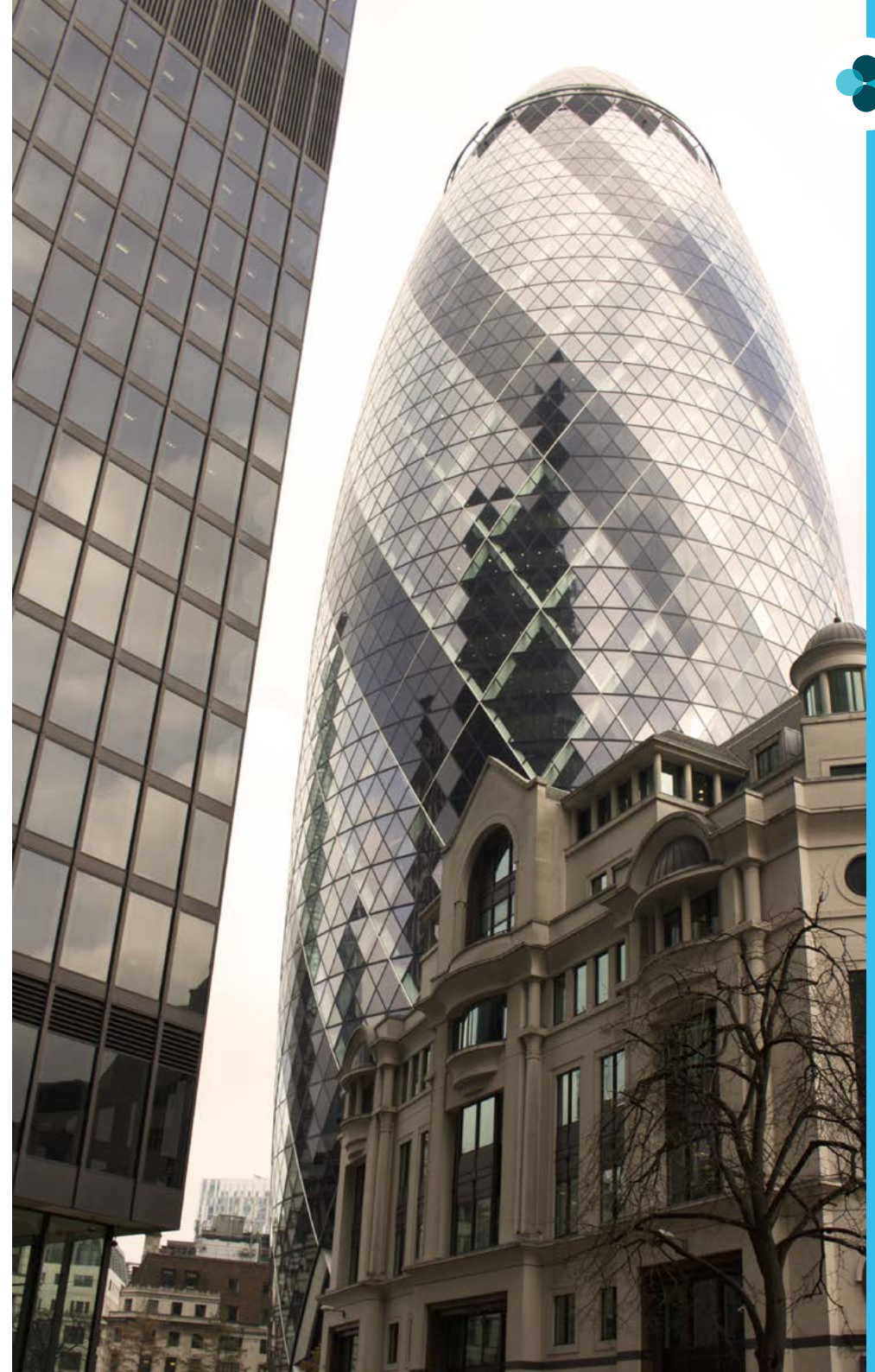


There were 2 referrals to the LADO concerning health staff in 2014-15 and 4 in 2013-14. This low level of reporting was identified during 2014/15 and following challenge at the Quality Assurance Sub Group, the CHSCB sought reassurance from the City & Hackney Clinical Commissioning Group (CCG) in relation to health awareness, referral numbers and the level of engagement of healthcare providers in the LADO process.

The Designated Nurse led on a piece of work that benchmarked the number of health referrals and these were found to be similar to comparator and pan-London levels. Further reassurance work was undertaken and established that all health care providers across the City of London and Hackney have relevant policies in place in relation to managing allegations against professionals. As part of reinforcing the responsibilities in this area, feedback was provided to the CCG Safeguarding Assurance Group and to all provider safeguarding committees in order to highlight responsibilities.

Priorities going forward:

- Continue awareness raising of LADO activity through multi-agency training, CHSCB communications and direct awareness raising by the named LADO.
- Specifically monitor number of referrals across transport, escort and taxi services in 2015-16 – consistent with the CHSCB CSE strategy and action plan.





Hackney Safeguarding Snapshot 2014/15



Hackney Safeguarding Snapshot 2014/15



44% of children living in poverty

Approximately 34% of children in receipt of free school meals (almost double the national average)



317 new early help cases of children identified and supported through the MAT process

271 new early help cases for children & young people over 6 years of age identified & services provided

41 children & young people at risk of CSE being monitored through the Multi-Agency Sexual Exploitation meetings (end March 2015)

174 children with a disability

36 children & young people missing from care for more than 24 hours on 120 occasions.

On 101 occasions, 53 children & young people reported missing from home for more than 24 hours



2.5% of children & young people in Secondary Schools, including Academies, were classed as persistently absent (>15% of sessions missed) (a reduction from 4.3% in 2012/13)

3551 referrals / 13.6% re-referrals

3534 assessments completed by Hackney Children's Social Care

53 days – average timeliness of assessments

694 child protection investigations

43% of schools graded outstanding

53% schools graded good by Ofsted for behaviour and safety



214 Children on a Child Protection Plan as of March 2015.

2287 open Children in Need cases as of March 2015

326 children & young people looked after as of March 2014

409 MARAC meetings involving children and young people living in families with domestic violence

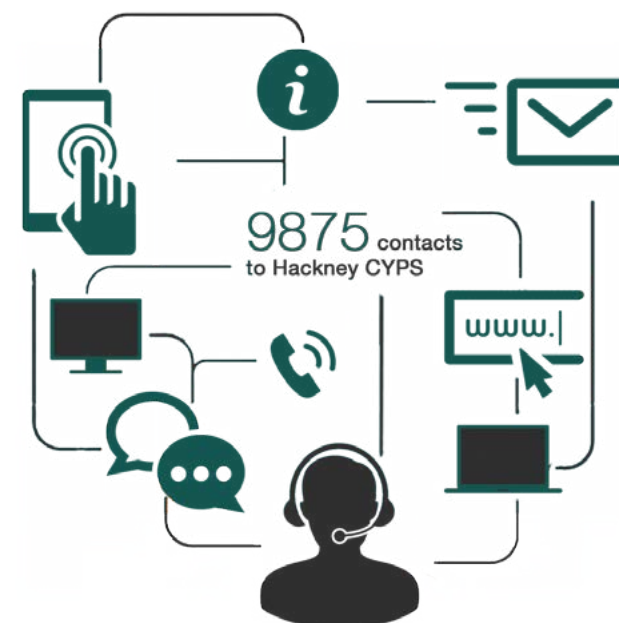
941 individual cases managed by Hackney Council's Domestic Violence and Abuse Team

160 allegations against staff working with children and young people

21 Private Fostering arrangements as of March 2015

700 children & young people receiving help from CAMHS at any given time

Approximately 1000 per year referrals to Child & Adolescent Mental Health Services





Safeguarding Context in Hackney



Some children are at more risk of being abused and/or neglected due to them being particularly vulnerable.

The categories and themes set out in this section do not cover all the factors influencing the risk to children and young people within the London Borough of Hackney. The focus is on key local vulnerabilities and related themes, about which the CHSCB needs to have heightened scrutiny in terms of effective multi-agency practice to protect children and young people.

HACKNEY DEMOGRAPHICS

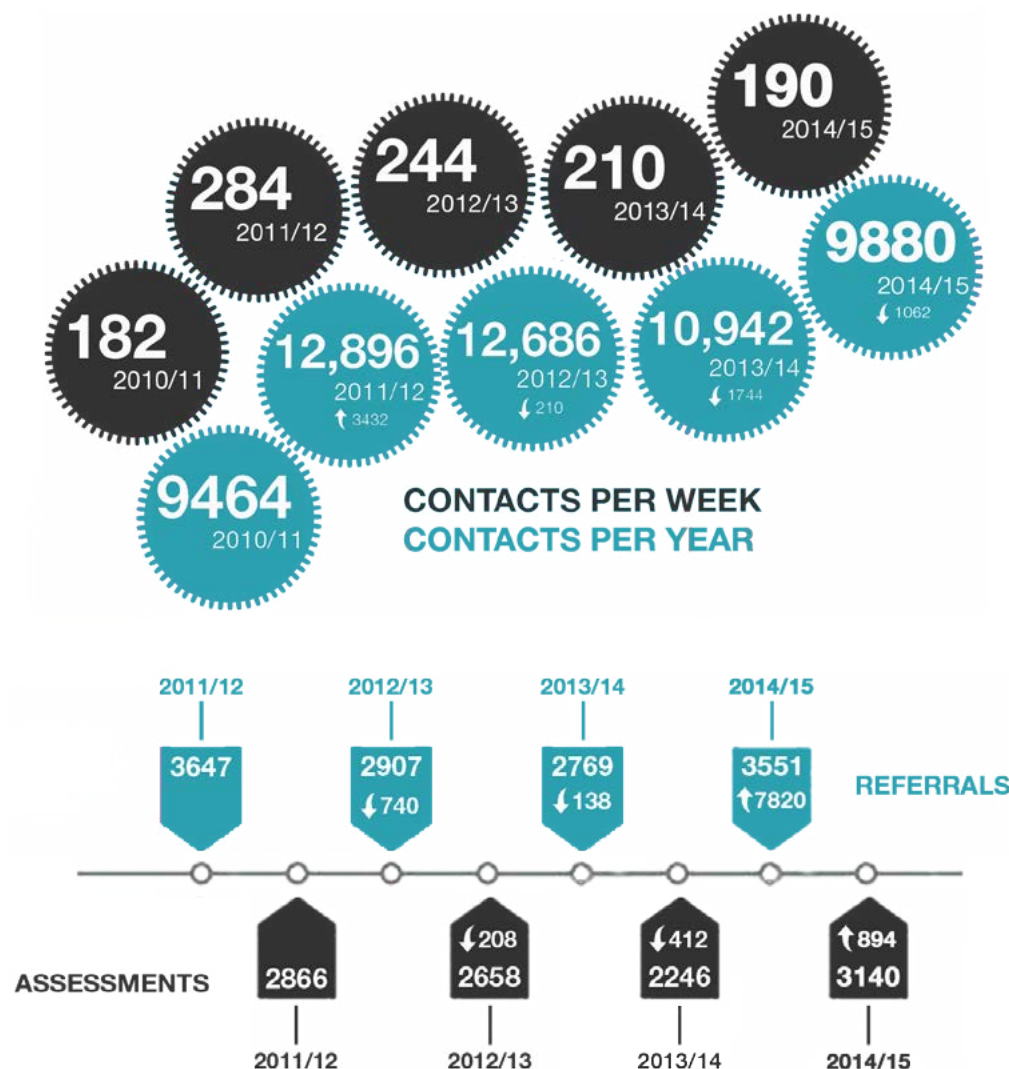
The London Borough of Hackney is an inner city London borough. There are approximately 62,000 children and young people under the age of 20 years, representing 25% of the total population. Of these, 19,000 are aged less than five years. Over 70% of children and young people aged 0-19 living in Hackney belong to black or other minority ethnic backgrounds.

It is a richly diverse community with significant numbers of Asian, Black African, Black Caribbean, Black British, Turkish, Kurdish and Charedi Jewish children. There are over 180 languages spoken in the borough. Hackney is ranked the second most deprived borough in England and it is estimated that 44% of children and young people in Hackney are living in poverty, with around 32% eligible for and in receipt of free school meals.

CONTACTS, REFERRALS & ASSESSMENTS

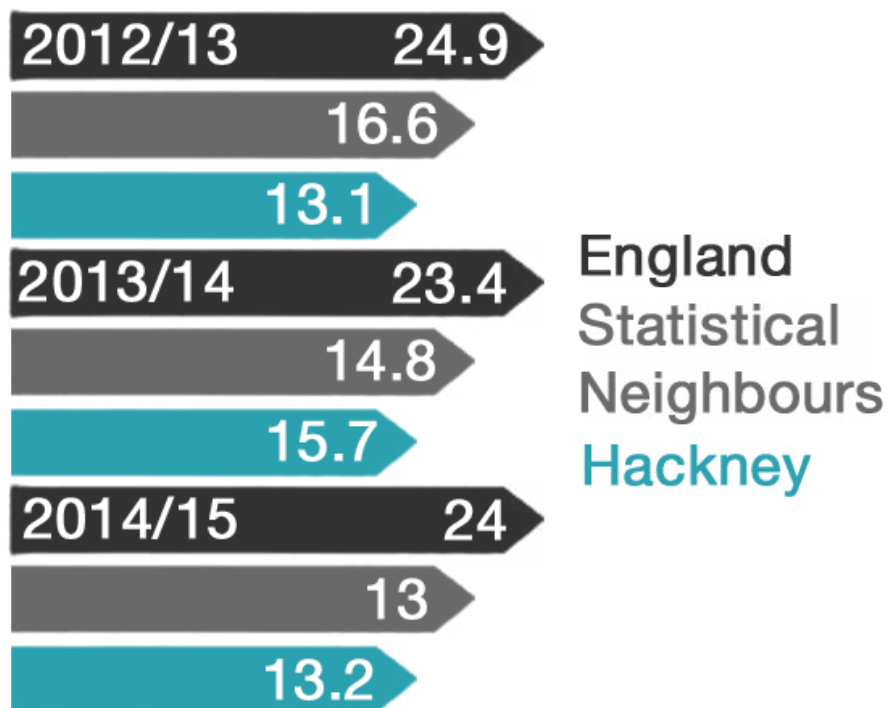
The First Access Screening Team (FAST) is a new multi-agency team that records all “contacts” made to them regarding concerns for children and young people. Any of these contacts can progress to a referral and if appropriate, an assessment, if the concerns suggest that the statutory involvement of Hackney Children’s Social Care (CSC) is required. If a statutory response by CSC is not required, the FAST ensures swift signposting and engagement as necessary with early help services.

In 2014/15, the FAST received an average of 190 contacts per week regarding a range of issues concerning the welfare of children and young people. This is a further reduction in average weekly contacts and is considered to reflect the good local knowledge of the [Hackney Child Wellbeing Framework](#). Awareness of the Hackney Child Wellbeing Framework continues to be promoted by the CHSCB and the FAST.



Whilst contacts decreased in 2014/15, referrals accepted by the FAST increased to 3551. The percentage of re-referrals, however, decreased to 13.2% and this rate remains significantly lower than the national average. **Hackney's lower than average repeat referral rate is considered by the CHSCB to be indicative of consistently high quality social work assessments and timely access to appropriate support.**

Percentage of re-referrals within 12 months of a previous referral:



Following contact, the FAST aims to ensure that only those children meeting thresholds for statutory assessments are progressed as referrals to CSC. Local Authorities undertake these assessments to determine what services to provide and what action to take. The full set of statutory assessments under the Children Act 1989 can be found [here](#).

Assessment activity correspondingly increased in line with the growth in referrals. The 3534 assessment completed in 2014/15 is the highest number since 2011/12. **The higher volume of children requiring statutory assessments is considered by the CHSCB to be partly attributable to improved information sharing in the FAST. This improved**

information sharing gives the FAST a swifter and more thorough overview of both current and historical risk factors at the point a decision is required about further action.

As part of the overall increase in assessments, the number of child protection enquiries also increased over 2014/15 from 405 in 2013/14 to 694 in 2014/15. The rate (115.7 per 10,000), similar to the statistical neighbour average in 2013/14, which also saw an increase to 149.8 per 10,000 over 2014/15. Given the variance over the last two years, this area will remain subject to on-going monitoring and analysis by the CHSCB.

Since 2011 there has been a steady increasing trend in the number of children and young people subject to a CPP in Hackney. As of March 2015, there were 214 CPPs, a slight reduction from 220 in March 2014. The rate of CPPs in Hackney on 31 March 2015 was 36.7 children per 10,000. This remains broadly in line with statistical neighbours and the national average (44.4 and 42.9 per 10,000 respectively).



*In 2013/14, the number of child protection enquiries in Hackney decreased from 994 in 2012/13 to 405. In 2014/15, the CHSCB sought further detail from Hackney CYPS about the rationale for this reduction, with the outcome of this additional scrutiny being reported to the full Board. The reduction was reported as being associated with social workers undertaking more visits to families prior to making the determination that a child protection enquiry was warranted. This had resulted in the reduction from the 2012/13 rate that was significantly higher than the statistical neighbour average at the time. **Hackney CYPS reassured the Board that children and families were being seen, the approach was in line with statutory guidance and there was no concern that children and young people were being exposed to harm as a result of this practice.***

In terms of timeliness, Hackney continues to exercise dispensation, agreed by the Department for Education, for statutory assessment timescales, which has enabled CSC to adopt a proportionate and flexible approach with families during assessment. The average length of assessment in 2014/15 was 53 days, which is a slight increase on the 50 day average recorded in 2013/14. **Hackney largely remains close to the 45 day national assessment timeframe, which now includes flexibility to extend with management agreement.**



In August 2014, Hackney CYPS took part in the Ofsted thematic review on the quality of assessments for children in need of help. The full report is available [here](#). Locally, the feedback was positive indicating that there were significant strengths in the quality of assessment activity in Hackney. One area for improvement

relating to recording practices had already been identified by Hackney CYPS and is being addressed through the implementation of the "Write it Right" programme for social care staff.

CHILDREN ON CHILD PROTECTION PLANS

Following a child protection enquiry, where concerns of significant harm are substantiated and the child is judged to be suffering, or likely to suffer, significant harm, social workers and their managers should convene an Initial Child Protection Conference (ICPC). An ICPC brings together family members (and children / young people where appropriate) with supporters, advocates and professionals to analyse information and plan how best to safeguard and promote the welfare of the child / young person. If the ICPC considers that the child / young person is at a continuing risk of significant harm, they will be made the subject of a Child Protection Plan (CPP).

Since 2011 there has been a steady increasing trend in the number of children and young people subject to a CPP in Hackney. As of March 2015, there were 214 CPPs, a slight reduction from 220 in March 2014. The rate of CPPs in Hackney on 31 March 2015 was 36.7 children per 10,000. This remains broadly in line with statistical neighbours and the national average.

Children subject to a Child Protection Plan (31st March 2015):



DURATION AND REPEAT CHILD PROTECTION PLANS

Monitoring of CPPs lasting two years or more is used to indicate the effectiveness of the CPP in eliminating or significantly reducing the risk of significant harm. The percentage of children subject to a CPP for more than 2 years has increased over the last year to 8% at 31 March 2015, from 2% during 2013/14. Related to this indicator is the number of children subject to a CPP for a second or subsequent time. This percentage decreased in 2014/15 to a rate of 11.4% in comparison to the national average that has steadily increased over the last three years. **The increase in CPPs over two years correlates**

with the reduction in repeat child protection plans seen this year. The assessment is that more children continue to receive multi-agency help and protection through a CPP for longer periods rather than being removed from a plan too early and then subsequently being placed back on one. A robust monitoring process has been developed by Hackney CYPS to quality assure planning in all cases.

CATEGORIES OF ABUSE

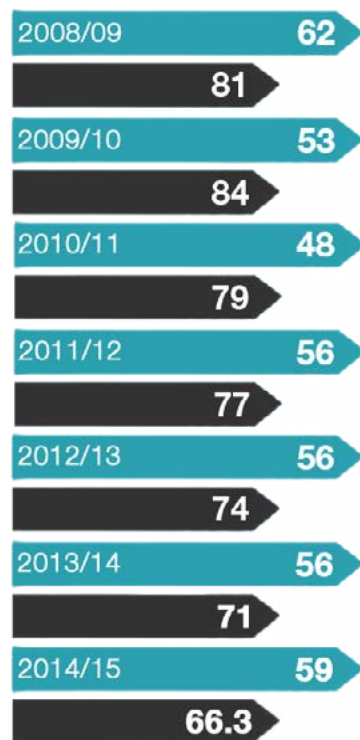
In 2013/14, Neglect accounted for 46% of all CPPs. This was not necessarily surprising given the local context of Hackney, with Neglect remaining a priority focus for the CHSCB. At the end of March 2015, however, Emotional Abuse exceeded Neglect as the highest category (47%). **This is likely to be attributable to a range of factors and will be subject to further monitoring and evaluation by the CHSCB in 2015/16.**



LOOKED AFTER CHILDREN

A child or young person who is “looked after” is in the care of the local authority. They can be placed in care voluntarily by parents struggling to cope, they can be unaccompanied asylum seeking children; or in other circumstances, Hackney CYPS and partners will intervene because the child or young person is at risk of significant harm. As at 31st March 2015, Hackney was responsible for looking after 343 children and young people. Whilst an increase of 28% compared to the same time in 2011 (270), Hackney continues to have lower numbers of children in care per 10,000 population under age 18 than statistical neighbours. **This rate remained consistent between 2012/13 and 2013/14 at 55 – 56, but has increased slightly to 59 per 10,000 children in 2014/15.**

Rate per 10,000 children shown below:



Hackney Statistical Neighbours

PLACEMENT TYPE & LOCATION

The vast majority of looked after children are in foster placements (78%). Hackney has a low number of children in residential placements (children's homes), with approximately

15 children living in residential placements at any one time in 2014/15. This is in line with the use of this type of placement in recent years. 2 young people with very complex needs were placed in secure accommodation for their own safety and to reduce the risk of them absconding.

Of the 343 children looked after by Hackney at March 2015, 66 (19%) were placed in Hackney. 266 (78%) of the total looked after children were placed in London local authorities (including Hackney, and neighbouring and non-neighbouring boroughs). 71 children (21%) were placed in neighbouring local authorities (Waltham Forest, Newham, Haringey, Islington, Tower Hamlets or City), and 206 (60%) were placed in non-neighbouring local authorities, classified as being ‘at a distance’. The majority of looked after children in placements classified as being ‘at a distance’ are placed in other London local authorities or local authorities adjoining London, such as Essex, Kent and Hertfordshire. These figures are consistent with other London boroughs.



When a decision is made by a Local Authority (LA) to place a looked after child outside of the LA area, high priority must be given to the child's needs. Over 2014/15, Hackney CYPS continued to lead work on supporting this group of looked after children across multi-agency partners and to resolve any common issues, for example around accessing mental health support for young people placed in other areas.

CHILDREN SUBJECT OF CARE PROCEEDINGS

The Government implemented the **Family Justice Review (FJR)** in an attempt to significantly reduce delay in care proceedings concerning children and young people considered to be at serious risk of significant harm. As a result of the FJR, the expectation is that all care proceedings should be completed within 26 weeks. In exceptional circumstances, cases can be extended for a further 8 weeks.

The duration of court proceedings in Hackney has improved over the year and averaged 31 weeks over the last two quarters of 2014/15. This is a significant decrease from 49 and 38 weeks respectively in quarter 1 and quarter 2 of 2014/15. **The Hackney average was below the London average for the last two quarters of the year, which were 35 and 34 weeks respectively.**

Data received from CAFCASS shows the number of court applications in Hackney has increased from 45 in 2013-14 to 52 in 2014-15. **Links between the London Family Justice Board and the CHSCB have been built into the forward planner for 2015/16 and the Board will provide an enhanced level of oversight on this area going forward.**



“[The social worker] showed great skill in working through a very sad and complex case, as well as great forbearance in... dealings with a difficult parent.” A statement made by a judge about a Hackney social worker.

DOMESTIC VIOLENCE AND ABUSE

Ensuring a co-ordinated and robust response to domestic violence and abuse is a priority for the CHSCB. A comprehensive review of the response to domestic violence and abuse was initiated in 2014 and its finding will report next year. Activity remained high over the year.

- The Domestic Violence and Abuse Team dealt with 941 cases, of which 406 involved children and young people.
- 422 cases were considered at the Multi-Agency Risk Assessment Conference (MARAC) (up from 308 in 2013/14)
- The Domestic Violence Intervention Project (DVIP) (co-located with Hackney CYPS) received 61 adult perpetrator referrals and completed 34 risk assessments.
- The DVIP provided 209 case consultations to social workers over the same period plus 6 days of training to staff.
- 40% of social work assessments featured aspects of domestic violence.

CHILDREN AND YOUNG PEOPLE AT RISK OF SEXUAL EXPLOITATION

Tackling Child Sexual Exploitation (CSE) in Hackney is a priority for the CHSCB. The multi-agency work to tackle CSE, co-ordinated by the CHSCB CSE working group, continued during 2014/15 with the range of achievements set out later in this report.

- 37 new cases (all female) were referred to the Hackney Multi-Agency Sexual Exploitation meeting (MASE).
- At the end of 2014/15, 137 young people in total had been considered at the MASE (96% female and 4% male).
- The Police successfully prosecuted 3 perpetrators, 8 Abduction Orders have been served and effective disruption techniques have been used in many more cases.

CHILDREN MISSING FROM HOME, CARE & EDUCATION

Children missing from home, care and education is a priority for the CHSCB. The partnership response has been steered through a multi-agency missing children working group and the development of a CHSCB strategy and Hackney specific action plan. Achievements made by partners in responding to missing children and young people are set out in more depth later in this report.

- 36 children and young people (24 female and 12 male) went missing from care for more than 24 hours on 120 occasions
- 53 young people (30 female and 23 male) were reported missing from home on 101 occasions for over 24 hours.
- In the 2014/15 academic year from September 2014 to June 2015, the Children Missing Education Team (CME) received 617 referrals.

ELECTIVE HOME EDUCATION

There are now 172 children registered as receiving elective home education compared with 57 in 2008/9 and an increase on the 146 children identified in 2013/15. A clear protocol exists between Hackney CSC and HLT to manage these arrangements. These arrangements remain subject to on-going scrutiny by the CHSCB.

BABIES

Research and experience tell us that very young babies are extremely vulnerable and that work carried out in the antenatal period to assess risk and plan intervention is essential to minimise future harm. At the Homerton University Hospital, weekly maternity psychosocial meetings continue to be held to oversee unborn (or very newly born) infants of vulnerable parents or parents to be. These multi-agency discussions act as a “safety net” to ensure that clear multi-agency plans are in place for babies and that these plans are understood and communicated to the relevant agencies.



582 cases were discussed at the Paediatric Psychosocial meetings in 2014/15, with 239 being referred to Hackney CYPS. The most common issues are similar to that of previous years - domestic violence, complex mental health issues and complex maternal substance and alcohol issues. Maternal learning disability was identified as a key theme in 2013/4 with this aspect also featuring in the learning arising from the one Serious Case Review commissioned by the CHSCB in 2014/15. Lessons from this SCR will be published in 2015/16.

PRIVATE FOSTERING

A child under the age of 16 (under 18, if disabled) who is cared for and provided with accommodation by someone other than a parent, person with parental responsibility or a close relative for 28 days or more is privately fostered. A full analysis of activity in Hackney over 2014/15 is available in the Private Fostering Annual Report 2014/15.

As at the end of March 2015 there were 21 children identified as being cared for in private fostering arrangements in Hackney. This is an increase from the figure of 16 private fostering arrangements in March 2014. Of these, 13 were new arrangements

that began in 2014/15. The majority of these children were born in the U.K. with this being consistent with the national picture. Most of the children in local private fostering arrangements were within the age range of 10-15. This profile is also reflected in the national data where 68% of children living in private fostering arrangements are of this age.

In terms of key performance measures, during 2014/15, 100% of initial visits were undertaken within the 7 day timescale against the national average of 75%, reflecting there being **no delay in responding to the initial assessment of possible new arrangements**. Of the 13 new cases in 2014/15, 12 (92%) were visited at intervals of not more than six weeks, which significantly exceeds the national average of 63%. This reflects **an appropriate visiting regime is in place to monitor the welfare of children and young people in private fostering arrangements**.



During 2014/15, the CHSCB revised and reissued a range of promotional material to ensure Private Fostering is kept high on the agenda of partner agencies in Hackney. New posters and leaflets on private fostering for professionals, parents and carers and young people have been updated and continue to be distributed on a regular basis to a wide range of relevant groups including schools, GPs, children's centres, faith groups, housing offices and libraries. Particular attention has been applied by the CPA engaging with specific communities and faith groups given historically low numbers of arrangements arising from these communities.

YOUNG CARERS

Young carers are children and young people under 18 who provide regular or on-going care and emotional support to a family member who is physically or mentally ill, disabled or misuses substances. A young carer becomes vulnerable when the level of care giving and responsibility to the person in need of care becomes excessive or inappropriate for that child, risking impacting on his or her emotional or physical well-being or educational achievement and life chances'.



The multi-agency Hackney Young Carers Steering Group continues to monitor and support the Hackney Young Carers Project. At the end of March 2015, Hackney Young Carers Project was working with 163 young carers (and increase from 138 in 2013/14) providing a variety of support services such as group work, homework club and one to one work with children in more complex situations. Positive activities and fun holiday sessions are well attended by the young people; there are support groups in two secondary schools in Hackney and a counsellor in three additional Hackney schools.



CHILDREN WITH DISABILITIES

The Disabled Children Service in Hackney is working with 174 children and young people. The Disabled Children Service manages low level safeguarding concerns although where there are increased concerns or it becomes evident that a parent is unable to safeguard their child from harm; Hackney CSC will investigate the concerns. The Disabled Children's Service remains involved throughout.



The emerging learning from a multi-agency case review (Child K) involves aspects of the partnership response to children with disabilities. This learning will be taken forward in 2015/16.

YOUTH OFFENDING

The young people who are involved with Youth Justice in Hackney often have complex needs requiring significant support both in and out of custody.

- Young Hackney has continued to see the number of young people they work with decrease from previous years.
- At the end of March 2015 the Youth Justice Service had worked with 227 young people through pre-court disposals (youth caution and youth conditional cautions) and community orders compared to 196 at the end of March 2014.
- The number of young people in custody on remand or sentence dropped from 58 in 2013/14 to 48 in 2014/15.



- The overall decline in numbers involved in formal youth justice is consistent with a national reduction in the number of young people formally entering the Criminal Justice System.
- For Hackney in 2014/15, 96 new entrants were recorded compared to 84 the previous year. Fines are now included in the counting rules for first time entrants which has contributed to the increase in number.

CHILDREN'S MENTAL HEALTH

The Child and Adolescent Mental Health Services (CAMHS) in City and Hackney are provided by Homerton University NHS Foundation Trust (First Steps and the CAMHS disability team, a joint service with the ELFT CAMHS); Clinicians employed by London Borough of Hackney's children's social care and the Specialist Service is provided by the East London NHS Foundation Trust (ELFT).



ELFT CAMHS provides the specialist (tier 3) community based service, the CAMHS provision within the Young Hackney Service and a service for adolescents with more complex mental health needs, for example, first onset psychosis and complex eating disorders. ELFT also provide the inpatient service (tier 4) and the out of hours service for City and Hackney.

The ELFT CAMH service receives approximately 1,000 referrals a year, and has a caseload of approximately 700 cases at any one time. The level of referrals to specialist CAMHS has been consistent for the last few years. Waiting times for young people to be seen by specialist CAMHS is within 5 weeks (100%). This is well below the national average and the other East London boroughs. Emergencies are seen within 24 hours and urgent appointments seen within 2 weeks. The number of young people presenting in A&E having self-harmed has reduced over the last few years but there has been an increase in the number of non-emergency self-harm referrals.

For 2014/15, the total number of young people admitted as inpatients to the local East London Tier 4 CAMHS unit was 24, a similar level to the previous two years. This group are supported by the Adolescent Team who provide an assertive outreach, home treatment model of intervention in order to prevent young people from being admitted to inpatient (Tier 4) services and provide the support for them to be treated at home.

MAPPA

Multi-Agency Public Protection Arrangements (MAPPA) are the statutory measures for managing sexual and violent offenders. The Police, Prison and Probation Services (Responsible Authority) have the duty and responsibility to ensure MAPPA are established in their area and for the assessment and management of risk of all identified MAPPA offenders. The purpose of MAPPA is to help reduce the re-offending behaviour of sexual and violent offenders in order to protect the public from serious harm, by ensuring all agencies work together effectively. MAPPA registered offenders make up 83% of the caseload of staff in the National Probation Service (including offenders on community orders, in custody and released on licence)

MAPPA statistics for 2014/15 identify there were 283 registered sexual offenders in Hackney out of a total of 6604 living in London. This is the joint 6th highest across other London boroughs where there numbers range between 108 – 368 offenders. 4 MAPPA meetings were held at Level 3 and 12 meetings at Level 2. The offenders involved were subsequently screened in and out of the process when actions completed and risk lowered. Of the 122 cases discussed at level 2, 2 were escalated to level 3 due to the risk the offender posed. Please see the Annual London MAPPA report 2014/2015, for the wider London picture.

ALCOHOL & SUBSTANCE MISUSE

Young Hackney provides specialist treatment for young people affected by substance misuse – either directly or because a family member is using drugs. The service also has a dedicated officer who provides support and interventions for young people in contact with youth justice.

- In 2013/14, 158 young people aged 13-19 years old were referred for drug treatment, of which 36 were for dealing offences. In both groups the majority of clients were male.
- In 2014/15, 296 assessments undertaken by CSC had alcohol as a factor. 316 assessments identified drugs as a factor.

Later in 2015, Hackney will launch an Integrated Substance Misuse Service to provide clinical treatment, psychosocial support and recovery options for adults with drug and alcohol problems. Hackney is also re-designing its young people's substance misuse service to respond to higher demand and the rapidly changing nature of the drug scene. The new service will be flexible and have a greater capacity to offer a range of treatment for children, young people and young adults up to the age of 25. Emphasis will be on Hackney's young people's drugs of choice – cannabis and alcohol – but flexible to respond to emerging trends.

MENTAL HEALTH

The City & Hackney **Public Health Annual report 2014/15** cites “The prevalence of Severe Mental Illness in Hackney and the City of London recorded on GP registers is 1.31 per cent, which is higher than that in comparable local authorities and significantly higher than the England average of 0.84 per cent.” Furthermore, in 2014/15, 695 statutory assessments undertaken by Hackney CYPS featured parental mental health as an issue.

These statistics reflect the ongoing importance of this issue to children and young people living in Hackney and the rationale behind the focus of partner agencies in developing a number of flagship projects to cater for mental health needs. In 2015, Hackney is launching the **City and Hackney Wellbeing Network**, which will bring voluntary organisations together to improve mental health and wellbeing. They will provide integrated support, signpost services and ensure that every person who needs help for a mental health problem is given a coordinated plan for their care. Practitioners in Hackney CYPS and the East London NHS Foundation Trust continue to work to the **Joint Mental Health Protocol** designed to support staff when assessing and supporting families where a parent or carer has a mental illness.





Progress in Hackney



Children and young people in Hackney continue to have access to and benefit from an extremely wide range of early help services that are sharply focused on meeting the diverse needs of local communities.

EARLY HELP

Early help services across Hackney are delivered by the Hackney Children and Young people's Services, Hackney Learning Trust and a range of partners, including 74 schools, a network of 21 children centres delivering a range of services and working closely with schools, GPs and health colleagues as well as other local service providers, including the community and voluntary sector. In 2013, the pilot joint inspection of multi-agency arrangements for the protection of children judged the overall effectiveness as outstanding. The inspection identified that "children supported through early help services have their needs identified in good quality action plans, which are implemented

effectively". Multi-agency early help was described overall as "making a distinct difference helping to build resilience in families, safely reducing risks for children and preventing children and young people entering the child protection system unnecessarily"

The framework supporting early help in Hackney has remained consistent since this inspection. The range of services available to children, young people and their families are set out within the Hackney Resource Guide and these continue to adapt and evolve based on the needs of the local population. The progress and impact of a range of local early help services are set out below:

THE FIRST ACCESS SCREENING TEAM (FAST)

In 2014/15, The First Response Team (FRT) and Partnership Triage in Hackney merged to become a single service - the First Access & Screening Team (FAST). This service acts as a single point of contact for referrals to Children's Social Care in Hackney and provides responsive screening activities including a 'go look' visit when necessary to better understand a child's situation. All contacts with FAST are immediately progressed as a referral to Children's Social Care if the threshold for a statutory assessment is met. Related signposting activity requires staff in FAST to have a continually updated knowledge of local services at their fingertips coupled with a sound understanding of the Hackney Child Wellbeing Framework.

The FAST ensures children are quickly allocated resources to meet their needs or safeguard their welfare, working to a principle of right service, first time. Like other Multi-Agency Safeguarding Hubs (MASH) across London, FAST works alongside co-located partners from Hackney CYPS, police, probation and health services to share information, jointly risk assess and promote access to services. This joined up approach enables proportionate and timely decisions about the type and level of services children





need and facilitates timely access to resources. The FAST development continues to be co-ordinated by a multi-agency steering group of key partners. Hackney's FAST also supports children and young people to access universal and targeted early help provision including support via the allocation mechanisms of the Children's Centre Multi-Agency Team (MAT) meetings and the Children and Young People's Partnership Panel (CYPPP).

CHILDREN'S CENTRE FAMILY SUPPORT AND MULTI-AGENCY TEAM (MAT) MEETINGS

MAT meetings have continued to occur fortnightly in each of the 6 strategic Children's Centres in Hackney. Chaired by a qualified social worker employed by Hackney Learning Trust, MAT meetings focus on children under 6 years of age and their families who require coordinated packages of early help support. MAT meetings are attended by a range of professionals including midwives, health visitors, Children's Centre family support teams, speech and language therapists and First Steps.

- 496 children were subject to a Common Assessment Framework (CAF) and MAT intervention in 2014/15 (317 new referrals and 179 existing cases).
- 336 of the 496 cases were closed following intervention.
- Cases were open for an average period of 7 months (199 days).
- 12% (63) cases were stepped down from social work intervention, of which 3% (2) were from out of borough social work teams.
- 10% (34 out of the 317 new MAT cases received in 2014/15) were re-referrals.
- Of these, 41% (14 out of 34) received social work intervention, 20% (7) received children's centre family practitioner intervention; and 26% (9) received health intervention.

A range of quality assurance activity continues to scrutinise the effectiveness of the MAT process and outcomes for children and young people. Of the 336 cases that closed during the year:

- 62% (212 children) closed with a lower risk assessment than the preliminary risk assessment rating.
- 21% (74) remained on the same risk code and
- 14% (50) escalated to a higher risk code than the preliminary risk code. Of the 14% (50) cases with a higher risk code, 88% (44) reached the level for statutory intervention.

focussed and requires services to consider what difference is required to create a positive outcome for the child, what that will look like and how agencies will know when and whether that outcome has been achieved. Cases of non-engagement and those unable to follow a plan were appropriately stepped back up for statutory intervention. Hackney Executive Member front-line visit

MULTI-AGENCY PANEL (MAP)

Schools coordinate interventions for children and young people through their individual multi-agency arrangements. As part of Hackney's Common Support Framework, Pupil Support Plans (PSPs) are used as CAF-compliant assessments.

THE CHILDREN & YOUNG PEOPLE'S PARTNERSHIP PANEL (CYPPP)

The CYPP has continued to meet weekly, borough-wide. The CYPPP focuses on the most complex and difficult cases where children and families require or are receiving coordinated packages of support. The CYPPP is attended by senior professionals from a range of different agencies. During 2014/15, 271 children and young people were referred to the CYPPP to determine the most appropriate, multi-agency support required to prevent the escalation of needs and/or risk. This is a reduction on the 342 children and young people number considered in 2013/14 with the rationale for this trend being reported to the full Board.

SOCIAL WORK IN SCHOOLS PROJECT (SWIS)

Hackney CYPS launched the Social Work in Schools Project in eight Hackney schools in November 2014 in order to provide effective intervention at the earliest stage of difficulties to prevent children from becoming subject to child protection processes or being at risk of becoming looked after. Senior social workers and designated school leads work together to identify those in need of early help and develop a co-ordinated effective approach to family intervention.

- At the end of March 2015, the project had worked with 93 children.
- Only 6 children have been transferred to a social work unit due to a significant deterioration of their circumstances.
- Provisional feedback from schools: rapid and responsive, supportive and informative / focused on family needs and family relationships / a chance to strengthen school/social work relationships / enabling of effective signposting by being community-based / an opportunity to develop and 'up-skill' school professionals.



This meeting and the MAT process operates well from a multi-agency perspective. All agencies were present and made valuable contributions. Decisions about risk and step up-step down were all multi-agency. The process is very outcome

FAMILY NURSE PARTNERSHIP

A Family Nurse Partnership (FNP) for City and Hackney was commissioned in November 2013 by LBH, on behalf of NHS England and began providing support to young first time mothers and their partners in Hackney in May 2014. The Family Nurse Partnership (FNP) service supports young families by providing them with one-to-one support and advice from pregnancy up until their child turns two. The programme is delivered by intensive and specially trained nurses, from a variety of backgrounds such as midwifery, health visiting and school nursing, who visit the family in their own home. The service, provided by Whittington Health, has a strong evidence base around improving a child's health and providing valuable support to parents. The nurses work together with families and cover areas such as preparing for their new baby, looking after baby, their health, relationships, education and other services available to them. The programme targets young families who most need the support. Women must be aged 19 and under, less than 28 weeks pregnant and live in Hackney or the City of London. It is a voluntary programme offered to young mothers having their first baby and there are currently 49 engaged and receiving help.



M was 18 when she was referred to FNP by her Public Health Midwife (PHMW). M is a care leaver and had spent some time abroad with her father, after difficulties in her relationship with her mother and had met the father of her baby there. He was older and the relationship involved a high level of domestic abuse. M returned to England in the early stages of pregnancy and was recruited to FNP at 25+ weeks gestation. At this time Hackney CYPS became involved to conduct an assessment on the unborn child for possible safeguarding issues. Concerns included M's level of vulnerability and the possible risks of bonding and attachment with the unborn baby.

The Family Nurse (FN) visited M at home, at children's centres and had a joint visit with the PHMW to ensure M felt supported. The FN wanted to focus on forging a therapeutic relationship to ensure M felt contained and safe. Due to the stage of M's pregnancy, the FNP programme was condensed to fit within the timeframe before delivery. The FN maintained emotional safety with M by implementing boundaries and encouraged M to discuss positive aspects of her relationship with her mother to utilise as building blocks for her own transition to parenthood. The FN was also able to liaise with the Social Worker (SW) and fed back progress. M was supported by the FN to prepare for meetings with health professionals. Following the birth, M requested the FN's attendance at a meeting with a paediatric consultant to discuss a plan of care for the baby's known health conditions. After birth, the FN maintained regular contact with M and supported her to draw upon friends and family for support, as well as providing materials and advice for parenting.

At several months post the baby's birth, M remains fully engaged with the FNP programme and has attended all health appointments. M is able to speak confidently on behalf of her baby and is providing a warm and loving environment. M's baby is not subject of any statutory intervention by Hackney CYPS and plans to attend college next year. M is also breastfeeding following advice and support from the FN.





THE PEMBURY CHILDREN'S COMMUNITY

The Pembury Children's Community is an ambitious 10 year programme led by **Peabody** and Hackney Council. It aims to significantly improve the life chances of families, children and young people living on and around the Pembury estate in Hackney. Peabody and the Council are developing an approach inspired by the **Harlem Children's Zone** in New York. In Harlem, they sought to create a 'pipeline' of services to ensure every child and young person has the opportunity to thrive and achieve success. Four local priority areas are emerging as a focus over the next 3 years: Early intervention and prevention with the youngest children / Enabling young people to thrive in their teenage years and beyond / Increasing support to parents / Reducing child poverty. Achievements to date include:

- **Early intervention and prevention with the youngest children** - Partnership between Peabody and Linden Children's Centre - sharing data about families not attending Linden CC to cross-promote services, co-ordinate work with vulnerable families / Pembury Pre School - providing 16 breakfast and after school club places and has increased its day time places from 23 to 39 in the last 9 months.
- **Enabling young people to thrive in their teenage years and beyond** - Pembury pass - a project for 'NEET' young people aged 16 to 24. 51 young people have received intensive one to one support / 18 completing work experience placements / 32 taking part in training programmes / 21 have progressing to apprenticeships, full and part time jobs, college or university courses.
- **Increasing support to parents** - Peer support for parents - a weekly 'coffee morning' attended by a diverse group of 14 parents has been developed. This is proving an invaluable way of helping to reduce isolation and slowly build the confidence of some parents.
- **Reducing child poverty** - 19 Pembury parents have completed ESOL assessments. 2 are already attending ESOL classes at Linden Children's Centre with literacy classes in the Pembury community hall attended by 6 parents. 1 parent has started a health and social care course.

THE PAUSE PROJECT

Every local authority area has a cohort of women who have numerous short interval pregnancies that result in the removal of their children into care through legal proceedings. This phenomenon is acknowledged but remains currently un-challenged on a wide scale. Pause aims to break this cycle by intervening at a point when the women have no children

in their care, creating a space in which women are supported to reflect and develop new skills and responses. **Pause** offers an intense programme of therapeutic, practical and behavioural support through an integrated model. Each woman has an individual programme designed around their needs looking at the various elements of their system. This innovative approach is early help at its farthest extreme. Originating in Hackney, Pause has now secured funds from the Department for Education's Innovation Fund to test Pause in six new local authorities, and extend the existing pilot in Hackney. The long term aim is to see Pause available to support women right across the UK. This first pilot in Hackney will continue until September 2015 when a further assessment of impact and outcomes will be made. Initial outcomes are set out below:

There have been no pregnancies in the 18 month pilot period	5 women supported to pursue volunteer work	8 women supported into literacy, numeracy and ICT assessments
10 women supported to secure stable housing	2 started part time work	4 women have re-engaged in letter box contact with existing children
7 women identified and supported into mental health services	3 received support to work on a CV	12 women have been given one-to-one support post-permanency
8 supported into the Domestic Violence Team	1 started a business plan with the Prince's Trust	

FAMILIES FIRST

Families First (FF) is an innovative Big Lottery funded project led by Hackney CVS, in partnership with the Claudia Jones Organisation, African Community School, Inspire! DayMer and Hackney Council. FF brings the voluntary sector together with 20 Hackney schools to provide joined-up support to families with multiple and complex problems.



In the first three years of the project, 2012 - 2015, Families First supported 343 families. Based on its success the programme has received extension funding until 2017. FF works mainly, but not exclusively, with Turkish, African Caribbean and Kurdish families who have been identified as having challenging needs, which do not yet require statutory intervention. The project supports children making the move from primary to secondary school; and offers intensive family support and coaching to help parent, child and school relationships.



TARGETED FAMILY SUPPORT & TROUBLED FAMILIES

On 1st April 2014 the Young Hackney Family Units and Troubled Families delivery lead transferred to Children's Social Care management arrangements. The Family Units deliver targeted family support to families in need of additional and/or intensive support to achieve their potential, including those identified as Troubled Families. In 2012, the Department for Communities and Local Government (DCLG) tasked Hackney with identifying and turning around 1000 families over a three year period referred to as Phase 1 of the Troubled Families Programme.



At Phase 1 Programme end on 31st May 2015, Hackney has identified 1,542 families meeting the Troubled Families criteria and achieved a 96.4% success rate.

As Hackney progress was late in the Phase 1 Programme there has been a short delay in starting the Expanded Troubled Families Programme, which rolled out nationally on 1st April 2015. In the expanded programme Hackney will be required to work with approximately 3,720 families (number to be confirmed) over 5 years meeting two of the

following six criteria, which include:

- Parents and children involved anti-social behaviour
- Adults out of work or at risk of financial exclusion or young people at risk of worklessness
- Children who are not attending school regularly
- Children who need help: children of all ages, who need help, are identified as in need or are subject to a Child Protection Plan
- Families affected by domestic violence and abuse
- Parents and children with a range of health problems

Priorities going forward:

- Early Help remains a priority for the CHSCB going forward into 2015/16. The CHSCB will continue to evaluate the effectiveness of early help services through the use of its Learning and Improvement Framework.





Children and young people who are exposed to domestic violence and abuse can grow up with additional vulnerabilities and/or harmful behaviours.

DOMESTIC VIOLENCE AND ABUSE

It is estimated that in the past year 7.1 per cent of women and 4.4 per cent of men have experienced intimate violence. Applying these figures to local populations would suggest that 6,400 women and 3,900 men in Hackney have experienced intimate violence in the past year. In Hackney, domestic violence and abuse accounts for one in five violent crimes, which is the second highest reported rate in London. Responding proactively and in collaboration with the Community Safety Partnership remains a key priority for the CHSCB, recognising both the short and long term impact on the safety and welfare of children and young people. The CHSCB is represented on Violence Against Women and Girls forum, which is comprised of statutory and voluntary sector organisations.

The partnership in Hackney has the ambition to move from a strategy based on tackling DV to one that aims at a wider approach responding to all forms of VAWG. This development follows national and regional policy and aims to embrace all forms of violence that are committed against women and girls as they have a number of commonalities and therefore suggest a linked approach. Progress and impact during 2014/15 has included the following:

HACKNEY DOMESTIC VIOLENCE AND ABUSE SERVICE

In December 2014, Hackney Council initiated a review of the provision of its Domestic Violence and Abuse Service, including those that interface with partners in responding to this issue. The review report is in draft format and will address key recommendations around the future strategic approach, moving from tackling DV to responding to all forms of violence against women and girls. The review also makes recommendations on future governance, membership, terms of reference, MARAC arrangements, domestic violence homicide review recommendations, team resourcing, case management and services for victims, as well as new performance indicators. The review is due to be published in late Summer 2015 and will be subject to scrutiny by the CHSCB.



HACKNEY BOROUGH POLICE

Her Majesty's Inspectorate of Constabulary (HMIC) undertook a national inspection of the police's response to domestic abuse in 2014. The report - "Everyone's Business: Improving the Response to Domestic Abuse" - highlighted a series of both national and local recommendations for each force to progress and publish as part of a Domestic Abuse Action Plan. The Met plan was published in September 2014 and is available [here](#).

HACKNEY DOMESTIC VIOLENCE AND ABUSE TEAM (DV&AT)

The DV&AT was originally set up to work with those at medium risk of harm and to provide a counselling service. They also provide a helpline. Nia provided the Independent Domestic Violence Advocates (IDVAs) to do the work with high risk victims. In the last few years the DV&AT has had to take on more and more high risk clients. Last year the DV&AT dealt with 941 cases, of which 406 involved children and young people. 60% of these were standard risk clients, 30% were assessed as being high risk. The strategic review will make recommendations relating to the DV&AT and IDVA capacity and will be taken forward in 2015/6 by the CSP.

MARAC

Operational improvements to the MARAC (multi-agency risk assessment case conference) process were implemented in 2013/14. The number of cases considered at MARAC has continued to increase and reflects a more robust response to providing multi-agency support to victims and children at risk of domestic violence and abuse.

Number of cases referred to Multi-Agency Risk Assessment Conference (MARAC):

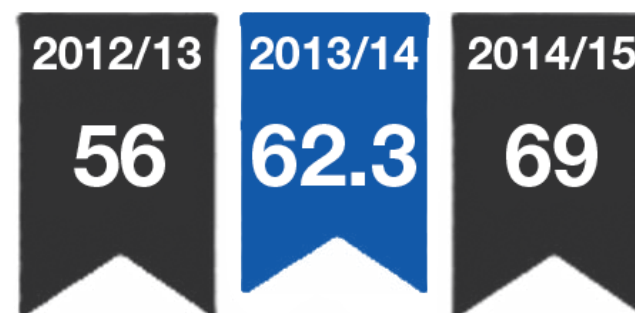


Further MARAC developments and strengths include the creation of a **Primary Care MARAC Liaison Service funded by the CCG** to support the link between the MARAC and GPs. The National Probation Service and the Community Rehabilitation Company (CRC) has demonstrated a clear commitment to the MARAC. The **CRC also has a staff member co-located with the police** to support perpetrator work and interventions.

THE SPECIALIST DOMESTIC VIOLENCE COURT (SDVC)

The SDVC is a joint initiative between Hackney Council and the London Borough of Tower Hamlets. A SDVC sits two days a week, with a specially trained judiciary and wrap-around support for victims/ witnesses. It is a partnership approach to domestic abuse by the police, prosecutors, court staff, probation, local authorities and specialist support services for victims. Agencies share information to identify and risk-assess cases, support victims and their families and bring offenders to justice. It has resulted in an increase in prosecutions and convictions, and victim satisfaction rates are also improving. Just over half of the cases going to the specialist court are Hackney cases.

% of successful domestic violence prosecutions for Hackney:



DOMESTIC VIOLENCE INTERVENTION PROJECT

To enhance the identification of risk factors associated with domestic violence, the Domestic Violence Intervention Project (DVIP) has been commissioned to work alongside Hackney Children & Young People's Services since March 2012. The Service uses a co-located approach to provide perpetrator and women's support services, together with consultation and training for practitioners. The DVIP sits alongside social work practitioners and contributes to the assessment of risk in families where domestic violence has been noted as a cause for concern. During 2014/15 the DVIP:

- received 61 adult perpetrator referrals and completed 34 risk assessments.
- engaged 21 men to undertake the perpetrator programme with a third completing the full 26 sessions of the programme.
- supported social workers to meet with perpetrators on 41 occasions
- engaged 22 women in group support and 23 women in one to one support, and
- provided 209 case consultations to social workers over the same period plus 6 days of training to staff.

Evaluation of the impact of the service evidences that social work staff have become more able to effectively and confidently engage perpetrators and support victims. Since working alongside DVIP practitioners, the skill and knowledge base of social workers undertaking statutory assessments in families where domestic violence is prevalent has been strengthened and this has helped to reduce the number of repeat domestic violence incidents in families. The co-location of the service has promoted timely decision making in respect of managing risk related to domestic violence and facilitated early access to support and preventative measures which contributes overall to the effectiveness of safety planning and positive outcomes for children living in those households.

IDENTIFICATION AND REFERRAL TO IMPROVE SAFETY (IRIS) PROGRAMME

The Identification and Referral to Improve Safety (IRIS) programme was established in 2007 in response to evidence indicating a high prevalence of domestic violence among women attending GP surgeries. The programme trains primary health care professionals to identify domestic violence and abuse and creates a mechanism so women can be referred to specialist domestic violence services. An evaluation reported that all women felt safer and 88 per cent had a greater awareness of their options following referral to IRIS. Hackney is the top performing area nationally in respect of IRIS. The CCG Designated Nurse is working with Public Health to develop a specific set of DV outcome measures for this project.

Since July 2014, all City and Hackney GPs have signed up to the service, which is delivered by Nia, a voluntary sector organisation. In 2014/15, GPs made 103 referrals. Fifteen of these cases were referred onto a MARAC to implement a risk focused, coordinated safety plan to support victims.

Priorities going forward:

- The CHSCB will monitor the actions arising from the review into Domestic Violence services and hold the CSP to account for their progress in respect of any actions relating to the safety and welfare of children and young people.
- Progress updates are scheduled into the CHSCB forward planner for 2015/16
- Learning arising from a joint Domestic Homicide Review / Serious Case Review will be communicated to the partnership and appropriate actions taken.





Neglect can be a catalyst to future vulnerabilities for young people.

NEGLECT

The impact of neglect on children and young people is enormous, yet it can be difficult to define and research shows that it often co-exists with other forms of abuse and adversity. It is also the most common reason for child protection plans in the UK. Neglect can be a catalyst to future vulnerabilities for young people, for some who have experienced Neglect there are additional risks of harm as they grow up.

The CHSCB identified neglect as an area of priority reflected through the initiation of two multi-agency case reviews, where chronic neglect had been the key issue. The learning from Child E is set out later in this report. The learning from Child K will be disseminated in 2015/16. Key themes include:

- that children should be **seen, heard and helped**, with the importance of conducting **home visits** and seeing children in different environments
- the need to identify and **name Neglect as a potential concern**
- when working across children and adult services remembering to **“Think Family”**
- the additional vulnerability of **children with disabilities**
- the duty to respond and **escalate concerns**.

The CHSCB partnership work in responding to Neglect is progressing into 2015/16 with a summary of key achievements to date including:

- Establishing a multi-agency Neglect working group coordinating the development of a CHSCB Neglect strategy and action plan.
- A number of learning events held in both the City and Hackney to share the key themes and learning from Child E.
- Neglect incorporated into single and multi-agency training programmes available to all practitioners.
- Partners supporting the development of a Neglect training package in partnership with Social Care Institute of Excellence (SCIE)
- Homerton hospital updating their hospital policy when children are not brought to appointments.

- The development of “go look” practice by Hackney CYPS to check out a child’s circumstances.
- Housing have joined the CHSCB and bespoke training dealing with safeguarding and Neglect being delivered to a range of staff
- The CHSCB has undertaken audits focusing on Neglect to identify learning.
- Development of a multi-agency escalation policy
- Communications focussing on children being seen, heard and helped.

Priorities going forward:

- The CHSCB will agree and sign off the Neglect strategy and associated action plans for the City and Hackney in 2015/16.
- Monitoring of the implementation of relevant actions will continue by the CHSCB
- Further reassurance work will be undertaken to test the learning arising from the two case reviews and multi-agency audits regarding Neglect have been embedded across the safeguarding system.





The partnership response to Child Sexual Exploitation in Hackney is robust and continues to be effectively co-ordinated through the CSE working group.

CHILD SEXUAL EXPLOITATION

Sexual exploitation is child abuse, with those children and young people who become involved facing significant risks to their physical, emotional and psychological health and wellbeing.

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

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

CSE also needs to be placed firmly in the context of abusive relationships and specifically; the impact that domestic violence can have on how a child or young person views relationships. For a child or young person growing up in such an environment, the impact of their experiences can create limited and limiting expectations with regards to what constitutes a healthy relationship; thus increasing their susceptibility to exploitation in the future.

During 2014/15, much has been done to further the collective understanding of the profile of CSE in Hackney and to prevent, identify and tackle the problem. Following thorough

consideration being given by partners to the lessons arising from the report into CSE by Professor Alexis Jay and its impact locally, the **CHSCB Child Sexual Exploitation Strategy** was finalised in February 2015. The strategy sets out the CHSCB vision and principles and identifies five key strategic areas: knowing our problem, knowing our response; strong leadership; prevention and early intervention; protection and support; and disruption and prosecution. The strategy is accompanied by a detailed Hackney specific action plan.



Demonstrating the strength of local leadership, the Mayor of Hackney and Chief Executive of Hackney Council convened a roundtable session with key leaders in 2014 to consider the progress being made in tackling CSE. This session was led by the Independent Chair of the CHSCB, setting out the local context and understanding of CSE; providing assurance to both senior leaders and politicians of the local grip being applied to the partnership response to this issue.

THE HACKNEY CSE PROFILE

There remains no single profile of CSE activity in Hackney. The data and information available continues to indicate that the most prevalent form of CSE taking place in Hackney involves the exploitation of young people (mostly young women) by male peers or those slightly older than them. This is consistent with the profile across much of London. There are also a number of young people experiencing or at risk of sexual exploitation by older males. Hackney's participation in the East London MASE Chairs' Forum and the appointment of a specialist CSE Data Analyst in 2015/16 will further strengthen the understanding of the CSE profile in Hackney and the cross border issues that impact on the tackling of this abuse. Using the local knowledge of the CSE profile, 2014/15 also saw agencies applying a greater focus on the young men who demonstrate harmful sexual behaviour in a peer-on-peer context. Many of these young men are known to CSC, Young Hackney or Youth Justice Services due to other concerns, offending behaviour or allegations of sexual violence.

In November 2014, Hackney CYPS led on convening a workshop to consider the response to the needs of young people who demonstrate HSB. Recognising the need to engage a wider range of partner agencies in thinking about HSB a multi-agency workshop has also subsequently been delivered. This workshop was attended by approximately 50 professionals including representatives from Children's Social Care, Young Hackney, Hackney Learning Trust, Public Health, Hackney Homes, Schools, Police, Safer Schools Officers, Health, Off Centre, Empower and The Nia Project.

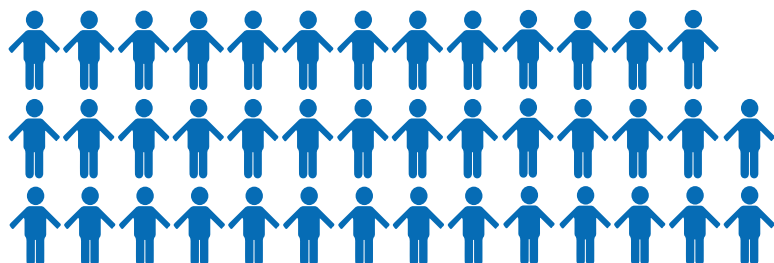


As a result of this partnership work, a multi-agency working group is to be established and an action plan focussing on HSB produced. This work-stream will report primarily to the CHSCB CSE Working Group but will also have a reporting line to the Safer Young Hackney Board. The HSB workshop identified the need to ensure young people can access safe spaces outside of the home and, that agencies work together to respond when specific locations are identified as being unsafe. It also identified the need for multi-agency training on recognising and challenging HSB and to ensure that professionals have a shared understanding of concerning behaviour and know when to make an onward referral.

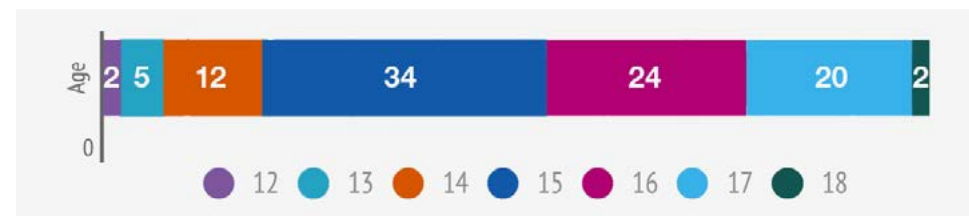
MULTI-AGENCY SEXUAL EXPLOITATION MEETINGS

Operationally, monthly Multi-Agency Sexual Exploitation (MASE) meetings have enabled partner agencies to strengthen their understanding of the extent and nature of CSE through sharing intelligence and identifying local themes and trends. Attendance at the MASE is good and reflects the strong and long-term commitment given by all agencies to tackling CSE. The work of Borough Police and specialist CSE Police has also strengthened with the Police referral pathway now firmly embedded. A CSE specific referral to the Police is completed for all cases where a young person is thought to be at risk of sexual exploitation and these cases are then flagged on the Police National Computer (PNC).

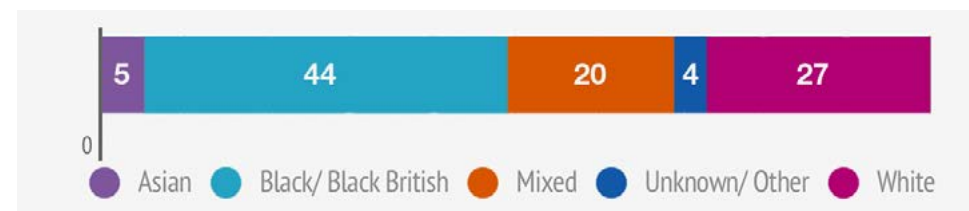
41 YOUNG PEOPLE WERE BEING CONSIDERED BY MASE AT THE END OF MARCH 2015



Age breakdown:



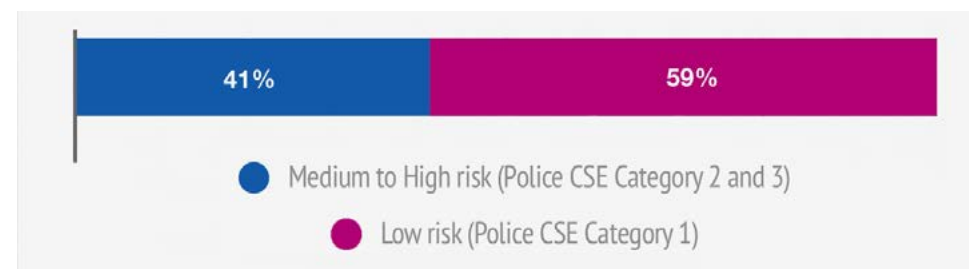
Ethnicity:



Status:*



Category of risk:



*A review of all looked after children who are known to the MASE found there was no evidence to suggest that young people are becoming vulnerable to CSE or specifically targeted by perpetrators as a result of coming into care.

SPECIALIST SUPPORT - EMPOWER - THE SAFER LONDON FOUNDATION

Commissioned by Hackney Council, The Safer London Foundation has continued to work closely with partner agencies; raising awareness of CSE and directly supporting young people experiencing or at risk of sexual violence and exploitation. A winner of the 2014/15 London Safeguarding Children Award, Empower is a multi-strand support programme that addresses young people's experiences of sexual violence and exploitation.

During 2014/15, it has provided a range of services in Hackney:

- Intensive 1:1 support offered to 42 young people experiencing or at risk of significant sexual violence and exploitation
- Advice and consultation services provided to practitioners on a further 73 cases of vulnerable young people
- 12 consultation surgeries
- 5 young women's group education programmes delivered to 40 young women
- 4 young men's group work education programmes delivered with 40 young men.
- 8 one-off awareness raising group sessions with 1440 young people
- Attendance and contribution at over 143 borough multi-agency meetings on both an operational and strategic level to support the identification and delivery of services to victims/survivors of child sexual exploitation
- Attendance and contribution at 42 MAP meetings to support identification, intervention and planning for victims / survivors of CSE
- Delivered 7 ½ day, 1 or 2 day presentations to over 109 professionals
- 10 awareness raising presentations delivered to a variety of multi-agency practitioners
- 6 workshops and training sessions delivered to 31 parents and foster carers

OUTCOMES 1:1 SESSIONS

- 100% initial engagement
- 83% engagement at 3 month point
- 100% found the Empower programme useful or very useful
- 82% have improved safety
- 88% have improved resilience skills
- 84.5% have an increased understanding of health relationships
- 78% improved engagement in EET
- 74% referred onwards to other services and activities
- 77% supported in relation to disclosures and safeguarding.



"The most important thing I learnt from empower is consent and what it means"



"it changed me from how I used to be and now I am much more positive"



"Made me a better person. I've stopped hanging around with the wrong crowd, Got all the support I needed and had someone there when I needed advice."

SPECIALIST SUPPORT – GIRLS PROGRAMME - CHANCE UK

Chance UK has worked with Hackney children since 1997. The borough has changed a great deal since then, with the support delivered by Chance UK developing alongside the changing needs of children and families. The Girls Programme is aimed at preventing the exploitation of girls in Hackney and Islington by identifying potentially vulnerable 5-11 year-old girls at primary school - and intervening to prevent difficulties in the future. In 2014, it was agreed by Chance UK to extend the pilot programme for a further two years.

During 2014/15, Chance UK worked with 10 girls and their parents/carers each year from Hackney. Some of the outcomes include:

- Positive behaviours being reinforced through 1:1 mentoring which focus on the girls strengths.
- Throughout the mentoring the girls voices are heard and they are an integral part of the decision making resulting in improved self-esteem.
- Post mentoring, schools identified increased protective factors in the girls e.g. improved peer skills, social relationships, conflict management and that they were able to use staff for support.
- Explorative work gave parents/carers the opportunity to see links between their childhood experiences and parenting. At the end of the year 100% of parents report improved relationships with their daughter.
- Increased parental knowledge of the risks associated with vulnerable girls and how to better safeguard them e.g. through raising esteem.
- The Parenting Programme is an integral feature of this service which 95%+ of our parents/carers accessed and engage with voluntarily.

AWARENESS RAISING - OPERATION MAKESAFE

The Metropolitan Police Service launched Operation Makesafe on 18 March 2015. This is a campaign led by the Met in partnership with London Boroughs and the City of London Police to raise awareness of CSE within the business community including



hotels, cab companies and licensed premises. It aims to identify potential victims of CSE and, where necessary, deploy police officers to intervene before any harm occurs to the young person. Hackney Police led on a week of activities, following this up with a further initiative in the Shoreditch Triangle with the City of London and Tower Hamlets. To support this campaign, Met Police call handlers received specialist training to identify calls relating to CSE and provide the appropriate advice and police response. During 2014/15, the campaign raised awareness of CSE at over 40 licensed premises and 55 hotels / minicab offices.

Other activities included visiting a range of internet cafes, youth clubs and maintaining a presence in known hotspots. To support the ongoing communication regarding CSE, provisional plans have been developed by the CHSCB to launch a wider awareness raising initiative in 2015/16 aimed at children, young people parents, carers and the wider community. Say Something if You See Something

AWARENESS RAISING - THE CHSCB CONFERENCE

Supporting further awareness raising on CSE, the CHSCB agreed to theme its annual conference on CSE. Scheduled to be held in the Guildhall in the City of London, this conference will take place on 8 May 2015. A full evaluation will be set out in next year's report.

AWARENESS RAISING - PUBLIC HEALTH INITIATIVES

CSE is a priority for Public Health with universal prevention, awareness raising and health and wellbeing promotion being the focus of key work undertaken during 2014/15.

- **Personal, Social Health and Economic Education (PSHE)** - A PSHE funding programme for secondary schools delivered in partnership with Hackney Learning Trust was implemented in 2014/15. Out of 18 eligible schools, 14 applied for the funding and all were successful in receiving their grant with conditions that the delivery of PSHE programmes (pupil workshops or training for staff) actively addressed CSE, mental health and sexually transmitted infections. Schools were further supported strategically through a termly PSHE leads network meeting, a termly newsletter and support around health and wellbeing policy development.
- **Sexual Health Services** - Public Health commissioning sexual health services delivered The City and Hackney Young People's Service (CHYPS) of Homerton Hospital. This holistic adolescent health service provides clinical and education outreach functions. All clinic staff are alert to CSE and outreach staff provide workshops in secondary schools as part of the wider prevention agenda.
- **Come Correct** - The City and Hackney C-Card condom distribution scheme is delivered by Brook, the leading national young people's sexual health charity, who are also commissioned to deliver training on CSE to professionals working with children and young people. Training is consistently oversubscribed. There is currently work underway to develop the adolescent health offer even further with a strengthened outreach offer and one that places greater emphasis on the priority of mental health.

AWARENESS RAISING - HEALTH

In 2014/15, the Paediatric Liaison Nurse and named doctor at Homerton University NHS Foundation trust began development of a safeguarding toolkit for staff with information on assessment, referrals and assessment tools the practitioners can use for their assessments. This will be launched in 2015/15.

CHSCB TRAINING ON CSE

During 2014/15, the CHSCB delivered 7 separate training sessions on CSE to 131 staff from across City and Hackney.

CSE PEER REVIEW

In October 2014 the London Safeguarding Children Board (LSCB) and Association of London Directors of Children's Services (ALDCS) requested that all London authorities complete a peer review of practice in relation to child sexual exploitation (CSE). The boroughs of Hackney, Newham and Barking and Dagenham met for the challenge meeting to consider self-assessment audits that had been completed, challenge points of practice, identify areas for development and draw together cross borough themes and good practice. The sessions helped Hackney reflect on the strategic and operational response



to CSE, drawing emphasis, amongst other aspects, on the need to progress the activities relating to harmful sexual behaviours and the importance of sharing of information across borough boundaries; building on the CSE Police team enabling police intelligence to be shared across East London boroughs and the East London MASE Chairs Forum being established.

CSE AND LICENSING

During 2014/15, Hackney Council initiated a review of its Licencing Policy setting out how Hackney Council and its statutory partners consider new applications and notices under the Licensing Act 2003. The CHSCB was engaged in this piece of work to ensure explicit recognition was given to safeguarding children and young people, with particular reference being made to how alcohol can be a factor in child sexual exploitation, where young people may be encouraged or coerced to drink or engage in risk taking behaviour. The protection of children from harm is a key objective of the policy; with a detailed checklist supporting the need for applicants / the Council to focus on CSE / domestic violence and abuse, missing children and radicalisation.

THE MSUNDERSTOOD PROJECT

The MsUnderstood Partnership was founded by Carlene Firmin in 2013 and brings together the University of Bedfordshire, Imkaan, and the Girls Against Gangs Project to improve responses to young people's experiences of gender inequality. In August 2013 the MsUnderstood Partnership opened an application process for local areas across England to bid for strategic and operational support to address peer-on-peer abuse.

Given the local CSE profile, Hackney and five other London Boroughs joined to form the North London Cluster and were successful in a bid for support from the MsUnderstood Project. The partnership is supporting these six sites across two phases. Phase one has involved an audit to identify strengths and areas for development of each site's response. Phase two comprises a support package building on the identified strengths. Drawing upon the audit reports produced for all six sites, including the nature of support for young people affected by peer-on-peer abuse and involvement in sexually problematic or harmful behaviour, a structured plan of support is being developed on an individual basis, in families, peer groups, schools, communities and public spaces.

Priorities going forward:

- In 2015/16, the CHSCB will continue to drive the CSE action plans and co-ordinate the partnership response to CSE through the CSE working group.
- The CSE profile to be strengthened through the appointment of a data analyst
- The CHSCB will launch the awareness raising campaign targeted at the community, parents, carers and children and young people.
- A closer alignment of the work involving CSE and Missing children will occur, with the respective working groups and action plans coming together.
- Further work will be progressed on how best to tackle harmful sexual behaviours.
- In the context of other types of exploitation, the partnership is seeking to raise further awareness over 2015/16 with a particular focus on how vulnerabilities can expose young people to a range of risks in terms of sexual exploitation, gangs.





There are effective multi-agency arrangements in place in Hackney that provide a coordinated response when children go missing from home, care or education.

CHILDREN MISSING FROM HOME, CARE AND EDUCATION

Ensuring that partner agencies provide the most appropriate safeguarding response for children who go missing from home, care and education remains a priority for the CHSCB. In 2015, the London Safeguarding Children Board updated the London Child Protection Procedures and Guidance and agreed a protocol for children missing from care, home and education. Hackney agencies agreed to adopt these procedures as the local protocol.

During 2014/15, the CHSCB Missing Children Working Group developed and implemented the missing children strategy and Hackney specific action plan. The strategy and action plan built upon existing progress focussing upon raising awareness and increasing accountability amongst partner agencies, prevention of missing episodes and reducing repeat missing episodes through collaborative multi-agency working. Within Hackney, there are robust tracking mechanisms in place, with the overall response to children missing from home, care and education involving coordination across partner agencies to ensure there is a robust notification process and response:

The Police lead on all children who go missing from home or care and a coordinated response takes place with CSC working closely with the child's parents or carers. For those young people who repeatedly go missing this co-ordinated response often involves a lead professional from education, Young Hackney, Youth Justice Service and the Integrated Gangs Unit. A Missing Children Lead Professional in Hackney CYPS reviews weekly the case files for every child who is missing for more than 24 hours to scrutinise the strategy to locate the young person and the plan for when they return. Fortnightly briefings are provided to the Assistant Director on children that are currently missing.



Dominant and reoccurring themes for young people who persistently go missing are offending behaviour, gang affiliation and being at risk of CSE. Of the 36 young people who went missing from care for more than 24 hours in 2014/15, 9 (25%) were assessed as being at risk of CSE and monitored at monthly MASE meetings.

The HLT Children Missing Education (CME) Team continues to ensure that ensures that Hackney Council is meeting its statutory responsibilities in regard to the identification, monitoring and tracking of children missing or not receiving a suitable education. This includes liaison with FAST when there are safeguarding concerns. The work of the CME team fits closely with other strands of work to support vulnerable pupils including supporting schools and families to prevent poor school attendance, truancy, exclusions and supporting schools and families to get children back to school once absence has occurred. The team liaises closely with HLT Education Attendance and Admissions services.

MISSING FROM CARE

- 36 children and young people (24 female and 12 male) went missing from care for more than 24 hours on 120 occasions
- 26 children/young people went missing from care for less than 24 hours on 248 occasions.
- The ages of young people who went missing from care for over 24 hours range between 12 and 17 years.
- The largest single age group of children that go missing was 16 years of age (31%), with 81% aged 15 – 17 years.
- Most children who went missing from care for more than 24 hours went missing for between 1 and 3 days (76 occasions or 63%) and on 26 occasions (22%) young people returned after one day.
- Of the 36 children/young people who went missing from care for more than 24 hours, 3 were placed in Hackney and 33 (92%) were placed outside of the borough.
- Of the 36 children missing for more than 24 hours, 12 went missing from Independent Foster Agency Placements, 11 went missing from semi-independent placements, 6 went missing from children's homes, 2 went missing from a placement with a relative of friend and 5 from Hackney foster care.



MISSING FROM HOME

- 53 young people (30 female and 23 male) were reported missing from home on 101 occasions for over 24 hours.
- 82 young people were reported as missing from home on 149 occasions for less than 24 hours between.
- The ages of young people who went missing from home for over 24 hours range between 12 and 17 years.
- The largest age group of children that go missing from home is 14 years of age (30%)
- Most children who went missing from home for more than 24 hours went missing for between 4 days and 1 month (57 occasions or 56%. On 38 occasions (38%) the young person was missing for 1-3 days and on 6 occasions (6%) the young person was missing for more than one month.
- On 2 occasions young children were reported missing with their mothers (one aged 1 and one aged 2).

MISSING FROM EDUCATION

- Whilst robust referral and tracking procedures are in place, children continue to leave the borough without a known destination. The majority of these cases are tracked and traced by the Children Missing Education Team (CME) of Hackney Learning Trust within a 6 week period.
- In the 2014/15 academic year from September 2014 to June 2015, the CME Team had received 617 referrals.
- The majority of pupils referred to the CME service either moved out of the borough or remained resident in the borough but transferred to an out of borough school:
- Hackney School 89 / Out of Borough School 147 / Out of Borough Destination Known 265 / Other 33 / Open 83

INDEPENDENT RETURN INTERVIEWER (IRI)

In February 2015, an Independent Return Interviewer (IRI) was appointed in Hackney to conduct independent return interviews with children who have recently returned after being missing from home or care. This is in line with statutory guidance published by the Department of Education in 2014. Children who go missing from home or care are offered an independent return home interview within 72 hours of returning from a missing episode. The IRI receives referrals from FAST and CSC social work units and ensures a collaborative approach to return interviews whilst maintaining independence from the case holding units. The IRI assesses the vulnerability of young people who return from missing episodes, including consideration of whether they may be at risk of child

sexual exploitation, gang affiliation or other vulnerabilities associated with patterns of going missing. The Independent Return Interviewer is a qualified social worker based at Hackney Learning Trust (HLT) alongside the Missing Education Officer. The role is independent of the CSC case planning function. The IRI also provides case consultations to colleagues in CYPS where requested. Early indicators suggest independent return interviews are of benefit to children, parents and professionals in the following ways:

- For children who have previously been hard to engage with services, the interview can provide a 'supporting bridge' into voluntary engagement with services such as Empower, CAMHS or Young Hackney.
- Demonstrating to children and parents that going missing is dangerous and needs to be taken seriously. This is particularly important where going missing has become 'normal' or where parents are struggling to maintain their authority.
- Providing children with a space to reflect on what is often a range of complex unmet needs, wishes and feelings. Children gain greater understanding about what they were expressing through going missing and are encouraged to think about safer solutions making them less likely to 'act out' their problems through going missing in future.
- Providing brief restorative mediation between parents/teachers/other professionals and children so that all feel they understand each other's perspective.
- Offering a safe space for young people to talk about situations where they feel unsafe or unhappy so that appropriate safeguarding referrals can be made via FAST.
- Providing parents with a containing and supportive space at what is often a time of great distress so they feel more equipped and confident to prevent further missing episodes.
- Offering an effective process for joint working with professionals already involved with a child who goes missing. Some professionals have described feeling more empowered to talk to the child about their reasons for going missing following the interview process.

Priorities going forward:

- The CHSCB will continue to oversee performance and the actions required to support the CHSCB strategy on missing children.
- The CHSCB to better understand the reasons why children go missing through the intelligence gathered via the IRI role.
- A closer alignment of the work involving CSE and Missing children will occur, with the respective working groups and action plans coming together.



Agencies in Hackney have accelerated their work on FGM. There have been many achievements over the year and progress remains strong.

FEMALE GENITAL MUTILATION

In April 2014, it became mandatory for NHS healthcare professionals to record Female Genital Mutilation (FGM) in a patient's healthcare record, if they identify that a woman or girl has had FGM. In September 2014, it also became mandatory for Acute Trusts to collate and submit basic anonymised details about the number of patients who have had FGM to the Department of Health. Changes to the Serious Crime Act mean that health care professionals, teachers and social care workers are required to report 'known' cases of FGM - visually confirmed or revealed by a girl (under the age of 18) affected - to the police.. Working closely with Public Health, partner agencies and the Health and Wellbeing Board, the CHSCB will continue to influence and monitor the effectiveness of the partnership response to FGM.



PROGRESS IN 2014/15

- Ongoing coordination through a multi-agency FGM steering group
- Ongoing use by staff of the FGM protocol between Homerton University Hospital and Hackney CYPS.
- Information of FGM has been included in Hackney's Sex and relationship Education support documentation.
- Piloted a whole school approach to FGM in two primary schools through the Christopher Winter project
- Engagement with anti-FGM campaigners (Daughters of Eve, Family Action and the Hawa Trust) to understand their perspectives on what actions are needed to prevent FGM.
- IT systems in Health and Hackney CYPS have been updated to record all cases of FGM
- Funding has been provided to local voluntary community organisations working to tackle this issue.
- A community conference on FGM attended by 40 people.
- Homerton Hospital University NHST Trust has developed a specific FGM policy
- A survey has been administered to the community to gather their views on the types of support needed.
- Hackney Council's Children and Young People's Scrutiny Commission conducted an investigation to test and explore the multi-agency response to FGM.
- The development of a three-year FGM strategy and action plan focusing on prevention & early intervention; strong & effective leadership and; effective protection and the provision of support.

During 2014/15, the Independent Chair of the CHSCB hosted a number of meetings with the voluntary sector and survivors. Hearing the voices of survivors has significantly helped further the understanding about the needs of women and girls affected by FGM and this has assisted in developing the main themes of the FGM strategy. Reflecting the CHSCB's commitment to engage with our local communities, the Independent Chair also led the

way in working in partnership with a group of survivors, voluntary sector organisations and a local Imam to produce a video aimed at increasing awareness of FGM. The CHSCB's drive towards improving practice and sharing learning was also illustrated in the following: The CPA contributing towards the development of the Home Office FGM e-learning tool for professionals arranging for a group of local social workers to be the first to trial the tool.

- The CPA being a member of the Home Office FGM Advisory Partnership Group playing a key role in helping to revise the multi-agency FGM statutory guidance which was published in June 2014.
- The International Development Secretary extending an invitation to the CPA to attend a multi-agency round table discussion on FGM to assist the Government in developing its policy in preparation for the Girls Summit.
- The Chief Social Worker in England engaging the CPA to provide advice on what is required by the social work profession to tackle the issue at a strategic and operational level.
- Requests from other local authorities for the CPA to present our approach to safeguarding girls and women at risk of FGM and providing training to the Metropolitan Police Project Azure (Police team specifically working on FGM), Hackney's Community Nursing Team and General Practitioners.
- The CPA delivering bespoke FGM training to 3 primary, 3 secondary schools and 7 children centres. As a result of this work, the CPA developed an addendum FGM safeguarding policy for schools.

FGM IN HACKNEY

- A statistical study by FORWARD was conducted in 2007 using the 2001 census data. This estimated that 921 women with FGM had given birth in Hackney between 2001- 2004.
- All women using Homerton Hospital antenatal services were routinely asked if they have been "cut" before mandatory recording came into effect in 2014.
- The Homerton has approximately 6,000 births a year
- 245 women disclosed a history of FGM, at booking for maternity care between January 1st 2008 to 31st December 2013.
- Of the countries where FGM is practiced, only 6 countries are covered by the school census. The number of girls whose parents were recorded as being from a practising country was recorded as 3019 in 2013 and 3028 in 2014.
- 60 cases of FGM were referred to Children Social Care from June 2014 to March 2015. FGM had not been performed on any of the girls referred.



HARMFUL PRACTICES

To assess the strength of multi-agency work in responding to forced marriages, so called "honour" based violence and abuse linked to faith and belief, the CHSCB undertook a Harmful Practices Health Check in 2014/15 engaging relevant statutory partners and voluntary sector agencies. The health check sought to establish assurance in regards to senior management commitment, roles and responsibilities, lines of accountability, the focus on victims, effectiveness of inter-agency working and information sharing, staff training and awareness raising.

Priorities going forward:

- To monitor the implementation of the FGM action plan in Hackney, holding agencies and the Hackney Health and Wellbeing Board to account for further driving the partnership response to this issue in terms of awareness, recognition and response.
- To analyse the outcomes from the Harmful Practices audit and implement any associated actions.



The CHSCB will increase its efforts to both work alongside and hold the CSP to account for its effectiveness in safeguarding children and young people at risk of radicalisation.

PREVENTING RADICALISATION

The Counter Terrorism and Security Act received Royal Assent on 12th February 2015. As part of this, the legal duty and statutory guidance expects Local Authorities to assess the threat of radicalisation in their areas and to take appropriate action. Hackney has been identified as a Priority Area and receives Home Office funding to deliver its Prevent programme. The Community Safety Partnership (CSP) retains overall governance of this agenda, which includes a focus on ensuring there are sufficient arrangements in place to safeguard children and young people. The CHSCB is represented on the Prevent Partnership Group, which is comprised of key community and statutory services.

A national focus to stop young people from travelling to Syria has led to the focus on raising awareness among Hackney's young people about the increase in radical views and to develop their critical thinking and confidence to challenge such views either within the curriculum or within a facilitated space to hold such discussions. A successful bid to the Home Office funds the delivery of three projects that sit comfortably with broader efforts to empower young people to feel "permitted" to have discussions around extremism and to develop their critical thinking skills relevant to the digital age they inhabit. In 2014/15, the CHSCB identified the threat of radicalisation as a priority area for its business planning going forward. The CHSCB will continue to monitor the progress of the CSP in responding to the threat of radicalisation through its forward planner in 2015/16. Progress and impact to date in Hackney, in addition to the range of scheduled work required is set out below.

WITH A FOCUS ON SAFEGUARDING CHILDREN AND YOUNG PEOPLE, ACHIEVEMENTS TO DATE INCLUDE:

- The Prevent Coordinator's use of the Hackney Learning Trust (HLT) Bulletin to schools to send Prevent and Department of Education related guidance.

- The Prevent Coordinator and Police engagement officer presenting to the HLT Designated Safeguarding Leads Forum in March 2015.
- The Prevent Coordinator working with HLT delivering Prevent awareness to the HLT Wider Management Group
- Schools have been provided with a risk assessment template to assist embedding Prevent Safeguarding
- A Prevent project delivered at B-Six College, to increase resilience amongst vulnerable groups is being rolled out for delivery by other educational settings and community organisations.

PLANNED WORK ACTIVITIES INCLUDE:

- Working with HLT for the development of a dedicated Prevent web page and resource guide for schools and settings (sharing all relevant guidance, practical advice and good practice)
- Working with service managers to ensure Prevent is included in all Safeguarding training provided to front facing staff – through Prevent raising awareness training
- Use of Home Office funding to appoint a dedicated Hackney Prevent Education Officer to deliver a suite of resource to schools and staff designed to safeguard young people from potential harmful or extremist views – in particular extremist views presented through the internet and social networking sites.

Priorities going forward:

To monitor the implementation of the Prevent strategy and response to radicalisation in Hackney, holding agencies and the Hackney Community Safety Partnership Board to account for further driving the response to this issue in terms of awareness, recognition and response.



The upward trend in referrals to the LADO over the last 5 years continues to reflect a system improving in its ability to identify and refer issues of concern.

LOCAL AUTHORITY DESIGNATED OFFICER

All LSCBs have responsibility for ensuring that there are effective procedures in place for investigating allegations against people who work with children. The Local Authority Designated Officer (LADO) should be informed of all such allegations and provide advice and guidance to ensure individual cases are resolved as quickly as possible. In January 2015, the governance of the LADO post moved under the management of the Safeguarding and Learning Service within Hackney CYPS. The operational decision to change the LADO arrangements coincided with the launch of a Government consultation on Working Together to Safeguard Children 2013. This consultation included proposed changes to the guidance involving the management of allegations against those who work with children. The new arrangements are fully compliant with the revised guidance and supported by the publication of revised LADO operational guidance for staff in Hackney. A full analysis can be read in the Hackney LADO Annual report 2014/15

- 160 referrals were made to the LADO in 2014/15. This is a 24% increase from 2013/14, a 62% increase from 2012/13 (129 referrals) and a 103% increase from 2010/11 (99 referrals). This increase is likely to relate to a better understanding as to what is required in respect of reporting.
- During 2014/15, 72 allegations were made against teachers and teaching staff. This group continues to reflect the highest number of referrals to the LADO. This reflects a sustained and improving level of awareness across the school community regarding their responsibilities in this area.
- The number of allegations made against early years' workers has also continued to increase year on year. 41 referrals were made in reference to early years staff and childminders in 2014/15. This increase reflects a sustained and improving level of awareness by this sector and the ongoing close working relationship between the HLT Early Years Service and the LADO.
- The overall proportion of allegations made against teachers and teaching staff remains at around 40% of the total number of referrals. It is not unusual for the

majority of referrals to arise against those who work in roles that bring them into significant contact with children and young people and this is evidenced in the local Hackney figures.

- There was a slight increase in allegations made against foster carers in 2014/15 (9 referrals) compared with 2013/14 (7 referrals). These figures are still below figures in 2012/13 (17 referrals). 3 referrals were made against those in transport, escort or taxi services in 2014/15. This is a decrease from 9 referrals in 2013/14. The remaining 47 referrals made up 29% of the overall number of allegations. No particular patterns or trends were identified across this cohort with referrals being spread across a range of different professional groups.





CATEGORIES OF CONCERN

- The majority of the reported concerns relating to allegations against professionals working with children involved physical abuse with referral numbers totalling 83. The number of referrals for physical abuse in 2014-15 has remained consistent compared with 86 referrals in 2013/14. Tracking back to 2012/13, the overall number of referrals for physical abuse has increased 43% (from 58 referrals).
- 12 referrals related to possible sexual abuse/ sexual harassment. This is a decrease from 9 referrals in 2013-14 where 21 referrals were made
- 6 referrals related to neglect. There were no cases in 2013-14 with neglect assigned as the primary category.
- 4 referrals were in relation to emotional abuse. One referral was made in relation to both physical and emotional abuse.
- 42 referrals related to behaviour that may question the individual's suitability to work with children. This is an increase of 110% compared with the number of referrals in 2013-14 (20). Reasons for this increase are considered to reflect improved professional curiosity by staff in organisations that is more robustly questioning of adult behaviours.



City & Hackney: *There were 2 referrals to the LADO concerning health staff in 2014-15 and 4 in 2013-14. This low level of reporting was identified during 2014/15 and following challenge at the Quality Assurance Sub Group, the CHSCB sought reassurance from the City & Hackney Clinical Commissioning Group (CCG) in relation to health awareness, referral numbers and the level of engagement of healthcare providers in the LADO process.*



The Designated Nurse led on a piece of work that benchmarked the number of health referrals and these were found to be similar to comparator and pan-London levels. Further reassurance work was undertaken and established that all health care providers across the City of London and Hackney have relevant policies in place in relation to managing allegations against professionals. As part of reinforcing the responsibilities in this area, feedback was provided to the CCG Safeguarding Assurance Group and to all provider safeguarding committees in order to highlight responsibilities.

Priorities going forward:

- Continue awareness raising of LADO activity through multi-agency training, CHSCB communications and direct awareness raising by the named LADO.
- Specifically monitor number of referrals across transport, escort and taxi services in 2015-16 – consistent with the CHSCB CSE strategy and action plan.

- Develop and evaluate a feedback process to ensure that the views and experiences of other agencies on the LADO are included in service development.
- To evaluate a range of “unsubstantiated” outcomes from the work of the LADO to identify the reasons for these decisions.





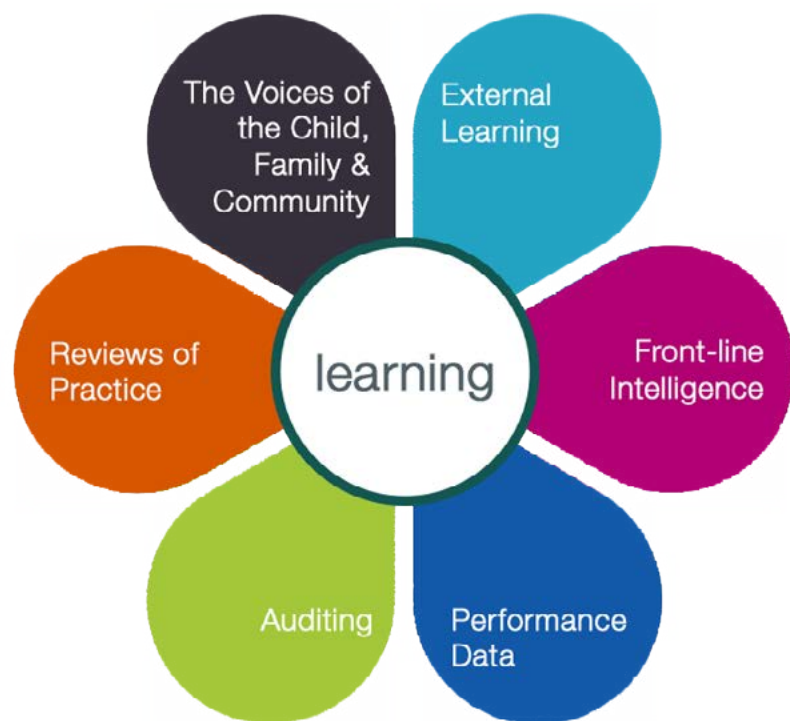
Learning & Improvement



Over 2014/15, the CHSCB accelerated the implementation of its Learning & Improvement Framework

Working Together 2015 states that “Local Safeguarding Children Boards should maintain a local learning and improvement framework which is shared across local organisations who work with children and families. This framework should enable organisations to be clear about their responsibilities, to learn from experience and improve services as a result.”

Since implementing the revised framework in 2013/14, there has been significant activity across both the City of London and Hackney. A range of lessons have been identified by the CHSCB leading to tangible impact and improvement across the safeguarding system. To identify lessons, the CHSCB applies a focus on the following areas:



THE CHILD'S VOICE

CHSCB partners have a strong ethos of engagement with children and young people, ensuring they are seen, heard and helped and that their voices influence both their own outcomes and that of how partners better safeguard children.

Practitioners from all agencies gather the views of children and young people on a daily basis, from a home visit by a social worker to comments made to a teacher in the classroom. Taking a wider overview of wishes, opinions and feelings, the CHSCB and partner agencies also undertake a range of activities to ensure the child's voice is central to our collective approach to learning and service improvement. The following examples detail some of this activity and its subsequent impact.

City & Hackney: Engagement in multi-agency case reviews

All serious case reviews and case reviews undertaken by the CHSCB actively consider the engagement of children and young people where this appropriate to do so. In 2014/15, as part of a multi-agency case review, one child was directly engaged on behalf of the CHSCB to establish their views as part of the review and to ensure that the narrative about their experiences, before and after intervention were transparent.



These views were shared with staff through learning events held in the City and Hackney and helped reflect the progress made by agencies in the ongoing safeguarding of this child and support of the family.

City & Hackney: Engagement in a Serious Case Review

As part of a Serious Case Review (SCR), a number of adult survivors were engaged to establish their views and experiences as children and young people.



Whilst the SCR has yet to be published, the voices of the survivors have directly shaped a number of recommendations and actions arising from this review



The City: The child's voice in multi-agency case audits

As part of the multi-agency case auditing process in the City of London, a looked after child (and their foster carer) was directly engaged and spoken to about their experiences of being in care, the support they were provided, their feelings of safety and where agencies could improve in their work to support the safety and welfare of looked after children.



Their comments directly contributed to actions arising from the review aimed at improving services to looked after children, particularly in respect of the CHSCB undertaking further assurance work about the availability of CAMHS support to looked after children awaiting immigration decisions.

City: The City Youth Forum The City Youth Forum (CYF)

The CYF met to discuss a range of issues including residential and, summer activities, City Gyms proposal and proposed awareness raising initiative on Child Sexual Exploitation (CSE). The outcomes of the CSE consultation were fed back to the multi-agency group leading the campaign and included feedback from the young people that posters and leaflets would not be effective in raising awareness, but that a phone app, a film at youth club and presentation from someone with personal experience could work.



The campaign will launch in 2015/16 and will include a video and case studies as part of an insert into local papers. There will be no posters aimed at young people.

Hackney: Youth Justice Service Feedback Questionnaires

42 young people responded with feedback on youth justice orders as part of the Hackney CYPs feedback programme.



As a result, changes to practice have included empowering young people to select the location for sessions such as use of the youth hubs in the borough and supporting young people with communication and educational difficulties through an enhanced speech and language therapy service.

Hackney: The Chair meeting with children and young people

The Independent Chair and the Senior Professional Advisor met with the Hackney Youth Parliament to discuss a range of issues regarding safeguarding and to hear directly from young people about issues that mattered to them. During this session, young people referred to one of their campaign priorities being about violence and the exploitation of women and girls. This connection was developed and Hackney Youth Parliament were

engaged by the CHSCB and the Police to assist in the presentation of an awareness raising initiative on CSE to the Safer Neighbourhood Board.



The input of the young people was invaluable in being able to secure funding from the Mayor's Office for Police and Crime (MOPAC) and preparations are underway to implement the project (engaging City young people) to coincide with the Hackney Youth Conference in 2015/16.

Priorities going forward:

- The CHSCB and partner agencies will continue to ensure the child's voice is embedded as part of all its activities.
- Lay members will also take a more active role in engaging with children and young people in the community.
- In the City, an annual consultation process with young people has been developed and will be facilitated independently by Action for Children.
- In Hackney, a Youth Conference is scheduled for 2015/16, which will create further opportunities for the CHSCB to hear directly from children and young people.

THE FAMILY'S VOICE

The CHSCB and partner agencies also continued to listen to the views of parents and carers about the quality of services and any matters impacting on their ability to provide good enough parenting.

In addition to individual agencies engaging with parents and carers, the CHSCB facilitated a range of activities in partnership with primary schools, children centres and the voluntary





sector; recognizing these environments often offer parents an open and safe setting in which they can discuss sensitive issues. Examples of this activity and impact include:

City and Hackney: meeting with parents and carers

During 2014/15, the CHSCB (through the work of the CPA) engaged a total of 53 parents and carers, in addition to separate groups of 17 fathers and 11 parents from the Traveller and Gypsy community. Sessions with the parents and carers focused on awareness raising and conversations about a range of issues including: relationship breakdown and the impact on children, private fostering, cultural practices and parenting, forced marriage, child trafficking and abuse linked to faith and belief.



After the sessions, parents reported better awareness and understanding of safeguarding issues and being in a better position to positively parent and protect their children from harm.

Following an assessment of a Vietnamese family by Hackney Children's Social Care, a targeted piece of work was also undertaken by the CPA in partnership with a Vietnamese Family Support worker from Family Action to deliver a discussion on safeguarding children to 16 parents.



This session provided a forum for parents to discuss concerns impacting on their local community and the worries they had about their children.



City: Family Feedback - The City of London Under 5's Parent Survey

Undertaken in 2014, this survey contributed to the City Childcare Sufficiency Assessment and included a focus on parental views about the quality of early help services provided by local children's centres.



Overall, the survey showed high levels of satisfaction with the choice and quality of childcare and services within the City of London, with 78% reporting they found them Good or Very Good.

Hackney: Family Feedback

As part of the CYPs family feedback programme, parents expressed good levels of satisfaction post assessment (48% of parents and carers felt the outcome was completely positive). Parents felt that the reasons for CYPs involvement were clear, with only 8% feeling they were not. A typical comment from one parent was that the "social worker was nice. She explained everything."



Feedback on the Child Protection Conference process from family members was often reliant on the perceived quality of communication, with those rating the process highly giving positive comments on 'clear' plans and 'understandable speech'.

Priorities going forward:

- To support the existing engagement activity with families, the CHSCB will seek to ensure a wider range of front-line visits by CHSCB members also includes opportunities to communicate directly with parents, carers and family members.

THE COMMUNITY'S VOICE

Both the City of London and Hackney have a vibrant community and voluntary sector (CVS) that continues to support the safeguarding of children and young people and the promotion of their welfare.

In addition to the new Lay Members playing a strong role in representing the voice of the community, the CVS also demonstrated its capabilities at being able to ensure the voice of the community was heard by the CHSCB and that there was positive and meaningful engagement.

The City of London:

- The City of London Police hold weekly outreach surgeries via the Vulnerable Victims co-ordinator at various locations within the City, but with a particular focus



on the Bengali community to encourage reporting and to provide support for issues such as so called “honour” based violence, domestic violence and FGM. The Police also host surgeries within the business community to target employees within the City.

- Since Autumn 2014, the City Children and Families Team has held quarterly sessions in the Portsoken Ward to raise awareness in various aspects of safeguarding - child protection, DV, radicalisation. The sessions are planned jointly with the City of London Police with topics being decided by the community. Take up is generally good and feedback has been positive.

Hackney Council for Voluntary Services (HCVS) is a member of the CHSCB and is Hackney’s leading voluntary and community sector support agency. Supporting hundreds of people to run successful voluntary and community sector organisations, HCVS provides access to the key skills, knowledge and resources necessary to respond to the needs of local people, especially those most in need.

- In May 2014, HCVS engaged 137 participants in their first joint conference, including young people, parents and professionals. Speak Up about Children’s Health was multi agency event with a high focus on safeguarding.
- 63 VCS organisations actively took part in the CYPPF programme of consultation influencing policy, safeguarding, child poverty and family wellbeing plan. Key areas; employability and work with Hackney Refugee Forum (HRF)
- HCVS facilitated community conversation with 96 participants engaging the DV Team, CHSCB and Children England to help the community better understand how to make referrals and access support to address FGM, Child Sexual Exploitation and ways to end violence.
- 33 participants from the faith sector attended a session involving the Independent Chair of the CHSCB to help develop the Hackney Faith Network – due to be launched in October 2015.
- 15 youth workers and supplementary school staff took part in a new Youth Mental Health awareness course and increased their understanding about early intervention and non-medical interventions.
- 31 Hackney Homes Tenants and Residents Association (TRA) leads participated in training, completed their safeguarding health check, annual audit and initial safeguarding audit.
- As part of the Young Black Men’s project, Hackney CVS has trained 8 parents to act as peer facilitators who gather the views of parents that influence public policy.

ENGAGING THE ORTHODOX JEWISH COMMUNITY

The Interlink Foundation is a membership organisation for Orthodox Jewish voluntary organisations, with over 100 community charity members nationwide. Established in 1991, Interlink has two main purposes:

- To support Orthodox Jewish voluntary organisations with advice, training, consultancy and information.
- To work with public sector organisations to increase their understanding of the needs of the Orthodox Jewish community and to improve services for this community.

The CHSCB and partners have worked closely with both Interlink and other community connections to help strengthen the interface with safeguarding services. For example:

- Scheduled quarterly meetings and regular contact with agencies working with within the Orthodox Jewish community are held with senior managers in Hackney CYPS.
- HLT Early Years Service chairs termly quality improvement and professional development meetings with leaders from Orthodox Jewish childcare settings and independent schools with standing agenda items of safeguarding, promoting British values and preventing extremism.
- Working in partnership with Public Health and CYPS, the Community Partnership Advisor of the Board has also engaged with a group of rabbis and Interlink to explore the development of a safeguarding children intervention project. This project will focus on awareness in schools and parents.
- The Orthodox Jewish Health Forum is an ongoing initiative led by the Public Health team and comprised of Orthodox Jewish organisations and rabbis along with a range of statutory partners. During 2014/15, the CHSCB engaged with this forum via attendance from the CPA, the LADO and the Senior Professional Advisor.
- Orthodox Jewish family support providers (Ezer Leyeldos and Bikur Cholim) attend children’s centre MAT meetings and receive case supervision from the children’s centre MAT chair.
- The CHSCB funded Interlink to deliver bespoke safeguarding training to professionals and volunteers working in the Orthodox Jewish Community. Between June 2013 and May 2015 Interlink provided training to 297 individuals. Evaluation of this training by Interlink identified a significant shift in institutional practices, with organisations having more robust safeguarding policies and procedures and a greater culture of awareness and prevention.



The impact of this continued engagement is reflected in the year on year increases in referrals to Hackney CYPS from the Orthodox Jewish Community. In 2014/15, 157 referrals were made compared with 121 in 2013/14 and 97 in 2012/13. Whilst disproportionately low and only representing 4.5% of the total referrals, the data does show a trajectory of year on year increases and progress in ensuring children and young people in this community are more visible.

Priorities going forward:

- Over 2015/16, the CHSCB is looking to strengthen the coordination of community input through the creation of a defined Community Sub Group, with both areas working to a more defined engagement plan involving the community, voluntary and faith sectors.

REVIEWS OF PRACTICE

Serious Case Reviews are undertaken to learn lessons and improve the way in which local professionals and organisations work together to safeguard and promote the welfare of children. The CHSCB must always undertake a Serious Case Review (SCR) when the following criteria are met under Regulation 5 of the 2006 LSCB Regulations:

- abuse or neglect of a child is known or suspected; and
- either (i) the child has died; or (ii) the child has been seriously harmed and there is cause for concern as to the way in which the authority, their Board partners or other relevant persons have worked together to safeguard the child.

Where the SCR criteria has not been met, the CHSCB can also undertake smaller-scale multi-agency case reviews. Whatever the type of review, the principles are still the same with the aim being to share information, identify good practice and establish the key lessons that will help to improve safeguarding arrangements.

- During 2014/15, the SCR Sub group met on seven occasions with five cases being formally considered for a SCR.
- The chair decided to initiate one SCR during 2014/15. This review remains in progress.
- The chair decided to initiate one combined Domestic Homicide / SCR. This review remains in progress.
- The chair decided to initiate one multi-agency case review. This case was presented to the SCR Sub Group in 2014/15. The initial decision, however, was for no review to take place. Following a further period of information gathering and reflection by the SCR Sub Group, which included considering the views of professionals from other LSCB areas, the chair agreed to initiate a multi-agency

case review into this case. The review remains in progress

- The chair decided not to initiate a SCR or multi-agency case review in two cases. In one of these cases, an Extended Learning Review was commissioned under Youth Justice Board guidelines and in the other, a thorough investigation had been undertaken by the Coroner as part of the inquest.
- One SCR continued through 2014/15 and remains in progress.
- One case review remained ongoing during 2014/15 (Child K) and one was formally completed (Child E).
- All decisions made by the Chair were communicated with and agreed by the National Panel of Experts.



"Thank you for your recent correspondence regarding the above case. The panel were particularly impressed with the clear and analytical way in which the information was presented... they support your decision to combine the processes for a DHR and an SCR, and in particular your commitment to ensure that (the child's) experiences are not lost as part of the process." Letter to the Independent Chair from the National Panel of Experts June 2014.

CHILD E – MULTI-AGENCY CASE REVIEW

One multi-agency case review was completed in 2014/15. This review had been initiated following a professional's visit to Child E's home that identified significant concerns regarding neglect. Questions were raised about the opportunities for earlier identification of the environment in which Child E was living; with an independent review subsequently being agreed by the Independent Chair. The following summary sets out the key areas of learning identified, some of the specific actions undertaken by the CHSCB and a range of examples of the impact that this review has had on the safeguarding system.

Child E - Key Learning:

- Children need to be seen, heard and helped
- Importance of home visits
- Importance of escalating concerns
- Importance of identifying and dealing with neglect
- Need for all staff to "Think Family"
- Importance and clarity of information sharing

Child E - Actions:

- Action plan developed and monitored by SCR Sub Group
- Hackney Homes engaged on the Board
- CHSCB Escalation Protocol developed and implemented



- Neglect strategy developed
- Learning events delivered to 224 staff within the City of London and Hackney
- Follow up multi-agency case audits involving cases of neglect



In April 2014, a case was brought to the attention of the Independent Chair by a charity. This charity had a heightened awareness of child safeguarding having ensured key lessons from the Child E case review were embedded into its practice, **particularly about the need to escalate concerns**. The case involved a number of children who were on Child Protection Plans. The charity had expressed concern about the effectiveness of the plans and their engagement. Whilst the Chair did not directly resolve the issues, his engagement in this case did help facilitate swift contact. The Chair maintained oversight until there was confirmation that a satisfactory resolution had been reached between all the involved parties and there was mutual confidence in the arrangements in place for the protection of the children.



Following the Child E Review, it was agreed that **Hackney Homes** should become a formal member of the CHSCB. Significant activity has followed, with Hackney Homes engaging in the Section 11 audit process for the first time, safeguarding policies being developed, safeguarding leads being identified and widespread promotion of safeguarding training for front-line staff including housing operatives such as electricians and gas fitters.



At a full Board meeting, the Independent Chair sought reassurance from all partners that the **escalation policy** had been cascaded to staff and was embedded within each organisation. A decision was subsequently made by the Chair to further test the awareness of this policy and the findings from Child E in the 2015/16 staff survey.

The merging of the Partnership Triage and First Response Team to create the multi-agency First Access Screening Team (FAST) also includes a **“go look”** function. This development coincided with the completion of this review and reflects the clear understanding of Hackney CYPS about the importance of children being seen and home visiting. Where there is a need to clarify concerns, the FAST can deploy a social worker to visit the home and establish whether a statutory assessment is required or not.



Level 3 training was provided to approximately 100 GPs by the CCG Designated Nurse. This training included a specific focus on the learning arising from Child E. GPs were asked how the training would impact on their practice:

- *To be vigilant and to be confident in challenging behaviour of parents and putting a “name” to the problem.*
- *The session challenged the view on ‘dirty, smelly but happy’, vigilance for spotting neglect and documenting this specifically and in detail and taking action.*
- *I will be more aware of subtle symptoms of neglect and I will speak to others*
- *Be frank enough to confront parents about children being unkempt*
- *I will be more confident to address issues such as unkempt children with the parent without fear of offending them.*

Priorities going forward:

- In 2015/6, the CHSCB will hold learning events and communicate the lessons arising from the reviews that were outstanding at the end of the year.
- Ongoing monitoring of the respective action plans will continue to ensure these are complete and that they have resulted in a positive impact on local safeguarding arrangements.

AUDITING

SECTION 11 AUDITING

The Section 11 Audit is the CHSCB's primary audit to examine the safeguarding arrangements within agencies and provides the Board with reassurance that agencies are doing what they can to ensure the safety and welfare of children and young people.

Section 11 (S11) of the Children Act 2004 places a statutory duty on key agencies and bodies to make arrangements to safeguard and promote the welfare of children. On a bi-annual basis, the CHSCB undertakes an audit of statutory, commissioned and voluntary sector organisations to establish reassurance that they are compliant with these expected safeguarding standards. In 2014, the CHSCB also introduced a staff survey to this process to help triangulate the audit returns with the views of front-line staff.



As part of this process, the CHSCB received a total of 190 S11 audit returns from statutory, voluntary and commissioned agencies and 313 responses to the staff survey.

SECTION 11 FINDINGS

The S11 Audit provided a positive view of safeguarding across CHSCB partner agencies in both the City of London and Hackney. The audit demonstrated a consistent improvement from the previous audit undertaken in 2011. The information reported by partners identified that a number of action plans had been completed since the last audit and there were areas of new work being carried out by agencies.



- Statutory agencies as a whole are progressing positively with their arrangements for the safeguarding of children. As a new partner to the Board, Hackney Homes self-assessed as requiring further support in meeting all standards and a range of work has been scheduled to strengthen procedures and improve staff awareness and access to training.
- Education and Early Years settings in the City of London are generally compliant with safeguarding standards.
- Findings indicated significant progress with regards to GP safeguarding arrangements with returns increasing in Hackney from 19 in 2011 to 36 in 2014/15.
- There is a variance in compliance with safeguarding arrangements from the voluntary sector and commissioned organisations.
- Findings from the survey of practitioners broadly correlated to responses from their organisations.
- The significant majority of survey responses indicated that staff are aware what to do if they are worried about a child. Whilst positive, across all cohorts of practitioners there was a low percentage confirming they had attended training on the threshold tools in place across the City and Hackney (The City of London Thresholds of Need / Hackney Child Wellbeing Framework). This low percentage was not an aspect reflected in the S11 audit returns from organisations.

SECTION 11 ACTIONS

Individual agency action plans have been completed to respond to any self-assessed areas requiring further attention. These will be subject to ongoing monitoring and further compliance work will be undertaken in 2015/16. Specifically, the CHSCB has taken / will be taking forward the following actions:

- As a result of intelligence indicating fewer staff had attended training on the threshold tools, the CHSCB has implemented communication and training to help raise awareness of these important documents. Supported by the CHSCB, a range of partnership briefings were held in the City of London to launch the revised City Thresholds of Need in early 2015 and lunchtime seminars to promote these documents will be further scheduled over 2015/16.
- Transport arrangements were identified as requiring further scrutiny by the CHSCB as part of the strategy to tackle Child Sexual Exploitation. Assurance work is currently underway to ensure the range of in-house or commissioned transport services used by any agency are compliant with Section 11 standards of safeguarding, with specifications being robust and referencing safeguarding responsibilities. The outcomes from this work will be reported next year.



- In 2015/16, a peer review programme will be implemented to further test impact and support organisations in meeting the S11 requirements.

Priorities going forward:

- In 2015/16, a compliance exercise will be undertaken to seek assurance that organisations either remain compliant with their Section 11 responsibilities or that they confirm ongoing work against any existing Section 11 action plan.
- The CHSCB will also introduce a peer review exercise, engaging Board and Lay members to further test how organisations rate themselves against the Section 11 requirements.



MULTI-AGENCY CASE AUDITS

The CHSCB multi-agency case auditing has identified numerous examples of positive safeguarding practice being undertaken by the partnership. Lessons have also been identified that have led to tangible improvements.

Systematic **multi-agency case auditing** allows the CHSCB to deliver one of the best learning opportunities for front-line workers; directly engaging them in a process that reflects upon, assesses and measures the quality of professional practice. The CHSCB continues to operate a consistent and regular 6 monthly multi-agency case file audit process, which is carried out across the City of London and Hackney. A total of four multi-agency audits were carried out in 2014/15.

CITY CHILD PROTECTION ENQUIRIES AUDITS

Strengths:

- Practice was consistent with London Child Protection Procedures
- Information sharing and investigation planning was strong with robust contingency plans in place
- Interpreters were used appropriately
- Professionals worked in partnership with parents
- The voice of child was evident in intervention and recording
- Robust step down arrangements were in place to the Early Help Services within the City.

Areas for Action / Impact:

- **Child Protection Medicals** – The audits identified a need to clarify the arrangements for children receiving child protection medical examinations to ensure there was no delay. **Following a review by the Consultant Paediatrician and the Safeguarding Committee at Homerton Hospital NHS Foundation Trust, assurance was provided to the CHSCB that The Paediatric Community Team offer all children an assessment within 24 hours of referral or if in an emergency or out of hours, this is undertaken at A&E. The Paediatric Community Team saw a total of 127 children with acute safeguarding concerns in 2014/15.**
- **Attendance at Child Protection (CP) Conferences** – non-attendance at CP conferences was identified as an issue in one of the cases audited. This resulted in the Assistant Director for People visiting the one City GP practice to discuss the importance of their engagement through the CP Conference process and a notification being circulated to all City partners. **Follow up monitoring indicated**

attendance by the GP at subsequent meetings.

- **Early identification of vulnerable families** – Social Workers, Early Intervention Workers and Children Centre workers engaged in reflective learning sessions to ensure they were alert to indicators of parental stress and the impact of this on children. The focus of these sessions was to ensure that professional curiosity was not influenced by parental affluence when considering the neglect of children. **This finding will be reflected in the CHSCB Neglect strategy.**

CITY LOOKED AFTER CHILDREN AUDITS

Strengths:

- The influence of dedicated and skilled foster carers was key in improving outcomes
- Good placement stability was a major contributory reason for positive outcomes seen in the cases.
- Staying Put beyond 18 had also provided consistency and security.
- There had been few changes of social worker and this supported positive relationships and good outcomes.
- There has been positive engagement from partners through the formal structures of LAC reviews and pathway planning

Areas for Action/ Impact:

- **Independent Reviewing Officer (IRO) oversight** – The audits identified that some young people had not being seen by their IRO between statutory Looked After Children (LAC) reviews. Performance of the commissioned IRO service was an issue already identified by the City and reinforced through this audit. **The City has subsequently appointed an in-house IRO.**
- **Sharing of intelligence with Independent Fostering Agencies (IFAs)** – The CHSCB considered whether this was possible with regards to intelligence such as CSE problem profiles. It was agreed that the national network of local authority leads is the best mechanism to enable local authorities to determine whether any risks will be present or exacerbated through placing the child / young person in that particular area. Given the sensitive nature of the detail contained within any CSE problem profile, it was not considered possible for the CHSCB to disclose this information in full to IFAs. **All IFAs used by the City were also spoken to by the Children & Families Team to confirm that training was being delivered to their foster carers on radicalisation and CSE.**
- **Placement stability** – The audits identified that some young people had frequent placement moves. This was reviewed and the moves that occurred in the audited cases were historical. **Improvements have since been made to the matching**



process and the City of London's performance indicators on placement stability are currently very strong.

- **Access to support** - The audits identified evidence that some young people can be adversely affected through delays caused by the immigration process. This was relevant in terms of their emotional and mental health. **The City subsequently undertook thematic audits on Care Leavers and Looked After Children, which demonstrated young people, are being supported with mental health problems swiftly through referrals to mental health services and CAMHS.**



HACKNEY NEGLECT/ PARENTAL MENTAL HEALTH AUDITS

Strengths:

- There was evidence of engagement with fathers and wider family network.
- Multi-agency meetings were well attended with examples of good information sharing.
- There was evidence of the use of the Hackney Child Wellbeing Framework and comprehensive referrals being made
- Use of joint mental health protocol between Hackney CYPS and ELFT was evident.
- There was evidence of concerns being escalated by front-line practitioners
- Agencies working over and above their service provision to support the child.

Areas for Action / Impact:

- **Early Help** – In one case, the audit identified the need for robust identification of families, known to services, where a coordinated early help plan and targeted support could pre-empt referral to statutory agencies. **This area was addressed through the planned CHSCB action regarding communication, awareness raising and training on the Hackney Wellbeing Framework.**
- **Low Mood** – The audit identified the need for increased awareness of 'low mood' and potential low-level neglect. **Responding to this finding, direct communications were issued to Health Visitors regarding awareness of low mood and indicators of neglect. Furthermore, a review of CHSCB training regarding parental mental health was undertaken to ensure "low mood" was included as a theme.**
- **Information Sharing** – There were examples of good information sharing, although on some occasions this could have been better. **Information Sharing guidance was re-circulated via CHSCB communications.**
- **Planning and discharge meetings** – The audits reinforced the need for long-term planning and discharge meetings to clarify ongoing support and contingency planning. **Responding to this finding, the Independent Chair formally wrote to ELFT and Hackney CYPS seeking assurance that all staff were reminded to follow the joint mental health protocol and encouraging professionals to engage with mental health staff as appropriate to utilise their expertise.**
- **Escalation of concerns** – The audits reinforce the importance of escalating concerns especially in differences in opinion with regards to care planning. **At a Board meeting, the Independent Chair sought assurance from Board member that the published escalation policy had been cascaded within their organisations – with plans to test this further in the 2015/16 staff survey.**



HACKNEY EARLY HELP AUDIT

Strengths:

- The cases audited evidenced that the Multi-Agency Team process is effectively coordinating support for children and families
- There was evidence that practitioners from a range of agencies sustained positive working relationships with families
- The voice of the child was clearly captured within statutory assessments and step-down plans
- There were clear examples of early help and evidence based interventions being used with families.
- Positive examples were seen of practitioners working with and understanding parenting in the context of different cultures.
- There was evidence of concerns being escalated when risks were perceived to have escalated

Areas for Action / Impact:

- **Information sharing** – The audits identified some examples where information sharing could have been better between engaged agencies, including the knowledge of the named lead professional. **The CHSCB continues to promote the importance of information sharing through its communications and training.**
- **Ensuring engagement with fathers** – The audits identified the need to ensure fathers were actively engaged in early help processes. This well established finding will be further communicated by the CHSCB and reviewed in terms of CHSCB training content.



SINGLE AGENCY CASE AUDITS AND LEARNING

Partner agencies of the CHSCB have continued to operate a variety of single agency quality assurance frameworks to maintain oversight on safeguarding and promoting the welfare of children and young people. At the Board meeting in June 2014, the full range of single agency quality assurance activity was considered, with partners sharing the local lessons being learnt and the improvement actions being taken across the system. Examples of this activity and the impact this had in 2014/15 are set out below.

Homerton University Hospital NHS Trust – 4 thematic audit rounds (knowledge, skills and learning of Level 3 child protection staff / child protection supervision / compliance with standards for HV and GP link meetings / repeat STI's in teenagers)

Example Audit Outcome: bespoke workshops held with different groups of staff to help them develop their skills in completing accurate and thorough referrals to children social care.

East London NHS Foundation Trust: Quarterly audits were undertaken across 18 City & Hackney mental health services.

Example Audit Outcome: Updating training materials for staff level 2 and 3 to raise awareness of the need to consider all family members, including children, and not just parents.

City & Hackney CCG - An audit of health contracts to ensure that safeguarding children was a visible component.

Example Audit Outcome: A safeguarding children through commissioning policy was developed. This policy applies to the CCG and will assist commissioners on drawing up service specification in the future.

City of London Children & Families Team: 89 case audits

Example Audit Outcome: There was insufficient challenge by the IRO service in regard to practice, with planning for children and young people not being outcome focused or timely. As a result of this emerging pattern, reinforced by the multi-agency case audits by the CHSCB, the IRO service was decommissioned and brought back “in-house” by the City of London Corporation.

Hackney Children and Young Peoples Services: 381 case audits / 4 Management Case Review Days / 51 Youth Justice Audits.

Example Audit Outcome: As a result of the feedback from young people on youth justice orders, changes to practice have included empowering young people to

select the location for sessions such as use of the youth hubs in the borough and supporting young people with communication and educational difficulties through an enhanced speech and language therapy service.

Hackney Learning Trust: 8 school audits / 15 Early Years Settings

Example Audit Outcome: Developments made to improve communication with parents and carers including school safeguarding leaflets, drop in sessions / coffee mornings where safeguarding can be introduced as a general theme.



PERFORMANCE DATA

During 2014/15, scrutiny of the multi-agency dataset by the Quality Assurance Sub Group, alongside other information, enabled the CHSCB hold agencies to account, where appropriate, in providing a rationale for the emergence of certain patterns or trends. Two examples of this challenge and the subsequent impact are set out below:



The City – Low Rates of Contacts & Referrals: *Low rates of contacts and referrals over first 3 quarters were noted in the CHSCB dataset. These levels remained low despite a thorough safeguarding awareness raising campaign (“Notice the Signs”) that reached 477 front-line staff. Scrutiny was applied not only to the overall volume, but from the sector making the referral. Whilst the City has a small population, it was noted that only 2 contacts had been made by schools in 2013/14. The low rates were escalated to the CHSCB City Executive and an analysis was presented. A programme of work followed, coinciding with the revision of the City of London Thresholds of Need tool. Partnership briefing events were co-ordinated by the City of London Corporation and supported by the CHSCB to deliver key information to a range of professional groups. The focus was on ensuring partners were clear about when and how to refer to the Children & Families Team, in addition to raising awareness of a new multi-agency referral form, the early help team, private fostering and the management of allegations against staff.*

In quarter 4 of 2014/15, increases in activity were noted. There remains a noted lack of contacts from CAMHS and GPs in particular and this aspect will remain subject to ongoing monitoring and awareness raising through the City and CHSCB.



Hackney – Reducing trend in the number of cases considered at the Children & Young People’s Partnership Panel (CYPPP): *In Quarter 3, the QA sub-group noted a reduction in the number of children being considered at the CYPPP.*

Hackney CYPS was asked to account for this reduction with the outcome being formally reported to the full Board. CYPS provided a rationale to the Board that the reduction reflected the improved coherence and alignment between Hackney CSC and Young Hackney under new organisational arrangements that had brought together the management of these two services. There is now no requirement to process referrals through CYPPP as there is a direct pathway between these services. Additionally, the FAST service has aligned the front door of CSC with the entry point for Early Help (previously Partnership Triage) to provide a single pathway to services, be they statutory or early help. Board members were content that this explanation of improved pathways was not suggestive of a reduction in the help being afforded to children and young people.



FRONT-LINE INTELLIGENCE

A range of visits undertaken by Board members during 2014/15 provided staff with visible leadership from the Board and created opportunities to share perspectives, whilst ensuring senior leaders remained alert to the realities of frontline safeguarding. Two examples of the feedback received from these visits are set out below.



“There was good representation from all key agencies. The meeting considered several cases that had come to police attention. These cases were of young people, not resident to the City, but who had come into Police contact in the square mile. Reviews of risk assessments and information sharing by partners demonstrated

good multi agency working, which included liaising with the home authorities where the young people lived - ensuring intelligence was shared with the relevant agencies responsible for safeguarding the young people.” **OBSERVATION BY A BOARD MEMBER OF THE CITY OF LONDON MASE**



“The chair of the Conference was skilled at facilitating the meeting, providing an acute focus on the needs and outcomes of the child and ensuring that the child’s voice was central to the discussions and planning. A range of partners contributed to the Conference that used the Signs of Safety model to ensure maximum

engagement of all attendees and a robust analysis of risk. I was impressed by the professionalism and dedication of all attendees, particularly the chair, in managing a difficult and challenging meeting.” **OBSERVATION BY THE INDEPENDENT CHAIR OF A HACKNEY CHILD PROTECTION CASE CONFERENCE**

Priorities going forward:

- With the appointment of a new Board co-ordinator, a more structured set of front-line visits will be arranged for CHSCB members. There will be an added focus on Board members observing operational activity that allows for opportunities to engage directly with parents, carers and other family members as appropriate.

EXTERNAL LEARNING

The CHSCB is a learning organisation and is constantly looking outwards to identify relevant learning opportunities that may help assist in its role of co-ordinating and ensuring the effectiveness of the safeguarding systems across the City of London and Hackney. Over 2014/15, a number of national reviews and inspection reports were considered by the CHSCB, with Board members reflecting on their relevance to local safeguarding arrangements.

These included:

- National Inspection of CAFCASS – April 2014
- National Panel of Experts first annual report into Serious Case Reviews – July 2014
- Professor Alexis Jay’s report into CSE – August 2014
- National Inspection of Probation Trusts and Youth Offending Teams - August 2014
- Progress of Hackney CSC in the DfE Assessment Trials

Two specific examples that illustrate this approach to identifying external learning and the local impact are set out below:



City & Hackney: The Designated Doctor for the City & Hackney CCG queried whether any local learning could be applied from the case involving Dr Myles Bradbury, a paediatric consultant at Addenbrooke’s Hospital in Cambridge, who was convicted of a range of sexual offences against children and young people. The Independent Chair of the CHSCB subsequently contacted his counterpart in Cambridgeshire who confirmed a serious incident review was underway and set out the range of immediate actions that had been initiated – citing the use of chaperones. Following this response, the City & Hackney CCG were tasked by the CHSCB to provide assurance that relevant chaperone policies were in place and in use across the health community in the City and Hackney. This work identified health providers that were operating chaperone policies robustly, those that required their policies to be updated and one provider that did not have one in place, but immediately responded to place this on their work programme to resolve.



City & Hackney: In July 2014, the National Panel of Independent Experts published their first annual report into Serious Case Reviews (SCRs). To further develop its approach in this area, the CHSCB invited a Panel member to attend the SCR Sub Group. This meeting was attended by partners from a range of agencies, with the session providing clarity on the position of the National Panel in terms of the commissioning, production and publication of SCRs. The meeting reinforced the CHSCB’s approach to maintaining constructive and supportive dialogue with this important forum and its commitment to transparency in the SCR process. During 2014/15, the National Panel agreed with all of the decisions made by the Chair of the CHSCB with regards to the commissioning of SCRs.



Child Death Overview Panel



The Child Death Overview Panel continues to undertake its role with sensitivity and has identified and implemented a range of recommendations that are improving child safety and welfare.

The Child Death Overview Panel (CDOP) enables the CHSCB to carry out its statutory functions relating to child deaths. The full CDOP Annual report for 2014/15 can be found [here](#).

CDOP FACTS AND FIGURES 2014/15

- 213 deaths of children and young people reviewed since April 2008
- 35 deaths of children and young people who lived in Hackney (an increase from 26 in 2013/14)
- 0 deaths of children and young people who lived in the City of London.
- 34 cases reviewed by CDOP in 2014/15
- 13 deaths were unexpected.
- The rate of infant mortality (deaths of children under the age of 1) increased from 5 per 1000 live births in 2012/13 to 5.5 in 2013/14 and to 5.7 in 2014/15. .
- The rate of deaths of children and young people aged 1-17 in Hackney decreased again from a rate of 22.6 per 100,000 in 2012/13 to 16.3 in 2013/14 and 12.8 in 2014/15- although remains above the national average of 11.9 per 1000,000 in 2014/15

As part of its functions, the CDOP is required to categorise the preventability of a death by considering whether any factors may have contributed to the death of the child and if so, whether these could be “modified” to reduce the risk of future child deaths. During 2014/15, the CDOP identified modifiable factors in just three (9%) of the thirty-four cases that it reviewed.

Whilst 9% is lower than the national average of 24%, this is attributable to the majority of child deaths in Hackney being categorised as ‘Medical’ (82% of cases). The national

statistics show that just 11% of ‘Medical’ deaths are classed as modifiable and this is in line with the percentage of modifiable deaths locally. The CDOP is confident that all cases are reviewed comprehensively, and that professional challenge remains a central part of the review process.

CDOP IMPACT 2014/15 - IMPROVING CHILD SAFETY, CHILD WELFARE AND THE CDOP PROCESS

Better Information: The CDOP identified that more robust details were needed from hospitals following the deaths of babies. CDOP now requests “yellow forms” from hospitals for all baby deaths. This action has ensured comprehensive information is collected and available for the CDOP, leading to more informed reviews of child deaths.

Baby Slings: The CDOP Coordinator raised the issue of deaths having occurred nationally involving improper use of baby slings. The CDOP secured a sling safety leaflet to distribute to all new parents in Hackney via the ‘baby box’ – a new project piloted by the Hackney Public Health team. Whilst there have been no sling-related deaths in either City or Hackney, this awareness raising will help mitigate the risks of future sling-related deaths.

Engaging Parents & Carers: The CDOP engaged the Lullaby Trust to develop materials aimed at helping parents and carers understand the CDOP process, whilst informing them of their options after losing a child.

Consistent Practice: The CDOP identified that the London Ambulance Service (LAS) protocol on the removal of children’s bodies to A&E differed to the statutory guidance



covering child deaths in 'Working Together 2013'. The LAS only practice this for children aged 2 or under, whereas Working Together states all under 18s must be taken to a hospital first (with the exception of forensic cases) for history to be taken. The LAS are currently reviewing their practice and the Medical Director has met with the Chief Coroner to discuss further. The CDOP is currently awaiting confirmation of any changes and will monitor progress.

Changing Policy: The CDOP identified the possible deterioration of samples when taken at post mortem could impact on important information being lost for children with a metabolic disease. The Coroner protocol restricted hospitals from taking samples post death. The CDOP formally requested that Paediatricians be allowed to take samples immediately after death. The Coroner agreed with the change in policy cascaded to local hospitals. The potential impact of this action is that underlying metabolic conditions contributing to death are now more likely to be discovered, thus improving the ability of CDOP to identify lessons and improvements.

Suicide & Self harm: The CDOP considered a "Suicide Audit" completed by the Public Health Team. This audit was initiated by CDOP following the increase in Hackney deaths in 2013/14 relating to suicide and deliberately inflicted death by injury. Whilst there were no similar deaths during 2014/15, an action plan has been developed and is being driven by the Public Health Team.

Deaths Abroad: The CDOP contacted the Foreign Commonwealth Office (FCO) and the Department for Education to request that routine information be gathered by the FCO and shared with the relevant CDOP when deaths occur abroad. This communication arose from the review of the death of a young person in 2014/15, where limited information had been made available. The CDOP awaits a response and will monitor progress.

Working Together and Sharing Learning: The CDOP identified the need to discuss a range of issues with the Senior Coroner. This meeting has taken place with one outcome being that all future Regulation 28 "Prevention of Future Deaths" reports prepared by the Coroner will now be shared directly with the CDOP. This will allow the CHSCB to more widely circulate any related learning.





Training & Development



The CHSCB remains confident that single and multi-agency training continues to be of high quality, is valued by participants and is helping contribute towards positive outcomes for children and young people.

The training opportunities offered by the CHSCB are designed to meet the diverse needs of staff at different levels within the wide range of organisations that work with children, young people or adult family members. Supported by a Multi-Agency Training Strategy, the CHSCB training programme focuses on areas of practice prioritised by the Board, with learning from local and national case reviews being fully integrated into the training material.

CHSCB MULTI-AGENCY TRAINING PROGRAMME SUMMARY 2014/15

- 59 Sessions
- 51 Courses
- 8 lunchtime seminars
- 1385 training places accessed
- 899 individual participants

There has been a noticeable 51% increase in the number of recorded places taken up this year. This increase is positive and considered by the CHSCB to be attributable to a range of factors including the refining of the recording process detailing agency attendance, agencies responding to formal challenge regarding low numbers of attendance and ongoing promotion of the value of CHSCB training by partners.



Following contact by the Chair of the Training & Development Sub Group, awareness of the CHSCB multi-agency training programme was raised by Adult Social Care Service Managers and highlighted in the Safeguarding Adults Best Practice forum. Attendance increased from 11 in 2013/14 to 36 in 2014/15.



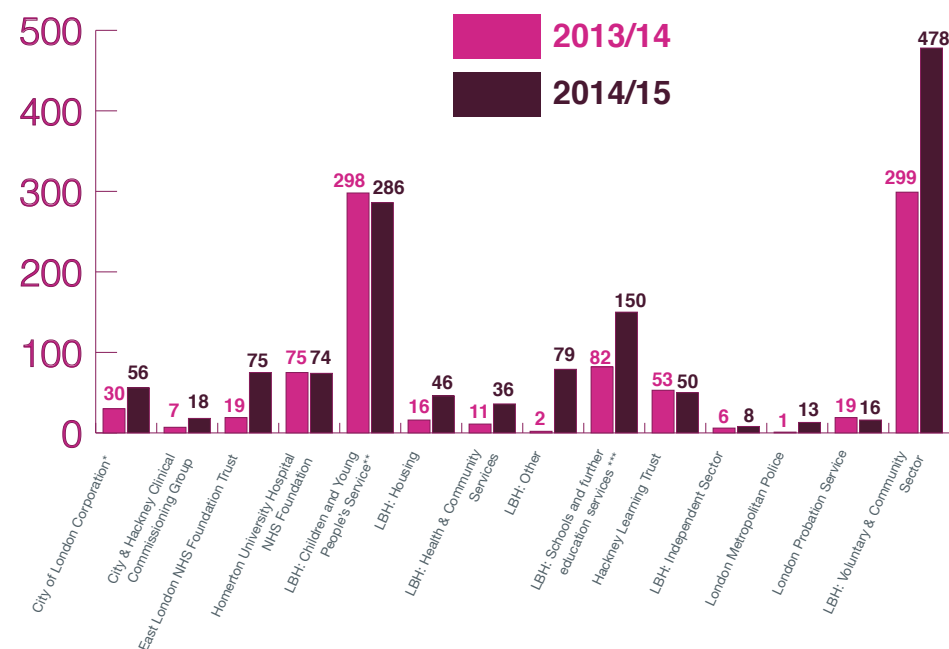
In May 2014, the Chair of the CHSCB wrote to the Metropolitan Police Borough Commander following it being identified that the Police were under represented at CHSCB multi-agency training. Attendance increased from 1 in 2013/14 to 13 in

2014/15.



Following the publication of the Child E review, there was a significant increase in attendance at multi-agency training by staff from Hackney Homes. Attendance increased from 16 in 2013/14 to 46 in 2014/15. This has been further supplemented by bespoke training delivered by the CHSCB to 94 housing operatives.

AGENCY ATTENDANCE AT CHSCB MULTI-AGENCY TRAINING



TOTAL ATTENDANCE:



In addition to the standard **training programme**, the CHSCB also deploys its Community Partnership Advisor to deliver bespoke learning opportunities to a range of different stakeholders. This enables the CHSCB to directly extend its reach and influence to further improve the effectiveness of local safeguarding arrangements

TRAINING BY THE CHSCB COMMUNITY PARTNERSHIP ADVISOR 2014/15

Voluntary Sector	118 participants
Parents	53 participants
Hackney Homes	94 participants
Taxi Firms	4 firms received training on safeguarding and the management of allegations against staff
Early years & Education	3 primary, 3 Secondary, 7 Children Centres received bespoke FGM training

EVALUATION AND IMPACT OF TRAINING

Working Together 2015 requires that LSCBs monitor and evaluate the effectiveness of training, including multi-agency training, for all professionals in the area. The CHSCB has in place a **Training Evaluation and Analysis Framework** to help it do this. Through this process, the CHSCB is able to review the quality of training and form a view on the difference it is making towards improved outcomes for children and young people.

The CHSCB recognises that training, however, is only one way in which practitioners develop expertise; with learning often being the result of a complex set of experiences that include the quality of line management, effective and reflective supervision, peer support and self-learning. As such, it will be invariably challenging to judge a direct correlation between the training someone has received and its sole impact on practitioner safeguarding skills and improved outcomes for children and young people.

Despite these limitations, the CHSCB remains confident that the training programme continues to strengthen the partnership response to safeguarding; evidenced through

the good practice seen in audits, direct front-line practice observations, the scrutiny of partnership performance data, feedback from children and families and comments from training participants themselves. A range of participant evaluations are set out in this report with the full assessment of the quantity, quality and impact of training being available in the **CHSCB Multi-Agency Training Annual Report for 2014/15**.

SAME-DAY EVALUATIONS

All training participants are asked to complete a same day course evaluation form. Of the 1385 places taken up in 2014/15, participants completed total of 1252 forms (90% completion rate). These same-day evaluations provide an immediate assessment on the courses delivered with questions covering areas such as content, style, venue and the quality the trainer. Importantly, the evaluation also asks participants to consider whether or not the training will impact on their ability to safeguard children and young people. The significant majority of those attending CHSCB training over 2014/15 considered that it would.

SAME-DAY EVALUATIONS: IMPACT OF CHSCB TRAINING ON THE ABILITY TO SAFEGUARD CHILDREN?

Unknown: 6% (76) / Poor: 1% (9) / Fair: 3% (34) / Good: 14% (177) / Very Good: 39% (493) / Excellent: 37 % (463)

PARTICIPANT FEEDBACK



"...I will use the understanding gained to support the risk assessment aspect of my role. I will feel more confident in discussing issues around parental substance misuse." **Impact of parental substance misuse on children & young people**



"It will help me to work in a more child focussed way to have more awareness on the impact on the child. Also it will help me to challenge other professionals if need be, question more and not be afraid to do so." **Impact of DV on children and young people**



"Excellent trainers, extremely knowledgeable with a wealth of experience." **Safeguarding disabled children**



"Excellent course, really relevant information, brilliantly delivered. There was an interesting mix of role play/interactive exercises and group exercises which catered for all learning styles." **Working with sexually exploited young women – tools for practitioners**



“The Hackney Wellbeing Framework and Escalation policy will assist me in my liaison with CYPS. It will enable me to have more understanding about making a referral if I come across visit that alarm bells could ring”
CPA training to Hackney Homes

POST COURSE EVALUATIONS

As part of a more focussed approach to assessing the impact of training, the CHSCB also introduced a schedule of proportionate post course evaluations to further test the impact and influence on outcomes for children and young people. These evaluations took place a number of months after the training had been received, with participants being asked to provide narrative evidence to support their response.

Over 2014/15, 20 learning sessions were targeted based on the training priorities for this year. The overall response rate was 11%; affected by a number of participants having left their employment. However, of the 48 respondents who did complete the evaluation, 87% stated that the training had influenced their practice with regards to safeguarding children and young people.

PARTICIPANT FEEDBACK



“It has made me more aware of the extent on online grooming threats to young people and which websites they access that are used by predators to groom or make inappropriate sexual advances towards young people”. **Understanding technology & the internet in the context of sex offending and child protection**



“I think more carefully about how abuse can affect children in their adult life. It helps in my own assessments of clients and family”. **Impact of neglect & emotional abuse on the development of children & young People**



“I feel more confident to safeguard young people and it has improved my joint up approach working with other professionals” **Safeguarding Children, a shared responsibility**



“It helped me to support ongoing work.....as much as anything else it reassured me that we were taking the right approach”. **Introduction to CSE in gangs and groups**

PRIORITIES GOING FORWARD

- To strengthen the training evaluation and measuring of impact through engagement of managers in the process.
- To review the training provided into schools
- Strengthen oversight on single agency training
- To identify other training models (such as e-learning/lunchtime learning)
- Increasing the numbers of places taken up by City agencies.

ADDITIONAL SAFEGUARDING TRAINING IN THE CITY & HACKNEY 2014/15

Numerous single agency training and development programmes further supported the focus on safeguarding children over 2014/15:

- City of London Children & Families Team holding a workshop following a strengths based learning review.
- Continuation of the Knowledge Transfer Programme in the City, including a 3-year research programme into the implementation and impact of the Solihull approach.
- Hackney Council for Voluntary Services has facilitated the attendance of 522 sessional workers; parents and volunteers to better understand safeguarding in the context of their work and community by attendance at training events, learning programmes and policy influencing sessions.
- 820 school staff received safeguarding training delivered by HLT's Safeguarding in Education Team.
- 390 staff in Early Years setting received safeguarding training from HLT's Safeguarding in Education Team
- 3 Designated Safeguarding leads forums held providing training on FGM, LADO awareness, the Police Child Abuse Investigation Team, CME, PREVENT WRAP training, FAST and the CHSCB interface with schools.
- 96.35% (3198) of staff at The East London NHS Foundation Trust attended mandatory Level 1 safeguarding children training.
- Hackney Children's Social Care delivered 82 sessions over 94 days. 942 staff attended this training.
- The National Probation Service delivered a range of safeguarding children workshops following the national inspection of Probation Trusts in 2014
- Uptake of mandatory training provided by the Homerton University Hospital NHS Trust (Level One - 94%, Level Two - 74%, Level Three - 70%, Level Four - 100%).



Priorities for next year & beyond



“Children and young people in the City of London and Hackney are seen, heard and helped; they are effectively safeguarded, properly supported and their lives improved by everyone working together.” (CHSCB Vision 2015)

Our strategic intent in making this revised vision a reality is set out in our **Business Plan for 2015/17**, developed following a process of robust partnership dialogue across the City of London and Hackney in December 2014.



PRIORITY 1: THE LOCAL SAFEGUARDING CONTEXT

Outcome: The CHSCB and partner agencies focus on what really matters in local areas – context is key. Children and young people at risk of specific vulnerabilities in the City of London and in the London Borough of Hackney are seen, heard and helped. They are effectively protected from harm by robust and coordinated multi- agency intervention and support.

Actions: Partners will deliver comprehensive strategies that tackle the identified safeguarding priorities of the City of London and the London Borough of Hackney; and evaluate their impact on children and young people.

- **Neglect**
- **Domestic Violence**
- **Child Sexual Exploitation**
- **Children Missing from Care, Home and Education**
- **Preventing Radicalisation**
- **Female Genital Mutilation**



PRIORITY 2: EARLY HELP & EARLY INTERVENTION

Outcome: Children and young people receive effective early help and appropriate interventions when needs are identified and/or problems arise.

Actions: Partners will further evaluate the effectiveness of early help arrangements across both the City of London and the London Borough of Hackney



PRIORITY 3: STRONG LEADERSHIP & STRONG PARTNERSHIP

Outcome: The CHSCB leads the safeguarding agenda, challenges the work of partner organisations, and commits to an approach that learns lessons, embeds good practice and is continually influenced by children, young people and their families. A key focus within Priority 3 is how the CHSCB and partner agencies commit to Making the Invisible Visible. This reflects the importance that the CHSCB and partner agencies apply to ALL children and young people living in the City of London and Hackney being seen, heard and helped.

Actions: The CHSCB and partners will successfully deliver against the Business Plan and associated work plans.

- Continue to strengthen the governance interface between the CHSCB and other key strategic forums and Chairs.
- Maintain the CHSCB Learning & Improvement Framework; scrutinise & challenge performance; identify, disseminate and embed lessons; engage with children, young people and families and evaluate the impact on outcomes.
- To communicate and raise awareness about safeguarding to individuals, organisations and communities.



What you need to know



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FOLLOW US ON TWITTER [@LSCB_CHSCB](https://twitter.com/LSCB_CHSCB)

CHILDREN AND YOUNG PEOPLE

- Nothing is more important than making sure you are safe and well cared for.
- As adults, sometimes we think we always know best...we don't..... and that's why your voice is so important.
- This is about you and we want to know more about how you think children and young people can be better protected.
- We want to talk to you more often and we want to know the best way to do this..... please help.
- If you are worried about your own safety or that of a friend, speak to a professional you trust or speak to ChildLine on **0800 1111**



PARENTS AND CARERS

- Public agencies are there to support you and prevent any problems you are having getting worse...Don't be afraid to ask for help.
- Tell us what works and what doesn't when professionals are trying to help you and your children.
- Make sure you know about the best way to protect your child and take time to understand some of the risks they can face.
- You'll never get ahead of your child when it comes to understanding social media and IT – but make yourself aware of the risks that children and young people can face.

THE COMMUNITY

- You are in the best place to look out for children and young people and to raise the alarm if something is going wrong for them.
- We all share responsibility for protecting children. Don't turn a blind eye.
If you see something, say something.
- If you live in Hackney, call the **First Access Screening Team (FAST)** on **0208 356 5500**
- If you live in the City, call the **Children & Families Team** on **0207 332 3621**
- You can also call the **NSPCC Child Protection helpline** on **0808 800 5000**



FRONT-LINE STAFF AND VOLUNTEERS WORKING WITH CHILDREN OR ADULTS

- Make children and young people are seen, heard and helped... whatever your role.
- Your professional judgement is what ultimately makes a difference and you must invest in developing the knowledge, skills and experiences needed to effectively safeguard children and young people. Attend all training required for your role.
- Be familiar with, and use when necessary, the Hackney Wellbeing Framework and/or The City of London Early Intervention Framework to ensure an appropriate response to safeguarding children and young people.
- Understand the importance of talking with colleagues and don't be afraid to share information. If in doubt, speak to your manager.
- Escalate your concerns if you do not believe a child or young person is being safeguarded. This is non- negotiable.
- Use your representative on the CHSCB to make sure that your voice and that of the children and young people you work with are heard.
- If your work is mainly with adults, make sure you consider the needs of any children if those adults are parents.

LOCAL POLITICIANS

- You are leaders in your local area. Do not underestimate the importance of your role in advocating for the most vulnerable children and making sure everyone takes their safeguarding responsibilities seriously.
- Councillors Anntoinette Bramble (Hackney) and Dhruv Patel (The City of London) are the lead members for Children's Services and have a key role in children's safeguarding – so does every other councillor.
- You can be the eyes and ears of vulnerable children and families... Keep the protection of children at the front of your mind.

CHIEF EXECUTIVES AND DIRECTORS

- You set the tone for the culture of your organization. When you talk, people listen – talk about children and young people.
- Your leadership is vital if children and young people are to be safeguarded.
- Understand the capability and capacity of your front-line services to protect children and young people - make sure both are robust.
- Ensure your workforce attend relevant CHSCB training courses and learning events.
- Ensure your agency contributes to the work of CHSCB and give this the highest priority. Be Section 11 compliant.
- Advise the CHSCB of any organisational restructures and how these might affect



your capacity to safeguard children and young people.

THE POLICE

- Robustly pursue offenders and disrupt their attempts to abuse children.
- Ensure officers and police staff have the opportunity to train with their colleagues in partner agencies.
- Ensure that the voices of all child victims are heard, particularly in relation to listening to evidence where children disclose abuse.
- Ensure a strong focus on MAPPA and MARAC arrangements.

HEAD TEACHERS AND GOVERNORS OF SCHOOLS

- Ensure that your school / academy/ educational establishment is compliant with 'Keeping Children Safe in Education' (DfE, 2015).
- You see children more than any other profession and develop some of the most meaningful relationships with them.
- Keep engaged with the safeguarding process and continue to identify children who

need early help and protection.

CLINICAL COMMISSIONING GROUPS

- CCGs in the health service have a key role in scrutinising the governance and planning across a range of organisations.
- Discharge your safeguarding duties effectively and ensure that services are commissioned for the most vulnerable children.

THE LOCAL MEDIA

- Safeguarding children and young people is a tough job.
- Communicating the message that safeguarding is everyone's responsibility is crucial - you can help do this positively.
- Hundreds of children and young people are effectively safeguarded every year across the City and Hackney - **THIS IS NEWS!**





The City & Hackney Safeguarding Children Board 2014/15



Independent Chair

Jim Gamble



CHSCB Team

Rory McCallum

Angela Bent

Sandra Reid

Leethen Bartholomew

John Robinson

Kerry Littleford

Rosie Amies

Senior Professional Advisor

Board Manager

Business and Performance Manager

Community Partnership Advisor

Training & Development Co-ordinator

CDOP Co-ordinator

Board Co-ordinator



Participant Observers

Cllr Antoinette Bramble

Cllr Dhruv Patel

Lead Member for Children's Services, London Borough Hackney

Lead Member for Children's Services, City of London Corporation



Board Members

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Clare Highton

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Mary Lee

Karen Miller

Dawn Jarvis

Shirley Green and Sally Glen

Community and Children's Services City of London, Director

Community and Children's Services- City of London, Assistant Director People

City of London Police, Detective Chief Superintendent

CDOP coordinator

Hackney Children and Young People's Services, Corporate Director

Hackney Children's Social Care, Assistant Director

Hackney Children and Young People's Services, Head of Service

Hackney Learning Trust, Head

Hackney Learning Trust, Director of Education

Haggerston School, Headteacher

Executive Headteacher, Sebright School

Metropolitan Police Service - Hackney Borough, Borough Commander

Metropolitan Police Service - Hackney Borough, Detective Chief Inspector

Child Abuse Investigation Team, Detective Chief Inspector

Hackney Homes, Chief Executive

Director of Public Health

Hackney Council for Voluntary Services, Head of Safeguarding, Children & Families

Hackney Revenues and Benefits, Assistant Director

CAFCASS, Senior Service Manager

East London NHS Foundation Trust, Director of Nursing

East London NHS Foundation Trust, Director for Specialist Services

Hackney Health & Community Services, Corporate Director

Homerton University Hospital NHS Foundation Trust, Chief Executive

National Probation Service, Acting Head of Hackney, City of London and Tower Hamlets

London Community Rehabilitation Company, Senior Manager

NHS City and Hackney Clinical Commissioning Group, Named GP for Child Protection

NHS City and Hackney Clinical Commissioning Group, Chair

NHS City and Hackney Clinical Commissioning Group, Designated Doctor

NHS City and Hackney Clinical Commissioning Group, Designated Nurse

Whittington Health, Head of Safeguarding

NHS City & Hackney Clinical Commissioning Group, Programme Director – Children & Maternity

Lay Members



City and Hackney Safeguarding Children Board

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