



Southwark Safeguarding Children Board

Annual Report 2013 - 2014

'Preventative services can do more to reduce abuse and neglect than reactive services'
Munro review of child protection services

Any comments on this report can be made to the independent chair Michael O'Connor on SSCB@southwark.gov.uk

Contents

1. **Foreword from the Independent Chair including vision and priorities for 2014/5**
 2. **Purpose of the Southwark Safeguarding Children Board (SSCB)**
 3. **Local Profile**
 4. **Assessing the effectiveness of help being provided**
 - 4.1 Overall assessment
 - 4.2 Context
 - 4.3 Early Help
 - 4.4 The Multi-Agency Safeguarding Hub (MASH)
 - 4.5 SSCB work on neglect
 - 4.6 Child protection
 - 4.7 Looked after children
 - 4.8 Child Sexual Exploitation
 - 4.9 Health agencies and safeguarding
 - 4.10 Learning and development
 5. **SSCB Governance arrangements and activity**
 - 5.1 Summary
 - 5.2 Participation of children and young people in with work of the SSCB
 - 5.3 SSCB governance and membership
 - 5.4 SSCB Performance Dashboard
 - 5.5 Links with other key strategic groups
 - 5.6 SSCB Budget
 - 5.7 Work of the SSCB sub-groups
 - 5.8 Section 11 Audit
- Appendices**
- Appendix 1: SSCB Organisation Chart
- Appendix 2: SSCB membership
- Appendix 3: Approved Safeguarding Children’s Courses delivered through My Learning Source – 2013 - 2014

1. Foreword from the independent chair

Introduction

This is my first Annual Report as the Chair of Southwark Safeguarding Children Board. (SSCB). It has been a busy and productive year and this is reflected in this annual report for 2013/4. My introduction provides a summary and gives me an opportunity to highlight particular achievements and future priorities.

Working Together sets out the responsibilities of Safeguarding Children Boards and outlines the content of annual reports. The 2013/4 annual report provides an overview of the effectiveness of safeguarding children and young people in Southwark including highlighting key achievements and identifying areas for development.

Overview of Safeguarding Practice

Southwark has a diverse population of children and young people with comparatively high levels of deprivation and this impacts on needs and outcomes. Section 4 assesses the effectiveness of the help being provided starting with a summary of positives and areas for development. In 2013/14 the number of repeat referrals to social care and the number of children who were found to be at risk of harm or had been harmed for a second or subsequent time reduced. There was also a reduction in the number of child protection plans in place for over two years. These are indications of improvements in early help and safeguarding practice. In Southwark, we are keen to triangulate findings which means we do not rely on one evidence source to assess impact. We use a range of different methods. Early Help audits and robust case tracking also indicate some good early help practice. The annual report also highlights positive feedback from parents on their experience of Children's Centres and from schools on their experience of the Council's Early Help Service.

Significant changes took place in 2013/14 in social care under the auspices of the borough's *Social Work Matters* transformation programme. The SSCB scrutinised the plans for implementing Social Work Matters and will continue to monitor the impact on vulnerable children and families. This is a whole system transformation programme which is changing the way social work is delivered in practice. The SSCB is pleased that Southwark is responding to the recommendations of the Munro review.

The Southwark Multi-Agency Safeguarding Hub (MASH) became operational in September. The MASH reflects both the complexity and commitment of the safeguarding landscape in Southwark with 14 agencies actively involved in assessing the needs of vulnerable families. In Southwark we are also keen to use external and independent assessors to monitor and evaluate practice and impact. An external review of the MASH took place in March 2014. This found evidence of effective case tracking, good management oversight of Section 47 child protection investigations and evidence of child centred practice. Improvements identified included better analysis of performance information. The SSCB will continue to scrutinise the MASH.

Against this backdrop of changes to process and organisational structure, there has been a drive to improve practice through the development of systematically trained social work practice groups and the implementation of Signs of Safety. This is a strengths-based approach to working with families. Audits undertaken in 2013/14 illustrated that Signs of Safety is proving to be a useful tool for engaging parents and supporting change.

Performance with regard to outcomes for Looked After Children (LAC) and care leavers were also strong and I am pleased to note that partners' ambitions and aspirations for these cohorts continue to rise.

During 2013/14 the SSCB focussed on the issue of child neglect. Neglect was the subject of the Board's annual conference and multi-agency audits on neglect also took place. This work will continue in 2014/5, with greater scrutiny of data and local intelligence. There is firm agreement to develop and implement a new model of early intervention and prevention which brings together a range of services from social care to youth and health services to create a co-ordinated model of intervention. The work to achieve this has started and this is a priority for the Board given the significant impact of neglect on Southwark's children and young people .

2013/14 was also a year in which the Board intensified its focus on understanding and tackling Child Sexual Exploitation (CSE) in Southwark. The establishment of a multi-agency subgroup as part of the SSCB to develop a strong local strategy is an important step forward, and as Chair I will be keen to ensure during 2014/15 local arrangements and protocols are making a positive impact. Ensuring that Southwark embeds pan-London protocols for tackling CSE will also be imperative.

Priorities going forward

Neglect and CSE will continue to be priority areas for the Board in this forthcoming year, alongside early help. During the year I called upon partners to improve local arrangements for early help through the realignment of services, to ensure that the right services are provided promptly as soon as needed by children, young people and their families. The Board will continue to scrutinise the impact of early help services.

Along with a continued focus on core child protection the Board will also be focusing on placement stability, private fostering and referral and assessment.

Identifying and embedding learning is a key responsibility of the Safeguarding Board and I look forward in 2014/15 to strengthening our approach to the delivery, implementation and evaluation of learning. This applies not just to Serious Case Reviews and Management Reviews, but also to the multi-agency audits co-ordinated by the Board.

As ever, the good governance of the Board is critical to enabling its success, and governance arrangements are periodically reviewed. In particular, I note processes in place to improve the Board's oversight and management of performance across agencies, and efforts to pay much closer and more direct attention to the voices of children and young people in our work.

I commend this report to all partner members on the Board and look forward to a busy, successful year in 2014/15.



Michael O'Connor
Independent Chair

Vision

We believe all children living in or visiting the borough have the right to safety and being protected from harm.. We will strive to work together across all agencies to protect children and young people by providing the highest quality services and encourage children to grow and develop to their full potential achieving the best possible outcomes.

Responsibilities

The SSCB will ensure that all agencies are aware of and undertake their key safeguarding responsibilities:

- All those who work with children and young people know what to do if they are concerns about possible harm
- When concerns about a child's welfare or concerns about harm are reported action is taken quickly and the right support is provided at the right time. This covers the spectrum from early help when issues first arise through to emergency action needed to keep children and young people safe.
- Agencies who provide services for children and young people ensure they are safe and monitor service quality and impact.

Key Strategic Questions for LSCBs

NB. This Annual Report responds to these key questions

- **Is the help provided effective?** How do we know our interventions are making a positive difference? How do we know all agencies are doing everything they can to make sure and children and young people are safe? This includes early help.
- **Are all partner agencies meeting their statutory responsibilities** (as set out in Working Together chapter 2)?
- **Do all partner agencies quality assure practice** and is there evidence of learning and improving practice? This includes learning from joint multi-agency audits.
- **Is training on early help and safeguarding monitored and evaluated** and is there evidence of training impacting on practice? This includes multi-agency training.

2014-15 SSCB Priorities:

Thematic priorities

- Families Matter
- CSE
- Neglect

Operational priorities

- MASH, access & assessment
- Core CP Work
- LAC
- Private fostering

Quality assurance and Performance Management Priorities

Governance priorities

SSCB Priorities 2014/15: Please note a separate business plan is available which provides detail on plans for implementing the priorities noted below.

Thematic priorities

- 1. Families Matter** – (Southwark’s response on early help)
 - Better co-ordination of all prevention and early intervention services including streamline pathways.
 - Further work will be taking place in 2014/5 on neglect including analysing the impact of the action taken in 2013/4 and a specific JSNA on neglect being led by Public Health
- 2. Child Sexual Exploitation**
 - Development of multi-agency CSE strategy with action plan and clear success criteria
- 3. Neglect**
 - Build on 2013/14 work on neglect, interrogate neglect data and develop approach to tackling neglect in families

Operational priorities

- 4. MASH, initial access and assessment**
 - Improve timeliness including timeliness of assessments and initial child protection conferences
 - Implement and embed a multi-agency approach to single assessment including finalising the Single Assessment protocol
 - Review of the multi-agency thresholds document to further reduce inappropriate referrals to the MASH.
- 5. Child Protection**
 - Effective child protection processes
 - Outcome focused child protection plans
- 6. Looked After Children**
 - Further analysis on current high LAC rate
 - Improve LAC placements: stability and distance from home
 - More effective oversight of safeguarding of LAC
- 7. Private Fostering**
 - Continue to increase awareness of Private Fostering and monitor impact of actions being taken on Private Fostering

Quality Assurance and Performance Management priorities

- 8. Quality assurance**
 - Improvement in SSCB engagement with CYP
 - Continue to monitor roll-out of changes associated with Social Work Matters and develop plans for monitoring impact in 2014/15
 - Ensure there is a programme of multi-agency audits
 - Continue to monitor LADO activity
 - Maintain and develop Learning & Improvement Framework in relation to audits and QA with strengthened ‘learning loop’
- 9. Performance Management**
 - Embed rigorous performance and QA reporting to the Board including further development of the performance dashboard, with greater data input from all agencies
 - Ensure shared multi-agency understanding of strengths and weakness of frontline safeguarding practice through more critical analysis of practice and data
 - Build network of designated safeguarding lead persons within agencies

Governance Priorities

- Plan dates and schedule for 2013/4 and 2014/5 Annual Reports
- Plan and deliver 2014/5 Section 11 Audit
- Agree financial contributions for 2015/6
- Monitor delivery of 2014/5 work plan and develop 2015/6 work plan
- Plan succession with and for lay members in 2015
- Organise and run Annual Safeguarding Conference
- Hold 3 Safeguarding Partnership Group meetings
- Hold 6 SSCB meetings
- Develop and monitor delivery of sub-group work plans.

2. Purpose of the Southwark Safeguarding Children Board

Working Together 2013 sets out the statutory responsibility of Local Safeguarding Children Boards (LSCB) and of partner agencies.

As a minimum LSCBs are required to:

- Assess the effectiveness of the help being provided to children and families, including early help. This is covered in Section 4.
- Assess whether LSCB partners are fulfilling their statutory obligations as set out in Working Together chapter 2. The Annual Section 11 audit is used to provide an overall assessment on compliance with statutory responsibilities. Information on the 2013/4 Section 11 audit is provided in section 5.6
- Quality assure practice, including through joint audits of case files involving practitioners and identifying lessons learned. Section 4.9 covers learning from reviews and case audits.
- Monitor and evaluate the effectiveness of training, including multi-agency training, to safeguard and promote the welfare of children. Section 4.9 also covers training.

Working Together also sets out requirements regarding Annual Reports.

3. Local profile

Southwark is a London borough bordering the City of London and the London borough of Tower Hamlets to the north with the River Thames forming the boundary. To the west Southwark is bordered by the London Borough of Lambeth and to the south by the London Borough of Lewisham.

According to the 2001 census Southwark had a population of 288,283

29% of households are owner–occupiers, 44% are social rented (including a significant proportion of council rented properties). Significant redevelopment is taking place particularly in older estates, for example. Aylesbury and Heygate. Deprivation is concentrated in the northern and central parts of the borough and large health inequalities exist between different geographical wards, as evidenced in the Joint Strategic Needs Assessment (JSNA).

Some key facts about children and young people who live in Southwark are included below.

Children and Young People in Southwark – Some Key Facts

- The 0 to 18 years population comprise a fifth (21%) of all residents in Southwark. This is in line with the GLA 2013 inner London average.
- The latest figures for children living in low-income families, published by HMRC in 2014, show that Southwark has the 18th highest proportion of children in low income families in England
- 30% of resident school-aged children in Southwark are White British, 24% Black African, 19% Black Other, 13% Asian, 8% Mixed and 6% Black Caribbean (GLA custom age range creator).
- 54% of Southwark’s children and young people identify their faith as Christian, 13% as Muslim, 1% Buddhist, 1% Hindu and 21% identify themselves as agnostic (Census 2011)
- 45% of primary school pupils in Southwark are known or believed to have a first language that isn't English.
- Children from state schools in Southwark speak at least 53 different languages when at home. (2008 data, GLA).
- 64% of all 0-24 year olds resident in Southwark were born in the UK. This compares with 80% in London and 91% nationally. Southwark has high numbers of residents aged 0-24 born in Europe (11%), Africa (10%), Middle East and Asia (10%) and the Americas and the Caribbean (5%) (Census 2011).
- 29.9% of state secondary pupils in Southwark were eligible for and claiming free school meals in January 2014, the 12th highest proportion in England.
- Southwark also had a higher proportion of state primary school pupils eligible for and claiming free school meals than the English average. 21.9% compared to 17%.

4. Assessing the effectiveness of help being provided

4.1 Overall assessment of effectiveness

This section provides information on the effectiveness of help being provided. It includes the following sections:

- 4.2 Context
- 4.3 Early Help
- 4.4 The Multi-Agency Safeguarding Hub (MASH)
- 4.5 SSCB work on Neglect
- 4.6 Child Protection
- 4.7 Looked after children
- 4.8 Child Sexual Exploitation
- 4.9 Health agencies and safeguarding
- 4.10 Learning and development

A summary of 2013/4 overall positives and areas for development is included in the table below:

Positives	Priority areas for improvement
<ul style="list-style-type: none"> • A reduction in the percentage of cases where there was a repeat referral to social care. • A reduction in the number of children who were found to be at risk of harm or had been harmed for a second or subsequent time. • A reduction in the percentage of child protection plans in place for 2 years or more. • Multi-agency deep-dive analysis of need, performance and local intelligence on neglect. • Multi-agency safeguarding hub (MASH) going live. • Positive feedback on work of the Early Help Locality Teams. • The development of Social Work Matters change programme. • Continued embedding of Signs of Safety as a framework for social work practice. • Revised Working Together leading to a refresh of many areas of partnership working e.g. single assessment, learning and improvement framework, threshold document • Work undertaken to develop a group of young people linked to the SSCB for engagement and consultation 	<ul style="list-style-type: none"> • Improve the timeliness of assessments. • Improve the percentage of initial child protection conferences which take place within 15 days. • Further analysis on number of LAC as the LAC rate per 10,000 is high • Improve placement stability and reduce number of LAC living more than 20 miles away from Southwark. • Implement and embed a multi-agency approach to single assessment. • Build on the early help strengths to reconfigure local early help provision to enhance multi-agency working, streamline pathways and improve outcomes for all children. • Development of a multi-agency Child Sexual Exploitation Strategy with an action plan with clear success criteria. • To make sure there is a shared multi-agency understanding of the strengths and weaknesses of front-line safeguarding practice across all partner agencies. • Continue to raise awareness on Private Fostering and undertake further work to understand why notifications are reducing.

The table below summarises some key social care activity for 2013/4. It is interesting to note that in Southwark there is a comparatively high rate of children with a child protection plan and children who are looked after. This contrasts with a lower comparative rate of referrals and assessments. There could be many reasons for this. For example, it might be the case that Southwark is quickly and effectively assessing children's needs and acting where there is significant risk. Or it could be that social care thresholds for a children in need assessment and plan are high and children and young people wait too long for a social care responses. During 2013/4 the SSCB will monitor activity levels closely and will triangulate this data using other methods for example audits, peer challenge and observations.

Indicator	2011/12	2012/13	2013/14	Statistical neighbour average 2012/13	London average 2012/13	English average 2012/13
Rate of referrals completed in the year per 10,000 under 18	616.5	580.2	518.0	577.8	458.5	520.7
Rate of children in need at end of period	509.8	557.5	476.8	497.8	368.4	332.2
Rate of core assessments per 10,000 under 18	218.0	221.2	150.7	286.1	226	204.2
Rate per CPP plan at end of period	46.2	46.1	53.5	42.5	34.8	37.9
Children looked after rate per 10,000	93.5	95.7	90.0	72	55	60

4.2 Context

4.2.1 SSCB and the Children's Plan priorities.

Southwark's Children and Young People's Plan 2013 to 2016 sets out the framework for work with children and young people in Southwark. The Plan has 3 priorities as described below.

- Best Start - Children and young people getting the right services at the right time.
- Safety and Stability – Children and young people receiving purposeful support which brings safe, lasting and positive change.
- Choice and Control for children and young people with a special educational need or disability and their families through access to a local offer of seamless personalised support.

The SSCB works closely with the Children's Trust. In 2013/14 the SSCB led work on neglect and early help which linked to the Children's Trust priorities noted above.

4.2.2 Social Work Matters

In September 2013, after extensive consultation with social care staff and with partners agencies Southwark Social Care published *Social Work Matters* which set out a vision for social work in Southwark. Social Work Matters is a whole system transformation programme. It builds on the good social work practice already taking in place in Southwark, developing a more reflective and systemic approach through creating Practice Groups. A robust project management approach has been used to manage the change process incrementally.

During 2013/4 the SSCB scrutinised Social Work Matters plans and will continue to monitor the roll-out of the changes and develop plans for monitoring impact in 2014/5. It is intended that the impact of the changes will be externally evaluated.

4.2.3 Signs of Safety

Signs of Safety provides a framework for social work practice and for partner agencies. It is a strengths-based approach to working with families, understanding cases and planning for children's safety and welfare. It involves child and parent focused approach to understanding issues and working out what works well and what needs to change. This helps all agencies to be child and family centred.

Signs of Safety is used in Southwark in Child Protection Conferences but also in day to day practice by social workers assessing risk and in reflective supervision. Audits undertaken in 2013/4 indicated that Signs of Safety is assisting with:

- Increased engagement and satisfaction from parents
- Better identification of risk
- More transparent and focused child protection planning.
- Increased confidence of social workers and other professionals

In 2014, Ofsted's Thematic Inspection found that the Signs of Safety approach had been widely embedded in practice. In 2014/5 Signs of Safety will be used to further develop outcome-focused care planning.

4.3 Early Help

Some key early help facts for 2013/4 are noted below:

Early Help Key Facts 2013/4

- The latest DfE figures of rates of pupil absence for Southwark schools (primary, secondary and special schools including academies and free schools) show that overall absence from schools in Southwark at 4.8% is now lower than the national average and on a par with the London average. Rates of persistent absence have also declined by 0.6%.
- Primary permanent exclusions remain at ZERO for the 7th consecutive year and fixed term exclusions are declining with over half of primary schools reporting ZERO fixed term exclusions.
- Secondary permanent exclusions are similarly low with an emphasis placed on managed moves as part of the In-Year Fair Access Strategy.
- There was an increase in the number of Common Assessments (CAFs) completed from 2,276 in 2012/3 to 2,830 in 2013/4
- There was an increase in referrals to Early Help – 2,144 during 2013/14 in comparison to 1,664 during 2012/13. There was, meanwhile, a decrease in referrals to Children’s Social Care from 3,450 in 2012/3 to 3,165 in 2013/14. Work is being undertaken to understand these figures and the relationship between increased Early Help referrals and lower referrals into Social Care.
- 136 cases were logged as ‘step downs’ from children’s social care to early help.
- Over 1,000 children have benefitted from a place in early years provision as part of the National 2 Year Old Offer.
- The take up of free early learning by 3 and 4 year olds has improved from 83% in 2012 to 88% in 2013 narrowing the gap with Inner London and national take up.
- The highest number of referrals for the Early Help Service were from schools (70%) with nearly half of referrals for children under 5 (45%), a further 43% in the primary school age range (5 to 11) and 12% in the secondary school age range(12 -19).
- A survey of parents using Children’s Centres was undertaken in June 2013, with 2,500 respondents. Findings included:
 - 97% of parents judged their overall experience of Children’s Centres as Good or Excellent.
 - 90% reported that contact with Children’s Centre had made them a more confident parent.
 - 94% that it improved their understanding of how their children learn and develop.

The SSCB scrutinised early help during 2013/4 and the Independent Chair challenged all agencies to consider whether services needed to be re-modelled in order to further improve performance and outcomes. This work – now called Families Matter – is being progressed in 2014/5. Families Matter will build on the strengths of the Council’s Early Help Service and of the work led by the Family Focus Team which is part of the local response to the national Troubled Families initiative. The aim is to develop a better co-ordinated response to the needs of vulnerable children and their families. Further information on Early Help and the Southwark response to Troubled Families can be found below.

Southwark Early Help Service

Comments from parents on the early helped received:

- *'I had postnatal depression.... this centre made me feel safe and welcomed and was the only real reason I left the house'*
- *'My eldest came here and had Autism and was mute. Staff here helped him to talk and communicate'*
- *'By coming here our very shy son learns how to interact with other children and feel more confident. A great place to play at weekends with other dads'.*

During 2013/14 the Early Help Service continued to develop and embed multi-professional and multi-agency practice to support vulnerable children and their families. An external mock inspection of the service resulted in a judgment of 'at least good' recognising that the service is well led and well regarded by service users who value the support of knowledgeable teams of professionals.

The Early Help Teams focus strongly on the impact that their work is having on children and families and a monitoring cycle has been developed which enables progress to be analysed. The quality of casework is audited on a regular basis taking into account responsiveness, how well delivery plans are matched to need and how drift, delay and avoidance are tackled. The analysis of case work impact is rated (red, amber, green) and a consistent pattern is emerging where there is swift movement from red to amber and then a slowing down as support is consolidated ultimately resulting in positive outcomes for the majority of cases. This approach to casework is a powerful management tool as the pattern of the progress of individual cases is visually very clear and enables appropriate questions to be asked and timely decisions to be made.

Further evidence of impact is captured through qualitative reports from service users.

Positive response from schools have included:

- *'I feel the Early Help model is working for us.....; not least because of the very clear structure and names and contact details for the various roles. The opportunity to meet with our early help team leader and our educational welfare officer on a face to face basis in school is invaluable. The history of attendance at our school has not been good but, with the rigorous support of our educational welfare officer we are finally turning the tide.....Furthermore, whenever we have phoned for advice or signposting, we have received the necessary information'*
- *'....we have been really pleased with the service, have met a large number of the team who have responded to our invites to come and support our work in school, and we feel pleased that all CAFs are now resulting in something happening. Well done you all for pulling this together it does feel much more connected and that there is a support net for those families who don't quite meet (social care) thresholds.'*

Southwark's response to the national Troubled Families initiative is also part of the early help offer as many of the families who meeting the national criteria do not meet social care thresholds for receiving and assessment and services. Information on Troubled Families can be found below.

Troubled Families

In 2013/4 there was a coordinated offer of family focused support for families who met the national criteria. The Family Focus Plus team includes family therapy, adult mental health, education welfare and a nurse practitioner. The team also draws on a virtual professional network including youth offending, employment advisers and early help teams as well as bespoke provision commissioned from the local voluntary sector including Family Action and St Giles Trust.

Through the programme, agencies are building an infrastructure of effective support, which is actively reducing risk by providing an opportunity to work differently with families to ensure outcomes improve from the point at which they first engage with local services. An Ofsted thematic inspection of the Youth Offending Team's involvement found strong practice, a coordinated strategic approach, and highly positive service user feedback. Although recognising that further work is needed to ensure outcomes are always specific and focused, the inspector praised the flexible, comprehensive interventions and whole-family approach employed, as well as the high profile of health involvement and the strong working relationship between the youth offending and looked after children services.

4.4 The Multi-Agency Safeguarding Hub (MASH)

Southwark's MASH became fully operational on 23rd September 2013. The MASH involves 14 agencies/services. This will increase in 2014/5.

Five core agencies are involved in the MASH:

MASH core agencies
Social Care, Police, Education, Health and Housing.

In addition there is involvement from another 9 agencies/services:

Other agencies/services involved with the MASH
Probation, Early Help, Specialist Family Focus, Mental Health, YOS, Adult Social Care, Pre-Birth Service, DV Victim Support, Hidden Harm and Substance Misuse.

Many agencies are co-located in the MASH while others are virtual participants. A bespoke referral and information management system enables real-time tracking of individual contacts as they progress through the MASH according to their RAG status. A Duty Social Work Manager oversees the MASH process and makes decisions regarding next steps.

An external review of initial access arrangements including the MASH took place in March 2014. The table below summarises the positive findings and areas for development.

External review of initial access arrangements including the MASH	
Positives	Areas for Development
<ul style="list-style-type: none"> • Evidence of child centred practice • Morale good • Caseloads manageable • Supervision is regular • Pathways are clear • Good recording and decision making from managers on S47s. • MAISy is an effective tracking tool 	<ul style="list-style-type: none"> • Improved performance management and analysis of data • More focus on outcomes • More analysis on reasons for re-referrals • Supervision policy to include frequency of supervision • More involvement of CAMHS in the MASH and improved participation of Housing

4.5 SSCB work on neglect

In 2013/4 the SSCB prioritised work on neglect. This work included initial exploration of key neglect issues by the Board, and neglect was the focus of the SSCB annual conference in January 2014. Multi-agency audits focussing on neglect were undertaken, as were thematic workshops and action learning sets. Further work will be taking place in 2014/5 including analysing the impact of the action taken in 2013/4 and a specific JSNA on neglect being led by Public Health. The work on neglect led to Families Matter which is Southwark's response to ensuring that the right children and young people get the right service as soon as they need it. This will lead to the integration of a range of services to create a whole systems approach to tackle neglect, building on the strengths of the Early Help service referred to above in section 4.3.

Information on the January 2014 SSCB conference on neglect is noted below.

January 2014 – SSCB Conference on Neglect

Southwark Safeguarding Children Board hosted their annual conference in January 2014. The focus was **Neglect Matters - *Working together to assess, prevent and remedy the impact of neglect.***

Key speakers included Prof. David Shemmings (Kent University), Ruth Gardner (NSPCC & University of East Anglia); and Dr Hilary Cass (President of Royal College of paediatrics and child health). There was also a theatre production which illustrated what neglect means to children and young people.

Workshops at the conference covered aspects of assessment of neglect in the child's developmental age, dentistry, obesity, learning lessons from local audit and working with parents with personality disorder.

Two hundred delegates attended and the feedback was positive. The good representation from different agencies and the contributions by the speakers were highlighted in the feedback. Choosing neglect as the main theme was timely and relevant

Observations from delegates included:

...great that a 'much neglected' topic is getting a higher profile. Highlights the need for better interagency communication...'

'I was looking for answers and came away with questions.....'

"Twitter" was used to collect live feedback from the audience and for a few weeks after this.

The conference acted as a catalyst for a number of changes which will improve the response to neglect issues in Southwark. These are summarised below.

Delegates called for:	The response
More training on working with parents who have a personality disorder	SSCB training commissioned for working with hard to reach families
More emphasis on how we support health needs of vulnerable young	Health have increased resources for looked after children's services.
Obesity task force to assess children in Southwark	Public health are leading a work stream and new initiatives have been planned.
Improved engagement with GPs	GPs held a protected learning event exploring neglect
Improvements in early intervention, including information regarding access, promotion as a supportive service including feedback	Families Matter programme initiated

4.6 Child Protection

4.6.1 Key facts child protection as at 31st March 2014

As at 31st March 2014 327 children and young people were the subject of a child protection plan. This represents a significant increase from 31st March 2013 when 272 children were the subject of a child protection plan. As was noted above in section 4.1 this equates to a comparatively high rate of children with a child protection plan.

However, during 2013/4 numbers involved in child protection processes for example Section 47 enquiries and initial child protection conferences were comparatively low. This is illustrated in the table below. There could be a number of reasons for this. For example it could indicate that children and young people are not necessarily involved in child protection processes. Or, when considered with the comparatively high child protection plan numbers it might mean child protection thresholds are too low and/or that multi-agency challenge is not as affective as it could be. There might be other reasons and this these issues will explored in 2014/5. Performance on the timeliness of ICPCs has improved and now exceeds averages for London and statistical neighbours.

CPP Plans ending	2011/12	2012/3	2013/4	Statistical neighbour average 2012/13	London average 2012/13	English average 2012/3
Rate per 10,000 S47s started	143.6	121.9	106.1	136.5	107	111.5
Rate per 10,000 ICPCs	53.7	56.2	56.1	57	46.7	52.7
% conferenced but no CPP	8%	13%	4%	15%	15%	12%
ICPCs within 15 days of start of S47 enq (working days)	35%	49%	73%	63%	65%	70%

The table below outlines the length of time children and young people are subject to a child protection plan as a percentage of all plans ending in that year. In 2011/2 and 2012/3 a significantly higher percentage of children and young people remained at risk of significant harm for over 2 years or more. In 2013/4 this figure reduced. This is positive. During the year, 282 children ceased to be subject to a Child Protection Plan – representing a rate of 46.2 per 10,000. This is a slight reduction compared to the previous year's figure (49.6) but remains broadly in line with the average for Southwark's statistical neighbours (48.3 per 10,000).

CPP Plans ending	2011/12	2012/3	2013/4	Statistical neighbour average 2012/13	London average 2012/13	English average 2012/3
% CP plans ending under 3 months	26%	17%	13%	16%	17%	19%
% CP plan ending 3 to 6 months	14%	6%	9%	11%	10%	10%
% CP plans ending 6 month to 1 year (cumulative year to date)	26%	34%	40%	37%	37%	39%
% CP plans ending 1 year to 2 years (cumulative year to date)	21%	27%	34%	27%	29%	26%
% CP plans ending over 2 years (cumulative year to date)	13%	16%	4%	9%	8%	5%
Number ceasing CPP (cumulative year to date)	309	293	282	n/a	n/a	n/a
Rate per 10,000 ceasing CPP during the year	52.3	49.6	46.2	48.3	39.8	46.2

In 2014/5 the SSCB will continue to monitor the length of time child protection plans are in place and in addition monitor the number and percentage of children who are the subject of a child protection plan for a second or subsequent time. In 2013/4 there were no (zero) children and young people were subject of a child protection plan within 2 years of a previous plan. 14 children and young people became subject of a plan for a second time. Further analysis will take place on the reasons for repeat child protection plans.

4.6.2 Female Genital Mutilation (FGM)

The incidence of FGM is higher in certain African, Middle Eastern and Asian populations, notably Somali, Kenyan, Sudanese, Sierra Leonean, Egyptian, Nigerian, Eritrean, Yemeni, Kurdish and Indonesian communities. Southwark is known to be home to a relatively large number of children and young people from some of these communities, as indicated in the 2011 Census. As a consequence FGM is a high priority issue for the SSCB. In 2013/4 initial work took place jointly between Southwark Council, with Lambeth Council and local hospitals. The initial work focused on exploring why there had been so few health and social care referrals relating to FGM. Findings were inconclusive as the work revealed difficulties in accessing data and information. Tackling FGM in the UK, the intercollegiate recommendations for identifying, recording and reporting published by the Royal College of Midwives provides useful guidance which will be considered by the SSCB in 2014/5.

4.6.3 Missing from home, care or school

Under the leadership of the SSCB, the local protocol on children and young people missing from home care or school was been updated and revised guidance was distributed early in 2014. Key performance indicators on missing from home, care or school have been added to the SSCB data dashboard.

Audits have found good joint working including risk assessments and increased use of return home interviews, which are commissioned from the voluntary sector. During 2013/4 the local Children in Care Council, Speakerbox, began a research project to explore the reasons young people run away, including interviewing those living in residential homes who have run away.

4.6.4 Private Fostering

During 2013/4 the SSCB received the Private Fostering Annual Report for 2012/3. This assisted the SSCB to assess whether all agencies were working well together to ensure that privately fostered children are being appropriately safeguarded. The Annual Report highlighted work which had taken place on raising awareness, assessing private foster carers and providing advice and support.

The SSCB noted that there had been an increase in private fostering notifications from 37 in 2010/11 to 45 in 2012/3. However, the 2012/3 figure of 45 notifications was still well below the 77 notifications received in 2010/11. In response the SSCB decided to scrutinise private fostering more closely including ensuring all agencies were raising awareness about the need to notify the local authority about private fostering arrangements. A Private Fostering Panel was established in 2013/14. The reviews notifications of private fostering, and acts as a critical friend to the process. It has also had a quality assurance role and was responsible for ensuring statutory responsibilities were correctly discharged. In some cases, the panel identified neglectful care within PF arrangements.

The SSCB now receives regular Private Fostering reports. 2013/14 data shows a marked reduction in the number of private fostering notifications, dipping below the comparator figure for statistical neighbours. In previous years, Southwark had received considerably more private fostering notifications than averages for England, London and statistical neighbours, as illustrated in the table below.

During 2014/5 a multi-agency Private Fostering Action Plan is being developed. This is being managed by the Private Fostering Steering Group. Further work will be taking place to increase awareness of Private Fostering arrangements. It is anticipated that notifications will increase.

Indicator	2011/12	2012/13	2013/14	Stat neighbour average (2012/13)	London average (2012/13)	England average (2012/13)
Number of PF notifications	36	43	17	N/a	N/a	N/a
Rate of PF notifications per 10,000 age 0-17	6.1	7.6	2.7	3.9	2.3	2.6

4.7 Looked after children

4.7.1 Key facts on Children in Care in Southwark at 31st March 2014

- At 31st March 2014 there were 550 children looked after by Southwark, a slight decrease from 2013 when there were 565 children looked after. This equates to a 92.5 children looked after per 10,000 of population at 31st March 2014, significantly higher than the statistical neighbour (72) and national rates (60) from 31st March 2013. The rate of children who started to be looked after declined from 52.3 per 10,000 to 41.7 per 10,000.
- 23.1% (122 children) were placed more than 20 miles from home. This is higher than statistical neighbour and London average figures and represents an increasing compared to the previous year
- 66.4% (365 children) were placed outside of Southwark's boundaries.
- 10% - 55 young people were placed in residential settings (DfE definition).
- 70% - 386 children were placed with foster families who are not family or friends. 66% of these children were placed out of borough.
- In 2013/14 273 children ceased to be looked after, of these: 33 children were adopted and 21 children ceased being looked after due to Special Guardianship Orders
- 13% of children looked after had three or more placements during the year (short-term stability). This is in line with previous' years performance and very slightly above average.
- Indicators for long term stability continue to lag behind averages for England, London and statistical neighbours.
- 93% of CLA reviews were held on time (compared to 95.5% the previous year). 96.8% of CLA participated in their reviews.

CLA indicators	2011/12	2012/3	2013/4	Statistical neighbour average 2012/13	London average 2012/13	English average 2012/3
Number of children looked after	552	565	550	n/a	n/a	n/a
Children looked after rate per 10,000	93.5	95.7	90.0	72	55	60
Number of children starting to be looked after	274	309	255	n/a	n/a	n/a
Rate per 10,000 children who started to be looked after (at end of period)	46.4	52.3	41.7	n/a	n/a	n/a
Number of children who ceased to be looked after (cumulative year to date)	244	303	273	n/a	n/a	n/a
Rate per 10,000 of children who ceased to be looked after	41.0	50.9	44.7	n/a	n/a	n/a
% of CLA at end of the period placed more than 20 miles from home	17%	17%	23%	18%	13%	18%

4.7.2 Outcomes for looked after children and care leavers

Outcomes for looked after children have been sustained, with children and young people experiencing good health and education when compared with other local authorities as a result of concerted partnership prioritisation and action. For example, 42% of looked after children in the relevant year group cohort achieved 5 A*-C GCSE in 2013 which places Southwark in the top quartile nationally. Ambitions for looked after children locally are much higher than this, and efforts will continue for even better outcomes in forthcoming years.

There is also good performance on the proportion of young people in care and care leavers moving into education, employment and training (EET). Young people can access a wide range of support options, including apprenticeships, university support, coaching, drop-in services, Connexions, Southwark Works and training. Care leavers are also well supported to make a positive contribution and achieve independence, for example through a guaranteed secure tenancy, free leisure access locally and a wide range of arts and cultural activities.

The council's Corporate Parenting Committee provides active leadership and management. Priorities in 2013/4 included developing a life chances strategy and supporting the integration of council and partner services for looked after children and care leavers.

Audits found housing and care leaver support to be good. The rate of young people in suitable accommodation is on a par with statistical and London neighbours. Personal Advisers are seen as providing strong support, particularly around issues such as benefits. Keeping in touch rates are very high, at nearly double the England and London average.

4.7.3 Adoption

During 2013/14 the drive to improve permanency included significant improvement to the adoption service, processes and offer to families. In combination with enhanced marketing, outreach and support packages, performance locally has improved with more adopters, matches and adoptions and better timeliness as the impact of the additional service capacity and new processes has been realised. The number of placement orders granted, for example, is now above London and statistical neighbours and in line with the England average.

It is recognised, however, that more work is required to further improve timeliness in order to achieve DfE thresholds and to reduce the number of children awaiting adoption, which remains high. Priorities include addressing the barriers to adoption and investing in and implementing more robust case management. This includes the development of robust tracking to better monitor case progress, particularly harder-to-place cases, and the greater use of concurrent planning and fostering for adoption.

4.7.4 Stability of LAC Placements

Performance on LAC short and long term stability has declined over the last 2 years. In 2011/12 12.7% of children looked after experienced 3 or more moves in a year. This increased to 13.6% in 2012/13 and to 14.1% in 2013/4. Long term stability decreased from 66.1% in 2012/3, to 62.6% the next year and to 59.9% in 2013/4.

In 2013/4 the SSCB began some in-depth analysis which found that young people aged 11 to 13 years are more likely to have unstable placements. Short-term stability declines have also been driven by adolescents with multiple placement breakdown. Other white ethnic groups are also over-represented, with, conversely, white British, black African and black Caribbean children and young people more likely to be in a stable placement as are children with a disability.

Analysis of children and young people's circumstances where there is placement instability shows a high complexity of need, with significant levels of special educational needs and trauma particularly among the late teens. These children are more likely to need education or mental health interventions, and are more likely to be moved because of challenging, indeed often violent, sexualised and/or offending behaviour.

This work is continuing into 2014/5 and work is planned on exploring the impact of schooling on stability, including special educational needs, further audits and Speakerbox leading visits and interviews with young people placed out of borough to ensure their views and needs inform service planning and redesign proposals.

In 2013/4 work also took place on children placed out of borough. This included the Children’s Rights officer visiting residential settings and producing a video of young people’s views which was presented to the Corporate Parenting Committee.

CLA stability indicators	2011/12	2012/3	2013/4	Statistical neighbour average 2012/13	London average 2012/13	English average 2012/3
% CLA with 3+ placements during the year (short term stability)	12.7%	13.6%	13.0%	12%	11%	12%
% CLA at end of period who have been looked after continuously for 2.5+ years who were living in the same placement for 2+ years, or are placed for adoption at end of reporting period (long term stability)	66.1%	62.6%	59.9%	69%	69%	67%

4.8 Child Sexual Exploitation (CSE)

During 2013/4 there was considerable multi-agency action on understanding, raising awareness, preventing and dealing with Child Sexual Exploitation. This included the following:

- Strengthening activity on CSE perpetrators. A Southwark Detective Inspector will be joining the new pan-London CSE enforcement unit. The focus will include how local best practice ‘anti-gangs’ work can support improved intelligence gathering and sharing.
- A monthly multi-agency sexual exploitation (MASE) panel takes place. Future work includes ensuring the MASE process reflects changes in the local police protocol, which is based on the Metropolitan Police’s pan-London protocol and which has multi-agency commitment.
- Step-B research highlighted the actions being taken by all partners and highlighted multi-agency buy-in and robust, timely early identification and response through the MASH
- The SSCB established a Child Sexual Exploitation sub-group which is leading on developing a multi-agency Child Sexual Exploitation strategy and operating model which encompass prevention through to rehabilitation with a tiered approach to intervention.

An intelligence gathering exercise took place, under the auspices of the CSE subgroup, to build a profile of children and young people who were identified as victims or at risk of sexual exploitation. This exercise, involving several agencies across the partnership, identified 98 children, who were then risk-assessed according to an agreed framework. Arrangements for the referral and recording of (suspected) CSE have also been tightened up, enabling the police and social care to maintain accurate data via the MASH.

4.9 Health Agencies and Safeguarding

NB: The health economy in Southwark comprises Kings College Hospital NHS Foundation Trust, Guy’s and St Thomas NHS Foundation Trust,, South London and Maudsley NHS Foundation Trust, Southwark Clinical Commissioning Group and Public Health.

During 2013/4 the health economy in Southwark maintained safeguarding as a priority whilst successfully navigating the NHS structural changes which gave responsibility for elements of health commissioning to primary care clinicians. Southwark CCG has been authorised by NHS Commissioning Board and has been operating as a statutory body since April 2013.

Positive developments and impact during 2013/4 included:

- There was very strong engagement from health and GPs at the SSCB Neglect Conference in January 2014, including a keynote address by a clinician.
- Appointment of a Named GP for Safeguarding which led to a number of positive impacts including a very good (82%) response to GP safeguarding audits, consolidation of safeguarding information for GPs, improved data coding and gathering, and particularly successful Protected Learning led by the Named GP in partnership with social care.
- Safeguarding Children standards were updated and are now included in contracts with main providers
- The Lambeth and Southwark Child Death Overview Panel (CDOP) was reviewed and new processes to improve communication and learning are in place. The splitting of the CDOP – (which continues to operate on a bi-borough basis across the two hospital Trusts) into neonates and other children was embedded and the backlog of cases reduced. Meetings are now more focussed and strategies for disseminating learning have been sharpened, with notable successes, for example in the provision of defibrillators in schools. See 5.7.1 for further information.
- Progress has been made in ensuring the views of children and young people are heard and considered in the planning and development of health safeguarding services. This has included focus groups with Speakerbox and consulting care leavers' preferences about access to their health information. A process is now in place to include the views of young people and carers, through interviews and discussions, as part of multi-agency case audits
- Additional funding for a LAC nurse and administrative support.
- CCG commissioning advice has been provided to ensure the range of services commissioned by CCG takes account of the need to safeguard and promote the welfare of vulnerable children. There were specific instances of improved safeguarding practice within health services, such as the exemption of children from charging for anti-malarial medication.
- A Health and Safeguarding sub group of the SSCB was established.

Areas for Development in the health economy for 2013/14

- To develop safeguarding children links with accountability frameworks for safeguarding with NHS England in order to ensure that safeguarding remains joined up within the NHS and within our local area
- To ensure children, young people and families have their health needs met at the earliest possible stage and to engage closely on the multi-agency Families Matter agenda.
- To work with NHS England to promote best quality safeguarding practice within General Practice, including training, information sharing and promoting early help for families
- To ensure health service planning and developments consider the views of children and young people
- To continue to promote a multi-agency integration of safeguarding services utilising MASH and MARAC channels
- To strengthen the safeguarding of young people through transition into adult services by developing a safeguarding vulnerable people approach to working with families. This will involve a TAC approach in the Transition team.
- Continue to work collaboratively with health provider organisations to ensure a more joined up approach is achieved in caring for vulnerable groups within the community

- Continue to develop the work initiated with GP Practices in Southwark to support and advise on safeguarding children including safeguarding audit action plans and the key issues identified nationally on neglect, domestic abuse, serious youth violence, child sexual exploitation and the vulnerability of Looked After Children

4.10 Learning and development

4.10.1 Learning and Improvement Framework

During 2013/4 the SSCB agreed a Learning and Improvement Framework which outlines the approach to Serious Case reviews and other types of learning.

4.10.2 Serious Case Reviews

In March a serious case review panel was held and a decision taken to commission a Serious Case Review using the SCR methodology developed by the Welsh Government and outlined in *“Protecting Children in Wales: Guidance for arrangements for multi agency child practice reviews.”* This was the first SCR undertaken since 2010.

Also in March the Department for Education asked Southwark to participate in an investigation into a historical allegation into one of the Council’s children’s homes. This work has been completed and the outcome will be published by the Department for Education.

4.10.3 Management Reviews

Management reviews are undertaken in cases where an incident of concern affects a child but the case does not fit the SCR criteria outlined in Working Together.

In 2013/4 a management review was completed in order to learn lessons from a case where a young person was seriously sexually assaulted.

The Board commissioned a thematic review of 7 cases where management reviews had been completed over the previous four years. The themes emerging informed the focus on private fostering, children missing from home and care and emphasised the potential vulnerability of some adolescents

4.10.4 Multi-agency audits

In 2013/4 multi-agency audits took place on:

- Agency responses to children exhibiting sexually harmful behaviour (SHB)
- Effectiveness of work undertaken by the Family Focus Team
- Understanding the experience of young people who go missing from care

Consolidating learning from these audits is a key task for 2014/15, to be overseen by the Audit & Learning subgroup.

4.10.5 Sharing learning from single agency audits

In future the Audit and Learning Sub-group will take an overview of the single agency audits programme in partner agencies. This approach will be strengthened by the appointment of an independent chair to the audit and learning sub group.

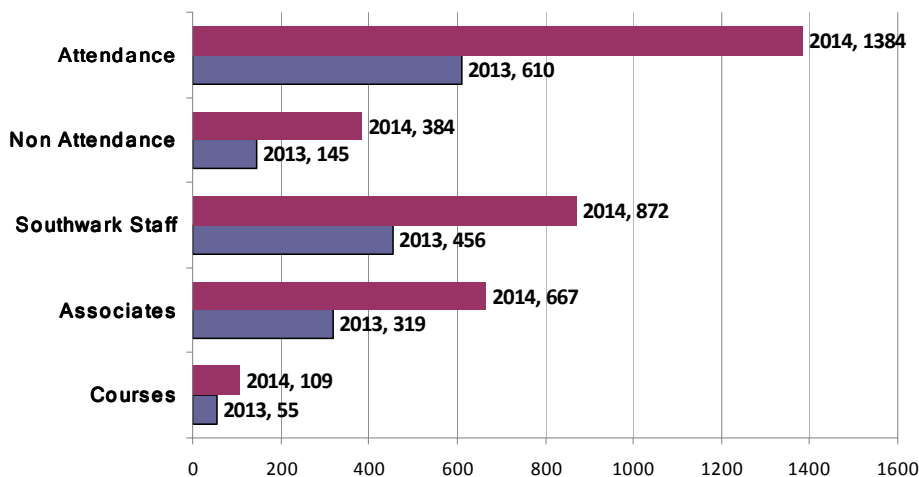
4.10.6 Training Programme

The training programme included at Appendix 3 sets out the safeguarding children’s courses accessed through the on-line portal, ‘My Learning Source’.

An evaluation, comparing the previous year with April 2013 - March 2014, identified significant improvements. Training highlights for the year included:

- Attendance improved by 56% in 2013/2014.
- There was a 50% increase in the number of courses available.
- Booking figures has increased by 49% from last year.
- There are 2,716 Associates now registered on My Learning Source
- The SSCB has continued to provide a wide programme of safeguarding training which includes basic safeguarding and other courses such as training on learning from serious case reviews and specialist courses such as “The art of difficult conversation in child protection.”
- Participants report an 81% positive impact evaluation.

Comparing April to March – 2012/13 to 2013/14



However, non-attendance was also higher. The increase was proportional to the rise in attendance figures (62%). The Organisational Development team plan to address this issue in 2014/5. This will involve engagement with managers and considering more direct action to recover the cost of non-attendance.

A review of all training materials started in 2013/4. This is continuing into 2014/15. Feedback will be provided through the Practice Development and Training sub group.

Providers met with the SSCB development manager and the chair of the Practice Development and Training sub group in December 2013 in order to look at best practice examples of training courses and how providers could be supported to ensure they reflect local learning from audits and management reviews. Providers and the sub-group chair will meet annually to review and plan training.

The SSCB has arrangements in place for 2014/15 for the quality assurance of training providers, who will all be awarded an Ofsted-style judgement.

4.10.7 My Safeguarding Newsletter

My Safeguarding Newsletter was launched in October 2013. The newsletter is produced 3 times a year and is sent to all agencies. The newsletter will update partners on emerging local and national issues in safeguarding, learning opportunities and new developments in practice

4.10.8 Southwark Safeguarding Children Board: Lunch time learning

In March, the lunch time learning sessions reflected on lessons from an audit on children at risk of peer to peer sexual exploitation. These sessions are planned bi- monthly covering contemporary topics such as Female Genital Mutilation, neglect and dentistry in children.

5. SSCB Governance arrangements and activity

5.1 Summary of governance positives and areas for development

This section focuses on SSCB governance arrangements and activity during 2013/4. It includes information on the following:

- 5.2 Participation of children and young people in the work of the SSCB
- 5.3 SSCB governance and membership
- 5.4 SSCB Performance Dashboard
- 5.5 Links with other key strategic groups
- 5.6 SSCB Budget
- 5.7 Links with other key strategic groups
- 5.8 Work of the SSCB sub-groups

5.2 Participation of children and young people in with work of the SSCB

The best way to protect children and young people is to listen to them and engage positively with them so that they can help us improve our safeguarding work. The participation of children and young people has developed over this year and included the following initiatives:

- Key messages being shared with children and young people on keeping safe.
- Consulting with young people on their understanding of neglect and child sexual exploitation and what young people think will keep them safe. Children and young people's views were included in a DVD on CSE. This ensures that a wide range of leaders and practitioners can hear and understand children and young people's views on CSE.
- Involving young people in the SSCB annual conference.
- Speakerbox, the local children in care council, has long-established relationships with the SSCB. This includes meetings between Speakerbox members and the Independent Chair.
- In 2013/4 the SSCB heard concerns directly from children in care and care leavers about preparations for independence and the quality of their accommodation. As a result of SSCB scrutiny, a care leavers group within Speakerbox has been established
- As the reporting year ended the Board was planning a formal child engagement project to enable young people to meet with the SSCB.

5.3 SSCB governance and membership

The governance arrangements for the SSCB were reviewed following publication of Working Together (2013). The Board was strengthened over the year with a newly appointed independent chair who reviewed the overall structure and organisation of the Board. During 2013/4 there were 3 meetings of the Main SSCB partnership Board and 6 meetings of the Executive Board. The board has engagement from the required agencies. A full membership list can be found at Appendix 2.

The Independent Chair met regularly with the Council Chief Executive and Strategic Director of Children's and Adults' services and met with the Cabinet Member for children. The Lead Member attends Board meetings and the Education and Children's Scrutiny Subcommittee scrutinises the Annual Report.

Following a community safeguarding survey and forum last summer an initial community engagement meeting took place, as forerunner to a creating a Community Engagement sub group.

5.4 SSCB Performance Dashboard

In June 2013, the SSCB considered a report which noted improvements needed to SSCB performance reporting arrangements. This led to the development of an SSCB Performance Dashboard. This includes outcomes measures as well as key safeguarding and child protection performance indicators on activity, thresholds and quality. Further work is planned to ensure that the dashboard reflects key safeguarding performance indicators from all agencies.

5.5 Links with other key strategic groups

During the year a protocol was developed between the Health and Wellbeing Board and the SSCB. The SSCB Independent Chair held meetings with the Independent Chair of the Adults Safeguarding Board. The Children’s Trust includes a standing agenda item on the work of the SSCB. In 2013 there was an annual health executive meeting held jointly with Lambeth safeguarding children Board.

5.6 SSCB Budget

The SSCB receives financial contributions from a number of agencies and other forms of in-kind support. As at 2013/14, financial contributions were as follows:

London Borough of Southwark	50,000
Southwark Clinical Commissioning Group	20,000
South London and Maudsley NHS Foundation Trust	5,000
Probation Service	2,000
Metropolitan Police	5,000
CAFCASS	550
London Borough of Lambeth (CDOP Administration)	5,000
Total GBP	87,550

SSCB income and expenditure in 2013/4 is outlined in the following table. This includes the recruitment costs for the Independent Chair. Expenditure on training, on Child Death Reviews and Serious Case Reviews is not reflected in these figures. The SSCB has agreed to maintain a reserve which is carried forward.

Income and expenditure 2013/14

Income 2013/14		Expenditure 2013/14	
	£		£
Brought forward	107,474.00	Board administrator	39,538.97
Cafcass	550.00	Catering Board meetings	175.00
Inner London Probation	2,000.00	Hotel accommodation/travel for chair	1,774.00
London Council	5,000.00	Independent chair (1)	3,710.73
London Borough Lambeth	5,000.00	Hotel accommodation (Chair 1)	1,774.45
London Borough Southwark	50,000.00	Independent chair (2)	23,020.00
Slam	5,000.00	Independent author for management review	5,398.30
Southwark NHS	20,000.00	Independent author for management review	3,412.50
Training recoupment	1,400.00	Policy officer	47,285.85
		Printing	494.00
Total income	196,424.00	Room hire	503.00
		Recruitment costs	11,400.00
		Training	1,075.00
		IT	300.00
		Total expenditure	138,087.80
		Carried over 14/15	58,336.20

5.7 Work of the SSCB sub-groups

At the start of 2013/4 there were 7 subgroups:

- Audit and Learning
- Human Resources and Safeguarding
- Practice Development and Training
- Serious Case Review
- Child Sexual Exploitation
- Child Death Overview Panel
- Designated, Named and Lead Professionals Group

During the year, new subgroups were established for Education, Health and Community Engagement.

The chairs of each subgroup meet three times a year with the SSCB chair in order to report back on their activity and to facilitate open communication between the subgroups. The work of the subgroups is planned in these joint meetings with the Independent Chair.

In addition the Council's Head of Quality Assurance reports regularly on child protection, the local authority designated officer (LADO) activity and on children missing from home and care.

5.7.1 The Child Death Overview Process

Following a review and streamlining of its processes, the Child Death Overview panel has successfully reduced its backlog and continues to work together with Lambeth in this area of work.

1. *Overview of CDOP Operation in Lambeth and Southwark*

Cases reviewed:

- 70 cases were reviewed by the Child & Neonatal Death Overview panels in 2013/2014 financial year:
 - 32 cases were reviewed by the Neonatal Death Overview Panel (NDOP) and 38 cases were reviewed by the Child Death Overview Panel (CDOP)
 - 27 cases involved deaths in 2013/14, the remaining 43 cases were in 2009 - 2013.
- 47 (67%) cases were <1 year old; 37 (53%) were males; 19 (27%) cases were Black African, then other Black Ethnicity, other White, and white British.
- There were 33 outstanding cases as of the end of the year (Southwark 14, Lambeth 19)

Deaths reported:

- 63 in the 2013/2014 financial year (42 neonatal deaths and 21 child deaths).

2. *Southwark cases reviewed*

- 30 Southwark cases were reviewed in this financial year with 20 (67%) deaths occurring within an acute hospital setting.
- The most common classification of death was neonatal death (18; 60%) followed by life limiting conditions and fire & burns.
- 17 (57%) cases had modifiable factors.
- Deaths reported: 37 comprising 25 neonates and 12 children.

3. *Recommendations from this Annual Report*

Youth Violence including Gang Activity – this remains a yearly theme. A public health approach is needed to include addressing norms and attitudes to violence amongst young people, parents and others, strengthening the role of schools, and reducing risks in the night time economy.

Road/Traffic Safety & Awareness – Better awareness of road safety for children and young people in schools and related settings, traffic calming, road speed and driver training is required.

Hospital Staffing – Hospitals should review capacity and availability of midwifery staff to meet the needs of the increased birth rate and increased complexity of cases.

4. *Progress on recommendations from 2012-2013 Annual Report*

- School health improvement: actions done include the school nurse review, the Southwark Schools' Healthy Lives programme, and the Evelina Child Health programme.
- Youth violence: Lambeth's public health approach to violence is informing its Serious Violence strategy and has been to the Health and Wellbeing Board.
- Housing (unintentional injuries prevention): work with both boroughs is underway and an awareness workshop for Housing staff commences this year.
- Sudden Infant Death Syndrome and co-sleeping: advice and awareness sessions to reduce the risk of SIDS and infant mortality are in place for a variety of CYP stakeholders.

5.8 2013/4 Section 11 Audit

The 2013/14 Section 11 process involved each agency completing an audit using an agreed template. A report analysing strengths and weaknesses was presented to the SSCB. A summary of strengths and areas for development can be found in the table below.

Going forwards the agreed methodology for 2014/5 is for a challenge panel to be developed. This panel of senior officers will scrutinise the single agency reports based and an overview report will be presented to the SSCB.

Strengths	Areas for development
<ul style="list-style-type: none"> • Safer recruitment is well established in all agencies and the changes brought in the Disclosure and Barring Service were effectively adopted • Agencies are ensuring lessons from SCRs and CDOP are disseminated. • Engagement with safeguarding training is good across the system • Health reports detailed a commitment to audit and showed a strong cycle of listening to critiques on the service and analysing issues. • Agencies showed strong leadership in ensuring safeguarding children remained a priority during significant organisational changes. • Agencies have a clear reporting framework for safeguarding with health providers demonstrating strong practice in this area. • Each agency has clear and updated policy for responding to allegations against staff or volunteers which has been updated to meet new Working Together requirements. • Strong evidence suggesting good governance arrangements in place across all organisations with clear reporting and interface with the SSCB. 	<ul style="list-style-type: none"> • All agencies to continue to prioritise listening to the wishes and feelings of children, and then incorporate this into policy and practice development. • Effective supervision of workers is a challenge for some agencies given the level of staff turnover and pockets of high vacancy rates. • The standard of induction varied across agencies. • UKBA/Home office did not complete a Section 11 audit report due to the internal changes to management arrangements. The SSCB Chair met with the Board Member to discuss this going forward • There is a challenge for regional and national organisations in producing a Section 11 report that is both accountable as an agency and reflects local circumstances

Appendix 1: SSCB Organisation Chart as at March 2014

Chair: Michael O'Connor, Independent

Vice Chairs: Romi Bowen, Strategic Director of Children's & Adults Services, Southwark Council
Rory Patterson, Director of Children's Social Care, Southwark Children's Services

Membership of the Executive Board:

- Children's & Adults Services
- Metropolitan Police
- Southwark Clinical Commissioning Group
- SLAM NHS Foundation Trust
- Guy's & St Thomas' NHS Foundation Trust
- King's College Hospital NHS Foundation Trust, Community Action Southwark
- Lay Members

Meets 5 times per year or as required

Staff:

SSCB Development Manager

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Subgroups of SSCB

SUBGROUP	CHAIR(S)	FREQUENCY OF MEETINGS
Serious Case Review Subgroup	Michael O'Connor Independent Chair, SSCB	Meets 4 times a year
Audit & Learning Subgroup	Jackie Cook Head Of Social Work Improvement And Quality Assurance Children's Services	Meets 5 times a year
Child Death Overview Panel (CDOP) and Neo-Nate Panel (joint with Lambeth)	Abdu Mohiddin Consultant in Public Health Lambeth CCG Gillian Holdsworth Consultant in Public Health Lambeth CCG	Meets monthly
Child Sexual Exploitation Subgroup	Rory Patterson Director of Children's Social Care Children's Services	Meets 4 times a year
Community Engagement Subgroup	Gordon McCulloch Chief Executive Officer Community Action Southwark	First meeting February 2014
Education Sub group	Merril Haeusler Director of Education Children's Services	Meets 3 times a year
Health Subgroup	Gwen Kennedy Director of Quality and Safety NHS Southwark CCG	Meets 6 times a year
Human Resources & safeguarding Sub group	Bernard Nawrat Head of Human Resources Southwark Council	Meets 4 times a year
Practice Development & Training Subgroup	John Howard/Mary Mason (JH) Organisational Development Manager, Children's Services (MM) Designated Nurse, Southwark CCG	Meets 4 times a year
Designated, Named and Lead Professionals Group	Ann Flynn SSCB Development Manager	Meets twice a year

Appendix 2: Southwark Safeguarding Children Executive Board Members as at March 2014

Note that during 2013/14, the work of the Executive Board was supplemented by further meetings of the Main Board, which had wider membership.

First Name	Last Name	Job Title	Agency
Elaine	Allegretti	Head of Strategy, Planning and Performance	Children's & Adults' Service
Justin	Armstrong	Detective Chief Inspector	Metropolitan Police
Andrew	Bland	Managing Director	Southwark BSU, NHS Southwark
Romi	Bowen	Strategic Director of Children's and Adults Services	Children's Services
Becky	Canning	Assistant Chief Officer, Southwark	London Probation Service
Dora	Dixon-Fyle	Councillor	Southwark Council
Eva	Edohen	Lay Member	
Ann	Flynn	SSCB Development Manager	Children's Services
Zander	Gibson	Borough Commander	Metropolitan Police
Merril	Haeusler	Deputy Director of Children's Services	Children's Services, Education
Dr Ros	Healy	Consultant Paediatrician/Designated Doctor	NHS Southwark
Ron	Kerr	Chief Executive	Guy's & St Thomas' NHS Foundation Trust
Alex	Laidler	Interim Director for Adults Social Care	Children's & Adults' Service
Mary	Mason	Designated Named Nurse	Southwark BSU, NHS Southwark
Chris	McCree	Acting AD of Nursing	SLaM NHS Trust
Gordon	McCullough	Chief Executive	Community Action Southwark
Michael	O'Connor	Independent Chair	SSCB
Deborah	Parker	Associate Chief Nurse	Guy's & St Thomas' NHS Foundation Trust
Rory	Patterson	Director, Children's Social Care	Children's & Adults' Service
Gerri	Scott	Strategic Director Housing & Community Services	Housing and Community Services
Tim	Smart	Chief Executive	King's College Hospital
Claudina	Tuitt	Lay Member	
Ruth	Wallis	Director of Public Health	Public Health
Geraldine	Walters	Executive Director of Nursing and Midwifery	King's College Hospital
Susi	Whittome	Head Teacher Representative	Keyworth Primary School

Appendix 3: Approved Safeguarding Children's Courses delivered through My Learning Source – 2013 - 2014

Course Name	No. held
Child Protection: Keeping children safe from harm - (Foster carers)	1
Common Assessment Framework (CAF)	5
Contacting victims of adolescent harmful sexual behaviour	1
Critical thinking and supervision of complex risk: for safeguarding managers and supervisors	2
Crossing bridges: implementing a think family approach	2
Developing critical thinking in working with risk and the child protection process	3
Domestic Abuse Awareness	9
Domestic Abuse Champions Programme	7
Drug awareness training for children's social workers	1
Effective recording and data sharing for the multi agency safeguarding hub	2
Facebook, Mobiles and MSN: Safeguarding Children online (Foster carers)	2
Multi-agency safeguarding hub members development day	4
'Neglect Matters' Working together to assess, prevent and remedy the impact of neglect	1
Risk assessment for the multi-agency safeguarding hub	2
Sexual exploitation of children	2
Signs of Safety Bespoke Training ASAF, YOS & 0-12OS, SSFT & Adolescence & Aftercare (2 days)	2
Signs of Safety Refresher Training	1
Signs of Safety Training Bespoke Training for Children's Social Care Specialist Services	1
SSCB - Child protection update seminar	4
SSCB - Domestic violence risk assessment model - multi - agency awareness briefing	3
SSCB - Emotional Abuse: The impact for children and young people on attachments	5
SSCB - E-Safety - recognising the harms of new technologies	4
SSCB - FGM - Awareness course	1
SSCB - Honour Based Violence (HBV)	2
SSCB - Interagency working together in Assessment and Intervention with and C & F	3
SSCB - Neglect - An analytical approach	5
SSCB - Parental and perinatal mental health: impact on children and their families	2
SSCB - Race, culture and faith belief systems in safeguarding children	3
SSCB - Safeguarding children with disabilities	1
SSCB - Substance misuse by parents: impact on children and families	1
SSCB - The Art of Difficult Conversations in Child Protection	3
SSCB -Child Protection Level 2	3
SSCB - Child Protection Level 3	1
SSCB- Domestic violence risk assessment model - multi agency awareness briefing	3
SSCB-Attending child protection meetings, conferences, network, strategy and core groups	2
SSCB - Honour Based Violence (HBV) PM	2
SSCB - Working with children who have been sexually abused	4
The Mental Health Needs of Young People Involved in Street Gangs	3
Working with challenging and hard to help families: developing authoritative practice for safeguarding practitioners/managers	1