



**NHS North Central London**

## **BARNET CHILDREN'S TRUST BOARD**

**24 OCTOBER 2013**

**10:00 IN THE TOWN HALL, THE BURROUGHS, HENDON NW4 4BG**

### **DRAFT AGENDA**

10.00	1	Welcome and introductions	Cllr Thompstone	
	2	Minutes of the meeting held on 27 June 2013	Cllr Thompstone	
10.05	3	Mid-year performance report	Nicola Francis	(presentation)
10.20	4	14/15 budget proposals & longer term financial challenges	Val White / all	(discussion)
10.45	5	Early years	Duncan Tessier / Val White	
11.00	6	Increasing participation and addressing youth unemployment: learning lessons and next steps	Ian Harrison / Barnet & Southgate College	
11.15	7	Barnet Safeguarding Children's Board Annual Report	Nicola Francis	
11.25	8	Any other business	Cllr Thompstone	
	9	Date of next meeting - Thursday 30 January 2014, 2pm	Cllr Thompstone	
11.30	10	Presentation by Young Parents (in private session)	Zainab Bundu	

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<b>Meeting:</b>	<b>Date:</b>	<b>Agenda Item No: 5</b>
CHILDREN'S TRUST BOARD	24 October 2013	

<b>TITLE OF PAPER:</b> Early Years Review Phase 1 Report
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### **SUMMARY OF PAPER:**

An early years review has been conducted, led by the council but working alongside partners, to identify how we can improve Barnet's early years provision. The key objectives of the review have been to;

1. Understand current early years provision in Barnet.
2. Identify best practice from elsewhere.
3. Develop recommendations for improvement.

The report details the findings of the review and a range of recommendations that can be summarised as follows:

- Create a more joined-up Barnet early years system to identify vulnerable families early and co-ordinate support for them. In particular, a more integrated delivery approach for children's centres and health visitors, along with other health professionals.
- An improved family approach with higher risk adult groups – mental health, drugs, alcohol and domestic violence.
- Simplifying the system for parents and partners.
- Consolidation of support for early years settings.
- A further shift in the balance from universal to targeted services.
- Market development activity in growth areas to ensure there is sufficient childcare across Barnet.

The recommendations have been endorsed by the Early Years Review multi-agency project board.

### **ACTION REQUIRED BY BOARD:**

- Endorse the recommendations of the report, in particular the need for an integrated approach to better take advantage of the opportunity to intervene early and prevent needs escalating for higher risk families.

### **AUTHOR OF PAPER**

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**POSITION:** Family & Community Well-being Lead Commissioner  
**ORGANISATION:** LBB  
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# Early years review Phase 1 report - DRAFT

9 October 2013

# Executive summary

Early years represents the best early intervention opportunity across the public sector to improve outcomes for local residents and reduce the financial burden on the state. The early years system in Barnet is the complex result of many years of incremental change. In reviewing this system in it's totality it is apparent that whilst there are many strengths – including a dedicated and passionate work force – that success is often despite rather than because of the system. As such this report makes a wide range of recommendations covering the following areas:

- A joined-up Barnet early years system.
- A sustained focus on doing what works.
- A family approach with higher risk groups.
- Simplifying the system for parents and partners.
- Consolidation of support for early years settings.
- A further shift in the balance from universal to targeted services.
- Developing the workforce and strengthening volunteer programmes.
- Developing a sustainable funding solution for nursery schools.
- Ensure there is sufficient childcare in Barnet.

# Objectives of the early years review

The early years review is intended to help the council and its partners identify how it can improve Barnet's early years provision.

The key objectives of the review are;

1. Understand early years provision in Barnet.
2. Identify best practice.
3. Develop recommendations for improvement.

These link to hypotheses on system effectiveness, childcare provision, partnership working and integration and employment.

# Early years outcomes

The priority outcomes we want to improve through the early years review are:

- Improved school readiness for all children in Barnet.
- Improved health outcomes for all children in Barnet.
- Improved identification and support for the most vulnerable.
- Sufficiency of high quality childcare places for children in Barnet.
- Reduction in the number of adults held back from returning to work because of childcare constraints.



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- 1. Current early years provision in Barnet**
2. Challenges for early years and family services
3. Childcare
4. Children's centres and family support
5. Early Identification and Support
6. Recommendations

# What does Early Years support look like in Barnet?

The following areas are being covered in this report;

## A. Childcare

- 1. Free eligibility for 3&4 year olds (£15m, Dedicated Schools Grant - DSG)
- 2. Free eligibility for 2 year olds (£3.2m, DSG)
- Early Years Vulnerable (£200k, DSG)
- Support offered to childcare (including support that sits in family services, schools and education and SEN)

## B. Children's Centres and family services

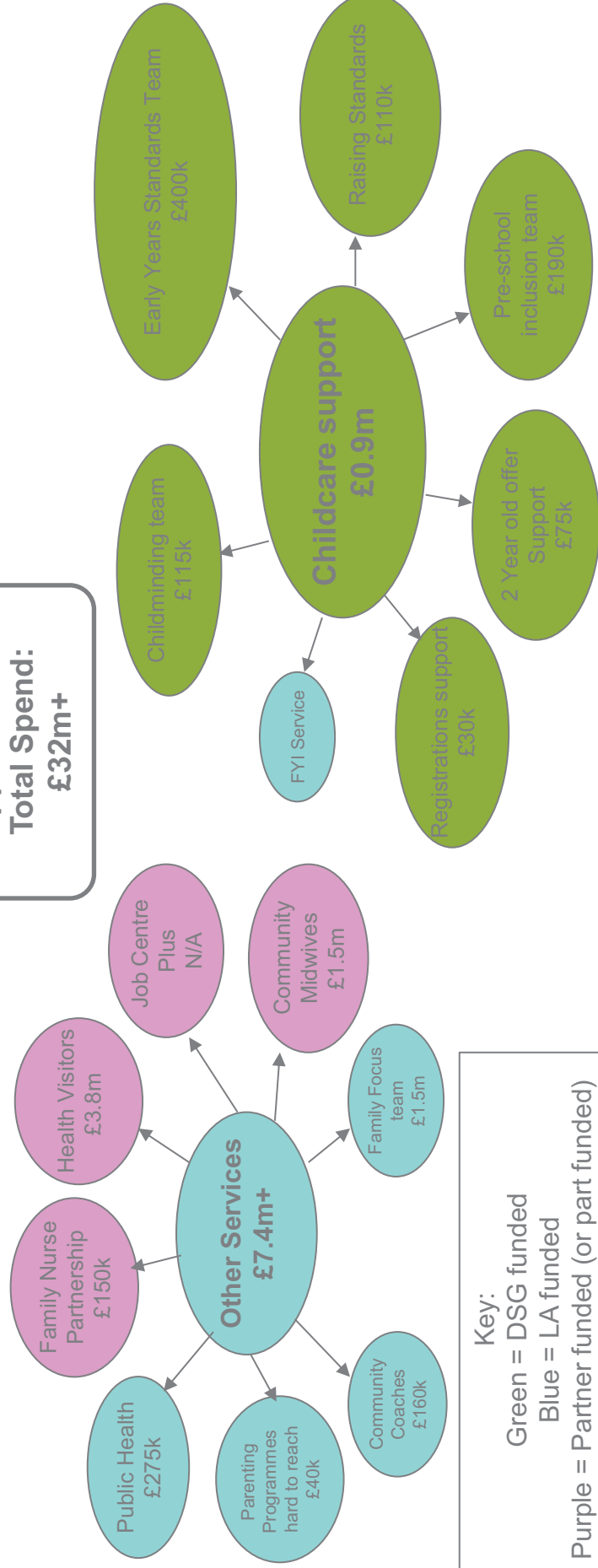
- Children's Centres (£4.3m, majority LA funded)
- Early Intervention and prevention contracts (e.g. parenting programmes and community coaches)
- Health Visitors and Community Midwives
- Family focus and troubled families

**The next page gives an overall picture of early years, and related support.**

# Financial Overview – 2013/14



**Approximate Total Spend: £32m+**



**Key:**  
 Green = DSG funded  
 Blue = LA funded  
 Purple = Partner funded (or part funded)

# Childcare places

The table below shows the number of known childcare placements across the borough by type of provider.

Type of Provision	Registered places	% of total known places in Barnet
Day nursery and sessional pre-school	4,648	28%
Independent sector nursery schools	1,165	7%
Maintained sector nursery classes	3,931	23%
Nursery schools	252	1.5%
Registered childminders	1,869	11.5%
Out of school childcare	4,838	29%

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# Children and Young People's Plan

The Children and Young People's Plan 2013 – 2016 sets out a vision that 'every child in Barnet has a great start in life, with the security and safety to grow in a nurturing environment'. The early years priorities in the plan are:

- Engage families early to ensure children have happy lives at home.
- Provide high quality health services for mothers and young children.
- Ensure children in need of support are identified early and appropriately supported in their early years.

# Pre-school children in Barnet demographics

This table shows that significant growth in the population of 0-4 year olds is expected in the next ten years.

However, the forecast for massive growth in the South and West is countered by a projected fall in the East and Central areas.

The wards within Barnet who will see the largest growth in 0 – 4 year olds are;

1. Colindale
2. Golders Green
3. West Hendon

Ward	Population 0 – 4 years 2013	Population 0 – 4 years 2018	% change at 2018	Population 0 – 4 years 2023	% change at 2023
<b>East Planning Area</b>					
Brunswick Park	989	951	-3.8%	867	-8.8%
East Barnet	1,180	1,132	-4.1%	1,027	-9.2%
Woodhouse	1,183	1,177	-0.1%	1,090	-7.4%
Coppetts	1,144	1,098	-4.0%	994	-9.5%
East Finchley	1,069	1,062	-0.1%	979	-7.8%
<b>East</b>	5,565	5,420	-2.6%	4,957	-8.5%
<b>South Planning Area</b>					
Garden Suburb	1,150	1,126	-2.1%	1,023	-9.1%
Childs Hill	1,432	1,396	-2.5%	1,303	-6.7%
Golders Green	1,681	2,419	+30.5%	2,856	+15.3%
Hendon	1,422	1,387	-2.5%	1,268	-8.5%
West Hendon	1,363	1,458	+6.5%	1,546	+5.6%
Finchley Church End	1,035	1,026	-0.1%	946	-7.7%
<b>South</b>	8,083	8,812	+8.2%	8,942	+1.5%
<b>Central Planning Area</b>					
High Barnet	930	910	-2.1%	825	-9.3%
Underhill	1,019	1,039	+1.9%	972	-6.4%
Oakleigh	1,008	972	-3.5%	873	-10%
Totteridge	1,127	1,193	+5.5%	1,147	-3.8%
West Finchley	1,090	1,064	-2.3%	981	-7.8%
<b>Central</b>	5,174	5,178	+0.1%	4,798	-7.3%
<b>West Planning Area</b>					
Burnt Oak	1,482	1,505	+1.5%	1,413	-6.1%
Colindale	1,837	2,918	+37%	3,456	+15.5%
Edgware	1,335	1,280	-4.1%	1,168	-8.7%
Hale	1,347	1,245	-7.5%	1,151	-7.5%
Mill Hill	1,251	1,279	+2.2%	1,333	+4.0%
<b>West</b>	7,252	8,227	+11.9%	8,521	+3.4%

# Changing policy

It is important throughout the Early Years Review to put any decisions in the context of central government policy. The government have recently released *More Great Childcare (Jan 13)* and *More Affordable Childcare (July 13)*. The following proposals are of significance to Barnet council;

1. Ofsted becoming the sole arbiter of quality
2. Reform of early years qualifications
3. DfE continuing to explore the option of childminder agencies
4. Tools to stimulate the market such as:
  - Small amounts of funding to set up as a childminder (£250) or childcare setting (£500)
  - Making it easier for schools to develop nurseries
  - Potentially easing planning legislation for childcare settings



# Improving outcomes for the more deprived

The table below outlines the percentage of children in Barnet who reached a good level of development at the end of the EYFS.

- With initial reports indicating that a good level of development nationally maybe around the 51-53%, it points to Barnet having a good comparison to the national average.
- However, it points to a significantly gap between FSM and non FSM of 17.4 percentage points, illustrating a significant gap in the level of development of those from more deprived backgrounds.

% achieving a good level of development		%
All children		60.1
Boys		53.4
Girls		67
Free school meals (FSM)		45.7
Free school meals BOYS		39.5
Free school meals GIRLS		53.0
Non free school meals (non FSM)		63.1
Non free school meals BOYS		56.6
Non free school meals GIRLS		69.6

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# Childcare – statutory duties

As part of the Childcare Act 2006, Local Authorities have the following statutory duties;

Title of Duty	Function
Duty to secure sufficient childcare for working parents	To require local authorities to ensure childcare is available to enable parents to take up work, education or training
Duty to secure prescribed early years provision free of charge	To ensure that all 3 & 4 year olds can access high quality free nursery education
Duty to access childcare provision	To ensure local authorities undertaken an assessment of childcare provision in their area (CSA)
Duty to provide information, advice and training to childcare providers	Ensure local authorities give childcare providers the necessary support to help deliver sustainable and affordable high quality childcare.

# Childcare – national context

The government is currently undertaking a review of childcare and has recently released a number of policy documents and consultations.

## **More Great Childcare** (January 2013) proposed:

- Reforming early years qualifications, introducing new Early Years Educators and Early Years Teachers.
- Strengthening the inspection regime, making Ofsted the sole arbiter of quality.
- Introducing new Childminder Agencies, to increase the number of childminders and improve the training and support they can access

The second stage consultation closed at the end of September 2013.

## **More Affordable Childcare** (July 2013) sets out proposals to:

- Help families to meet the costs of childcare.
- Increase the amount of affordable provision.
- Give parents the right information so they can make informed choices about childcare.

Firmer recommendations will be made in **spring 2014**.

# More Affordable Childcare - proposals

- **Tax-free childcare** for working families up to a cap of £6,000
- Commitment to **continuing funding for 3 and 4 year olds** and **expanding 2 year old offer** to 40 per cent from September 2014
- Ensuring local authorities are '**champions**' for **disadvantaged children** and their families
- Local authorities can no longer add local eligibility criteria for the 2, 3 & 4 year old offer
- Push focus of local authority resource on offering **information, advice and training** for those rated as 'inadequate' and 'requires improvement'
- *Local authorities will still have a power to provide information and advice and training for high quality providers if they wish to*
- *Potential to look at a **national single funding formula** for early education programme '**in time**'*
- *A small pot of money to be made available to **support new childcare businesses** - £250 for childminders and £500 to start a nursery or after school club*
- *Making **better use of schools** – looking at ways in which we can help make it easier for out-of-hours provision*
- To remove delays and unnecessary processes for schools setting up onsite childcare, we are abolishing the duty on maintained schools in England to consult when offering out of school hours facilities

# Childcare – changes to LBB role

In recent *Early Education and childcare statutory guidance for local authority*, local authorities have to do the following;

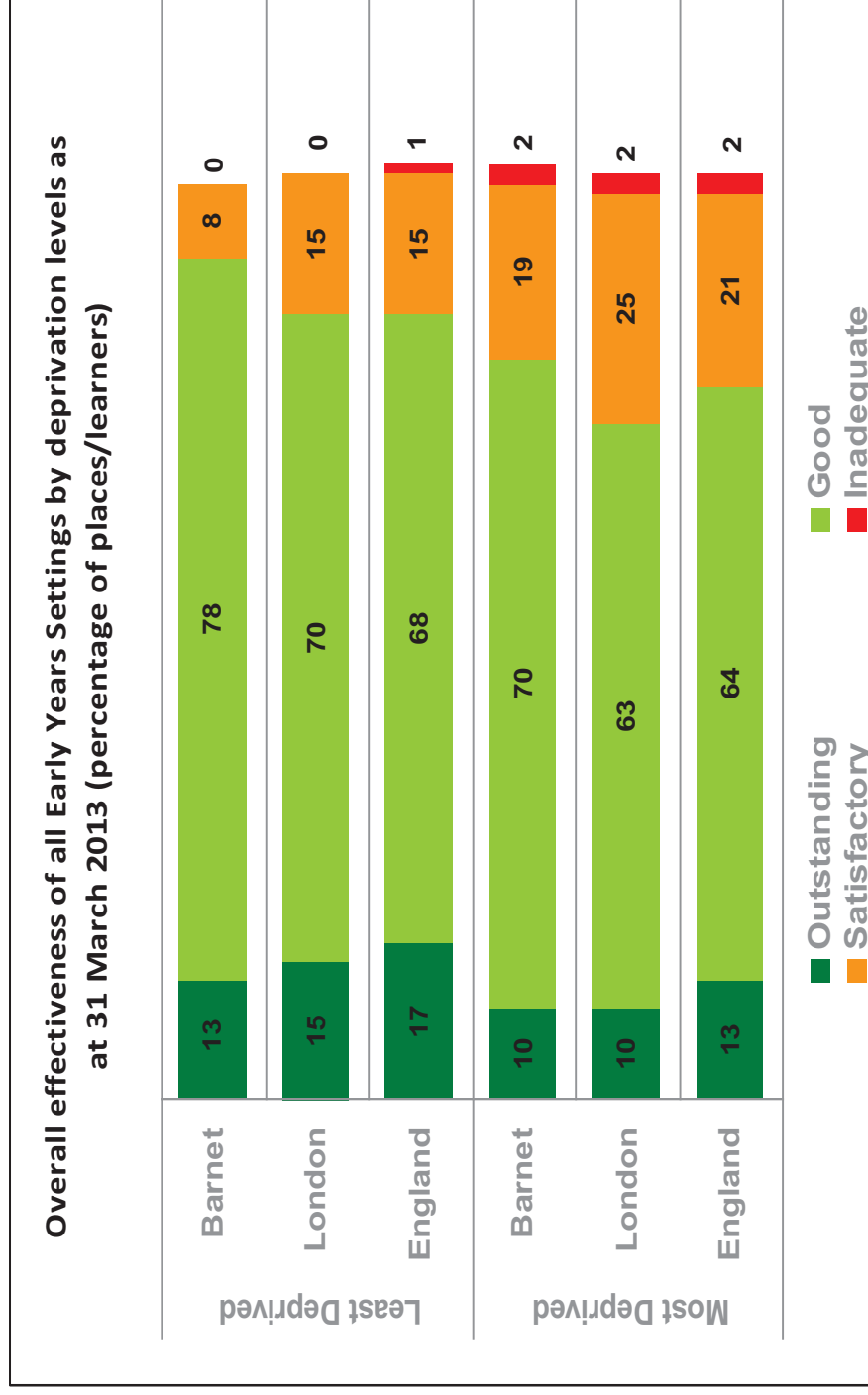
- Base their decision whether to fund a provider to deliver early education places solely on the provider's Ofsted inspection judgement, and not undertake a separate assessment of the quality of the provider.
- Fund places for two-, three- and four-year old children attending any provider rated 'good' or 'outstanding' by Ofsted.
- Fund places for three- and four-year-old children attending any provider rated 'satisfactory/requires improvement'.
- Only fund two-year-old children in 'satisfactory/requires improvement' providers where there is not sufficient accessible 'good' or 'outstanding' provision.
- Fund new providers registered with Ofsted until their first full Ofsted inspection judgement is published.
- Secure alternative provision and withdraw funding, as soon as is practicable, for children who are already receiving their funded entitlement at a provider when it is rated 'inadequate' by Ofsted.

Ofsted Changes;

- A new framework for Ofsted changes means that 'satisfactory' is now 'requires improvement'.

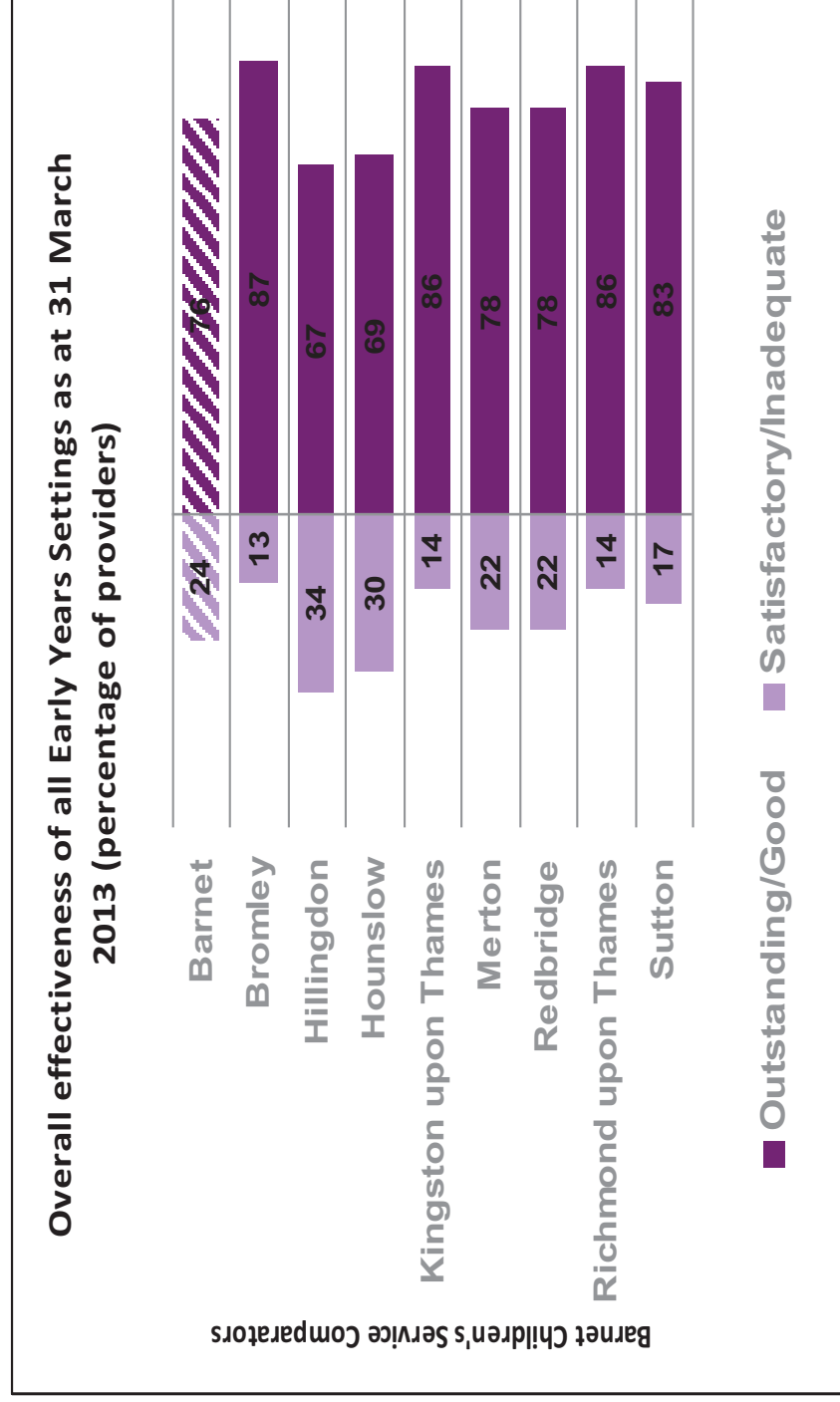
# Childcare quality in Barnet - benchmarking

The graph below outlines how in both the least and most deprived areas **Barnet performs better than the average** across both London and England.



# Childcare quality in Barnet – statistical neighbours

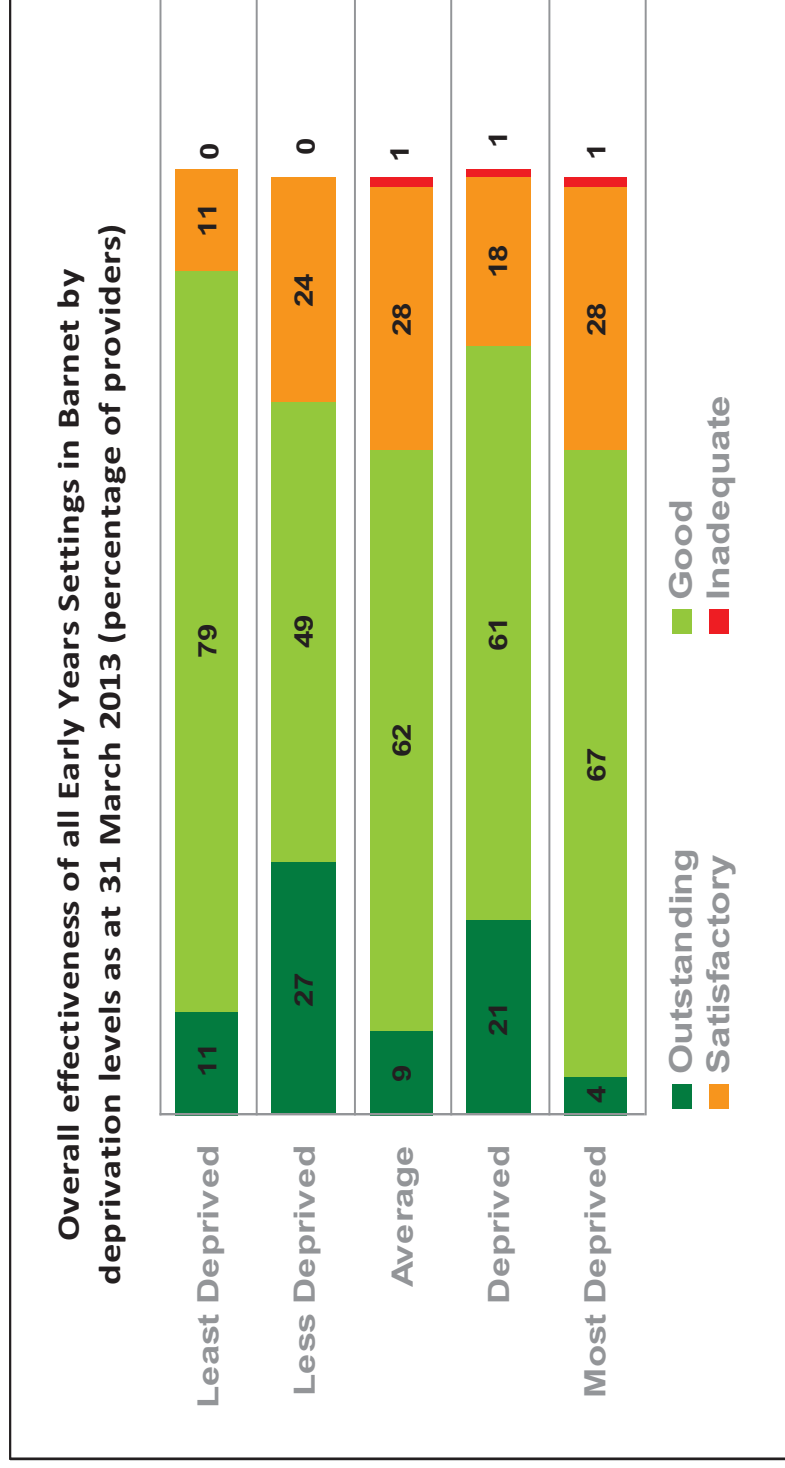
When compared to statistical neighbours Barnet ranks poorly for the proportion of Early Years settings deemed satisfactory / inadequate / needs improvement (24%).





# Childcare quality in Barnet – deprivation

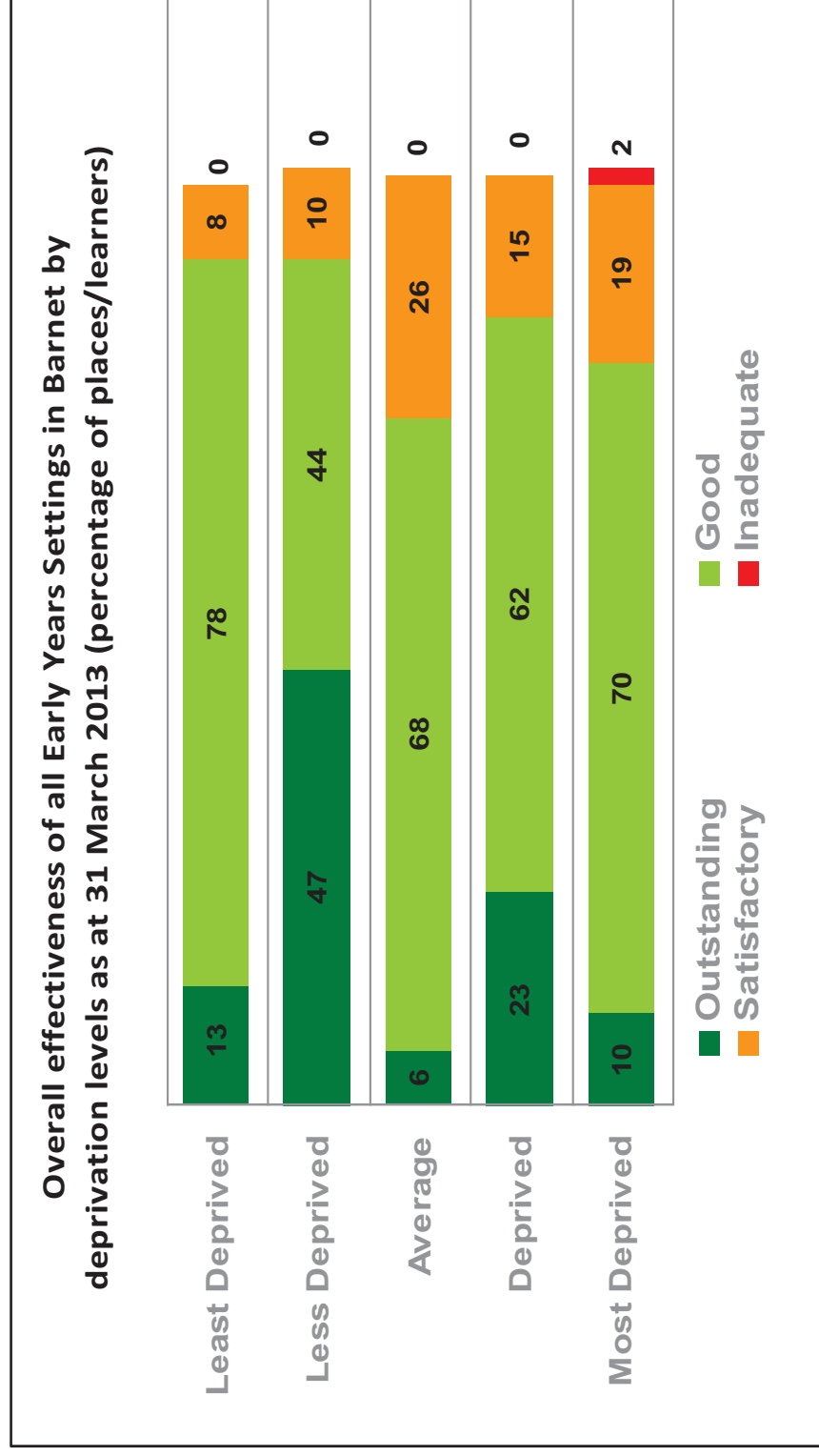
In the least deprived areas only 11 percent of providers are satisfactory / inadequate, whereas in the most deprived areas this is 29 percent, showing a gap of 18 percentage points.



Though quality is worst in our most deprived wards, there is **not a clear correlation between quality and deprivation**.

# Childcare quality in Barnet – deprivation

The providers judged by Ofsted to be delivering quality below good offer fewer places. The graph below shows the distribution by proportion of places and the gap between least and most deprived is less at **11 percentage points**. Again, there is **not a clear correlation between quality and deprivation**.



# Childminders

## Overview

A registered childminder is someone who works in their home caring for children aged 0 - 8 years for more than 2 hours a day for pay or reward. They are registered and inspected by Ofsted, and can care for a maximum of 6 children at any one time. In order to become registered they must demonstrate their understanding and ability to deliver the Early Years Foundation Stage (EYFS) and are inspected every 3 years to ensure they maintain standards.

## Numbers of registered childminders in Barnet

There are currently 391 registered childminders in Barnet and numbers have been steady at around 380 - 390 for about the last 5 years.

## Childminding support team

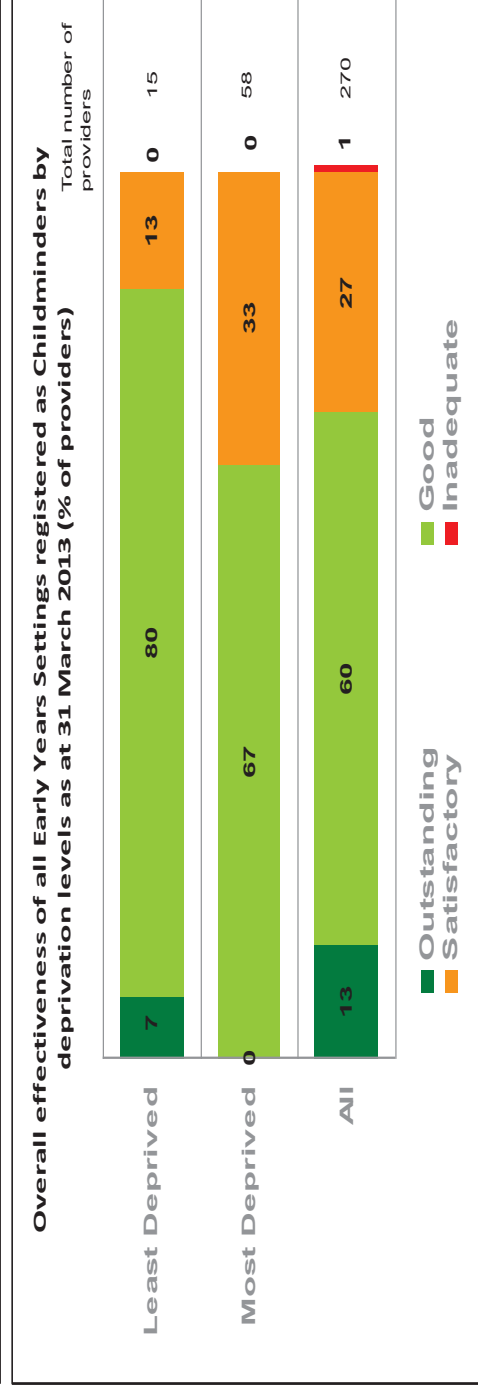
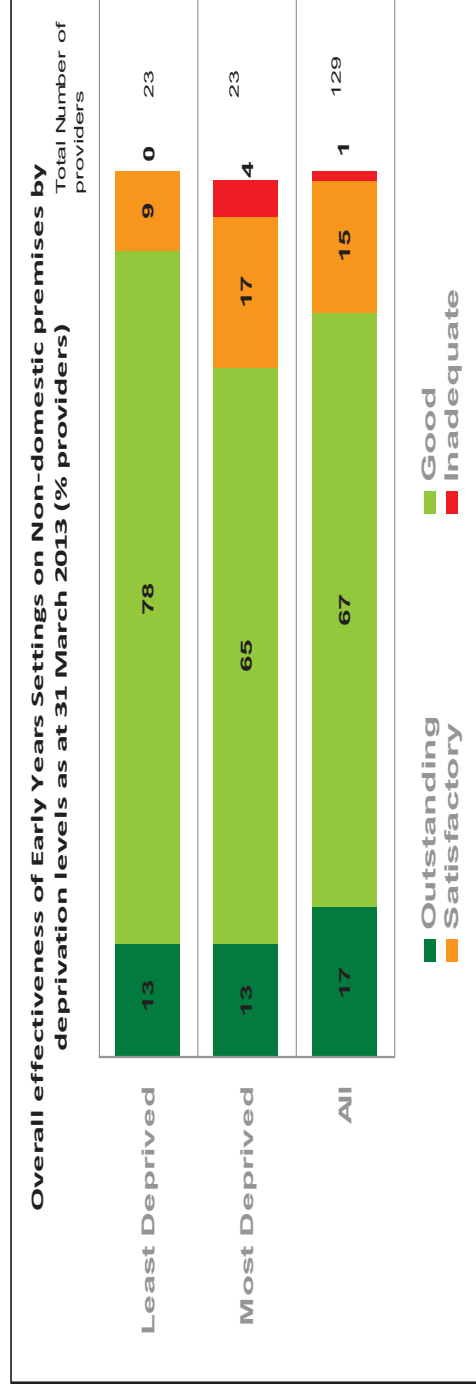
The team have had some form of contact with 68% of childminders, and 40% are actively engaged. There are around 125 childminders who have chosen not to have any contact with the team.

There is clear evidence that the childminders who actively engage with their Childminding Development Officer achieve higher grades at their Ofsted Inspection than those who do not.

Of those childminders in deprived areas, of the 23 engaged, 14 have had a good Ofsted rating and only 2 Satisfactory and below.

# Quality of provision: Non-domestic v Childminders

The two tables below demonstrate the distribution of Ofsted ratings for childminders and childcare on non-domestic premises. It demonstrates that significantly more childminders are in 'Satisfactory / Requires Improvement' than non-domestic childcare (11 percent age points).



# Satisfaction with childcare

- Only one in ten parents surveyed through the recent childcare market research were unsatisfied with childcare provision in Barnet. For those who were unsatisfied, the primary reasons given were:

Reason	Percentage permissible)	(multiple answers	were
Childcare is too expensive	56%		
Inconvenient times/not flexible	21%		
Inconvenient location	10%		
Poor quality of care	10%		
Other	44.5%		

# Childcare fees

There is significant variance in childcare fees as would be expected across Barnet:

Age	Fee Details									
	Hour					Session				
	Highest Recorded	Lowest Recorded	Most Frequent	Highest Recorded	Lowest Recorded	Most Frequent	Highest Recorded	Lowest Recorded	Most Frequent	Day
Under 2 years	£15.00	£3.50	£6.00	£64.00	£12.00	£25.00	£80.00	£30.00	£50.00	
2 years	£8.00	£3.50	£6.00	£64.00	£3.00	£20.00	£76.00	£18.50	£50.00	
3 – 4 years	£13.90	£3.50	£6.00	£62.00	£1.00	£30.00	£76.00	£5.20	£50.00	

This compares to the following rates paid by the local authority:

Age	LBB funded week – per hour	15 hours per week	Average cost cited by parents - per hour
2	£6.00		£6.00
3/4	£4.40 (average)		£6.00

# Expansion of Free Early Education for two year olds (FEE2)

## Context

The FEE2 offers eligible children up to 15 hours per week of high quality early years education. To qualify for a free place families must be a Barnet resident and fit the eligibility criteria.

- **Phase one:** From 1 September 2013, local authorities have to fund the 20% most deprived two year olds with 15 hours of quality childcare provision per week.
- **Phase two:** From 1 September 2014 the entitlement will then extend to fund the 40% most deprived two year olds.

## Current position

As at 1 October 2013 there are 121 providers offering the FEE2 with 509 places currently being accessed. An earlier analysis showed that places were split as follows:

- 13% children in outstanding providers
- 72% children in good providers
- 14% children in satisfactory providers

62% of respondents to the recent parents survey with at least one child aged 0-2 years stated that they were **not aware** of the FEE2 offer.

## Next Steps

An action plan is being implemented to develop more awareness around the FEE2 scheme and provide further information across the borough.

# Free eligibility for 3&4 year old offer

- All three and four year olds are eligible for up to 15 hours of free early education for up to 38 weeks per year.
- We have 205 providers delivering free early education for 3 and 4 year olds (FEE 3&4 offer). This includes maintained nursery schools/classes; private, voluntary & independent nurseries; children's centres and childminders.
- 48% of parents are currently accessing a FEE 3&4 place.
- The recent parents survey showed that 78% of parents with at least one child aged 0 – 4 years were aware of the existence of the FEE 3&4 offer. Awareness was lowest in the South planning area of the borough.



# Nursery schools - background

- Barnet has four maintained nursery schools (Hampden Way, Moss Hall, St Margaret's and Brookhill) that have traditionally been funded by the local authority as nursery schools alongside the private, voluntary and independent nurseries.
- The Early Years' Single Funding Formula (EYSFF) in Barnet changed in April 2013 by bringing in a single rate for three and four year olds calculated on the participation rates of the establishment (per child per hour) rather than by place. A full consultation was undertaken with representation from nursery schools, schools and other nurseries from across the borough. The result was a transparent arrangement for all childcare providers including nursery schools.
- The funding received by maintained nursery schools has been significantly higher (per child per hour) than other private, voluntary, independent settings or schools for some time. Under the reformed school funding system, these nursery schools would receive a total budget reduction of around £800,000 per annum.

# Nursery schools – funding from 2013

- In October 2012, Barnet's Schools Forum agreed to fund these four maintained nursery schools at a total of £2,000,349 from Dedicated Schools Grant (DSG) for a transition period during **2013-14**.
- The Barnet Schools Forum is considering a further transitional year in which the nursery budgets are maintained at the same rate in **2014-15**. An initial review of the budget will be undertaken at the Schools Forum meeting on 4 October with a final decision on the budget in January / February 2014.
- The standard funding arrangement under the Early Years Single Funding Formula is unsustainable for these four nursery schools.
- Sustainable options are being identified through a collaborative approach working alongside the nursery school head teachers.

# Welfare reform - background

The data did not show:

- What steps have been taken by parents to arrange suitable childcare and also what their childcare needs are e.g. times/days/ location.
- What type of work parents are trying to access – which will have an effect on their childcare needs.
- Whether or not the skills of effected parents match the skills required for available jobs.
- Is suitable childcare the only barrier or is it a combination of factors (i.e. lack of skills/jobs)?

# Supporting families with vulnerable children affected by the cap

## *Objective:*

- Identify families with vulnerable children due to be affected by the benefit cap and ensure they (**understand what is** **are given** the right, joined-up support

## *Where we are now:*

- An Information sharing agreement is in place which allows us to share data between the Benefit Cap task force and both the Children in Need and the Troubled Family / Family Focus teams.
- Welfare rights advisers have been seeing people in children's centres to provide welfare support.
- Children's centres have now been drafted in to help us engage with families with children under 5 who to date have not engaged with the task force

## *Where next:*

- While legality of sharing data is overcome, resource to extract, match and share this data has been an issue and will continue to be challenging.
- Accessing data about closed cases has proved to be more difficult – while there's no data sharing barrier, resource is an issue.

# Actions to remove the childcare barrier

## **Objective:**

- Remove any real or perceived childcare issues presented by parents affected by the cap as a barrier to work

## **Where we are now :**

- Job Centre+ (JCP) identified 146 parents impacted by the benefits cap citing childcare as a barrier, of which 79 had children under school age and 15 had under 2's (no free childcare eligibility).
- Childcare matching events have been held which were well publicised to people affected by the cap (via letter sent to every household) but these were poorly attended by those affected.
- A questionnaire aimed at developing a greater understanding of the childcare barriers has been trialled with the task force.
- JCP officers have been trained in using the Family Information Service (FYI) and encouraged to use it to remove the childcare barrier when talking to customers
- The task force has identified 13-15 cases requiring support / information about childcare and have referred these to FYI

## **Where next:**

- The task force has had fewer people citing childcare as a barrier to work than we first thought (5-10% rather than 30-35%) – need to do more to understand why
- Still need to get to the bottom of what the real issue is here – JCP's view on this is different to our experience.

## Childcare in Barnet – summary of issues

1. The quality of provision for the most deprived is weaker.
2. The quality of provision offered by childminders is more likely to be weak than that of other providers.
3. Changes will be required to align to changes in national policy.
4. Demand will soon significantly outstrip supply in some areas.
5. There is significant growth in the population of 0-4s from some minority ethnic groups.
6. Knowledge of the 2 year old offer is still limited and the scheme will significantly expand next year.

# LBB support to childcare providers

The currently offers support to childcare providers through a variety of internal and external teams:

Team	Resources	Role
<b>Early Years Standards Team / Narrowing the Gap</b>	1 EYST lead, 1 NTG lead 3 ATs (2FTE), 1 EY standards consultant, 1 EY training coordinator	<ul style="list-style-type: none"> <li>- Offers guidance, support and training across all early years settings to raise quality and improve educational attainment.</li> <li>- Statutory moderation of EYFS profile across all maintained and independent schools.</li> </ul>
<b>Pre-school inclusion team</b>	4.5 – 5 FTE (1 team leader, 8 staff) – commissioned from Oakleigh School – <i>cost tbc</i>	<ul style="list-style-type: none"> <li>- Promote early intervention and inclusive learning environments</li> </ul>
<b>Barnet Pre-school learning alliance</b>	£306k (33 month Raising standards contract)	<ul style="list-style-type: none"> <li>- Guidance on policies, procedures, safeguarding and welfare requirements for Private, Voluntary and Independent settings</li> </ul>
<b>Children's Centre</b>	Part of core offer	<ul style="list-style-type: none"> <li>- Should offer CM groups at all centres and have clear links to local settings</li> </ul>
<b>Childminding team</b>	1 Senior CM co-ordinator 2 CM Network development officers	<ul style="list-style-type: none"> <li>- Provides support and training for CM inc. around support with Ofsted, professional development, quality assurance scheme</li> </ul>
<b>Ofsted Registration</b>	0.7 FTE	<ul style="list-style-type: none"> <li>- Support childcare providers looking to register with Ofsted, ensure ready to set up</li> </ul>
<b>Nursery Schools</b>	TBC	<ul style="list-style-type: none"> <li>- Offer support to a range of settings but not currently clearly commissioned to do so</li> </ul>
<b>FYI? Service</b>	4FTE (although covered by temps currently and staff multi – skilled across contact centre)	<ul style="list-style-type: none"> <li>- Offers information to public, mainly through signposting and encouraging self-support</li> </ul>
<b>FEE 2, 3 &amp; 4 support &amp; EYVF support</b>	3FTE 1 Project Coordinator and 2 Brokerage posts to support FEE2	<ul style="list-style-type: none"> <li>- QA of schemes (no longer)</li> <li>- Support around 2 year old offer development</li> <li>- Provide bespoke brokerage for EYVF scheme for parents and providers alongside social care.</li> </ul>

## LBB support to childcare providers (2)

Childcare support	Type of setting supported			
	PVI's (Private, Voluntary, Independent)	Maintained Sector	Children's Centre's	Child-minders
Standards team (including. NTG)	X	X	X	
BPSLA (Raising standards)	X			
Pre-school Inclusion team	X			X
Childminding team				X
FEE support	X	X	X	X
Ofsted registration	X			
Children's Centres				X
Nursery schools	X			



# Childcare settings views of professionals

A wide range of support is offered for childcare from a variety of teams. Whilst the teams work fairly well together, the fragmented nature of support is an issue.

Type of other professional	Very effective working relationship	Quite effective working relationship	Quite poor working relationship	Very poor working relationship	There is no contact
Community mid-wives	7.5%	2.5%	1%	1%	88%
Health Visitor	13%	11%	6.5%	5%	64.5%
Children's Centre workers	27%	21%	8.5%	3%	41.5%
GP's	5%	12%	5%	3.5%	74.5%
Social Workers	23%	27%	6%	5%	39%
Family focus workers	16%	12%	6%	3%	63%
Barnet pre-school inclusion team	43%	12%	3%	0	42%
Barnet early years standards team	37%	12%	4%	1.5%	45.5%
Speech and Language therapist	37%	17%	7.5%	6%	32.5%

# LBB support offered to childcare - findings

- A wide range of support is offered for childcare from a variety of teams. Whilst the teams work fairly well together, the fragmented nature of support is an issue.
- A more coherent approach to support childcare settings could reduce duplication, improve the ability to target resources and improve accountability.
- The system is confusing for providers to understand and navigate and a more coherent approach would simplify the system for the settings.
- The settings supported varies from team to team, with some inconsistency between what support is offered to PVI's, Childminders and schools.
- A closer relationship between various teams and children's centres would be beneficial, as would a consistent role and approach for children's centres in their support role.
- Although the pre-school inclusion team have not been considered through the Early Years Review they need to be taken into account as part of a subsequent evaluation of options.
- Statutory changes, making Ofsted the only arbiter of quality, will mean the quality assurance process for the 2 year old offer (and 3&4 year old offer) needs to change – this hasn't been planned strategically at present.
- Generally, there is a need for clearer recording of the outcomes from the work supported by the teams.

# Childminder / childcare agency pilot

## Background and purpose

The Government are proposing the introduction of childminder agencies from September 2014. The Government foresees individual childminders joining an Ofsted registered agency and paying that agency a fee for its services - providing information, 1:1 guidance, registration with Ofsted, training, quality assurance and reduce the admin burden.

The agency would be responsible for the quality standards for care and learning of its childminders and would receive the Ofsted grading not the individual childminder. Participation in the new model would be on a voluntary basis, having the choice to remain independent and be inspected by Ofsted.

## Current timescales

- Late 2013/early 2014 - evaluation of work to date on testing agency model including the appetite for agencies in different areas; business models and support structures and the inspection model for agencies.
- September 2014 - agencies are able to register with Ofsted.

## Role of the council

Given that there are a significant number of childminders that are still not 'good' or 'outstanding' and agency could be helpful tool for improving quality – if the right individuals were to participate. Once further evidence is available it would be sensible for the council to assess how much effort it is worth expending to support the development of an agency in Barnet and how this should be progressed.

# National research on childcare

The majority of national research on childcare emphasises the importance of staff with higher levels of qualification (graduates) on the quality of childcare.

A recent report produced by the IPPR entitled *Early Developments – Bridging the gap between evidence and policy* has stressed the importance of high quality childcare for child development.

Evidence shows that graduates improve the quality of provision and outcomes for children, especially those with childcare qualifications – they also boost the quality of care of less qualified colleagues.

Moreover, the positive impact of high-quality is more pronounced for those children who are at risk of starting school ‘behind’ their peers: those with less-educated parents, from lower income, or for whom English is a 2<sup>nd</sup> language

Research as part of the Tickell Review emphasises that although there has been improvements in quality, there has to be a greater emphasis on the role of parents and carers in children’s learning.

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# Children's centres and family support

The focus in this section is the role of children's centres and other related services, and how they might be developed into a more coherent, efficient and effective service

- 13 Children's Centre's across the borough.
- Cost of £4.3m.
- 8 delivered by schools, 4 delivered by local authorities and 1 delivered by a voluntary sector organisation.
- The 13 children's centre's are all individually registered for Ofsted purposes.
- Each centre has it's own 'reach area' of families it should be working with defined by geography.

Other services include;

- Health Visitors
- Community Midwives
- Family Nurse Partnership
- Parenting Programmes
- Community Coaches
- **Fyi?** service

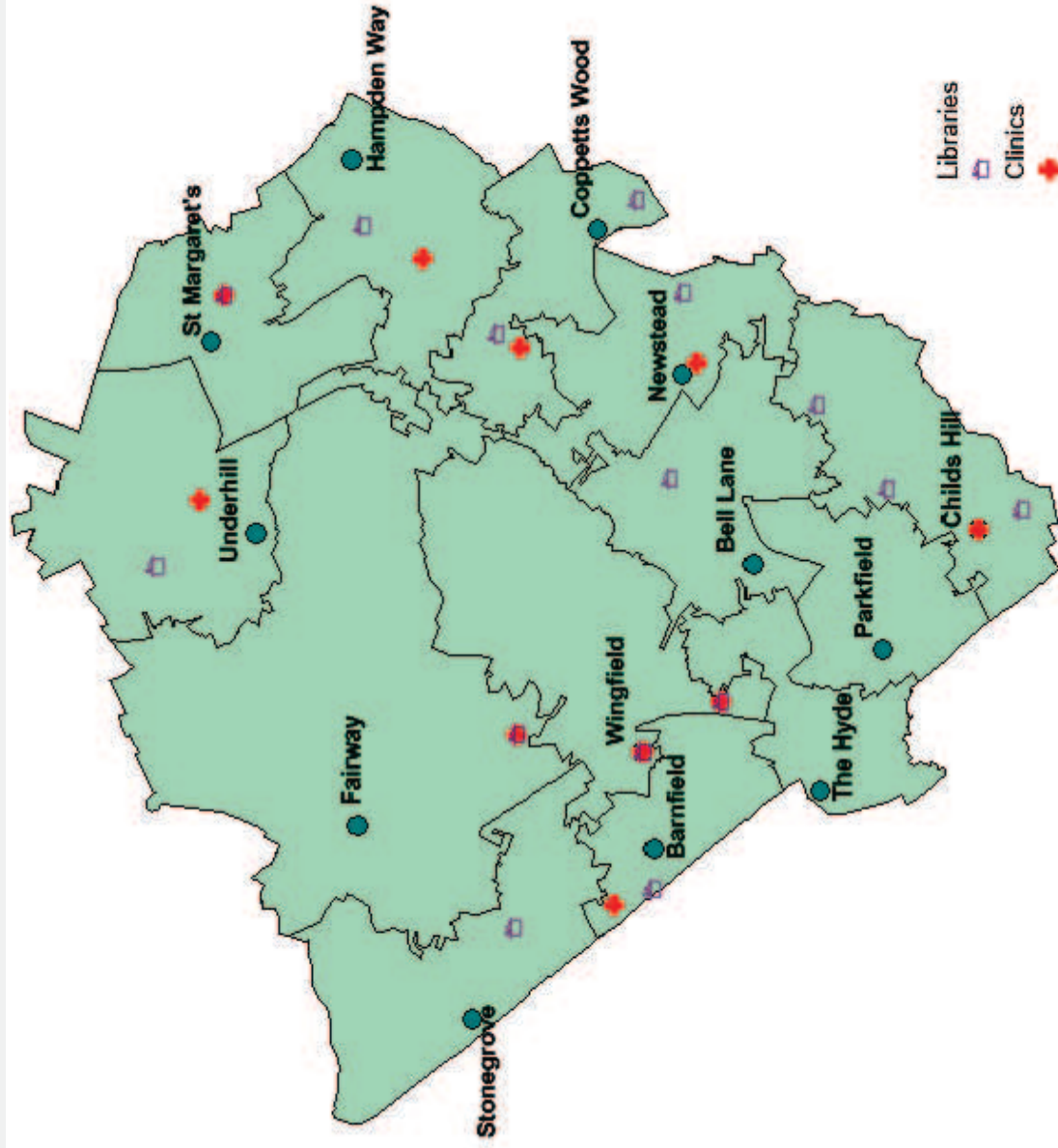
# Children's centre – statutory duties

Local authorities should:

- Ensure a network of children's centres.
- Reasonable travel distance.
- With health and employment services, consider how best to ensure families can access services.
- Target children and families at risk of poor outcomes.
- Demonstrate all children and families can be reached effectively.
- Opening times meet needs.

There is a presumption against the closure of children's centres.

# Children's centre reach map





# Children's centres – Hempsall's review (1)

LBB commissioned a research organisation (Hempsall's) in November 2012 to undertake an evaluation of children's centres. The findings of the review are summarised below:

## 1. What impact do Children's centres in Barnet have on the journey of children and families?

- Activities and services offered at children's centres can be regarded as 'gateway' services; they may (and frequently do) lead to participation in other activities and services – 56% of those surveyed first accessed the stay and play service.
- 82 per cent of respondents said they had experienced positive outcomes from using Children's Centre's
- 49 per cent thought that parenting advice and support had a positive impact at children's centres

## 2. To what extent do children's centres effectively offer value for money?

- There is a need to improve data to support value for money (VFM) assessments
- A number of children's centres in Barnet are achieving real value for money in a number of service categories by recouping costs or generating a small per user incomes for activities.
- The evaluation identified potential to improve coordination of services and partnership working between key stakeholders and improved data sharing could support more effective targeting of resources

## 3. How can Barnet's Children's Centres offer value for money and achieve the greatest impact?

- There is a need to re-focus local performance targets on outcomes, linked to national research identifying where greatest impact can be achieved.
- A cluster model of delivery may be more efficient, allowing for flexible deployment of staff.
- Potential to strengthen links with partner organisations and review and streamline data sharing protocols.
- Value for money assessment should be developed as a routine evaluation of services delivered in children's centres, based on a cost per user

# Children's centre – Hemsall's review (2)

Recommendations of Hemsall's report:

- Performance targets should fully make the move to **focus on outcomes** and not outputs. Children's Centre managers should be involved in setting performance targets.
- Monitor take-up of services by groups identified as being '**in greatest need**'.
- **Re-consider service delivery** in centres where families are not living in areas of relative deprivation.
- Review the **catchment areas** and cross-border flows.
- Review the potential for a **cluster model** of delivery.
- Review **service delivery and data-sharing** protocols across the borough.
- Introduce a standardised **value for money assessment**.

# Children's Centres – new Ofsted inspections

Under the current inspection framework there are four possible judgements:

- Outstanding
- Good
- Requires improvement (replaces satisfactory)
- Inadequate

Judgements will be made on the following areas:

- Access to services by young children and their families
- Quality and Impact of Practice and Services
- Effectiveness of leadership, governance and management
- Overall effectiveness of centre

There is now a much greater emphasis on children's centres knowing the families within their reach area including their vulnerable or targeted groups and families. To be “good” or above centres must be able to demonstrate they know at least 80% of their families and that 65% of their targeted families are registered with the centre.

# Ofsted – children’s centre results

- Our first three inspections under the new framework all resulted in a ‘requires improvement’ judgement.
- Five of the remaining centres have not been inspected before and so are therefore at risk of immediate inspection.
- A clear and robust action plan is in place to deal with the most important improvement points raised in the first inspections. These include:
  - Intensive support on data analysis for each reach area.
  - Training sessions.
  - Mock inspections with an ex-Ofsted consultant.
  - Intensive support from the early years standards team.
  - Meetings with representatives of all advisory boards.
- The Hyde Children’s Centre currently has significant performance issues and we have procured specialist support to drive improvement at this centre.

# Children's centres – reach areas background

- The reach area of a children's centre maps out the **local households that should be supported**.
- There have been a **number of revisions** to these areas since the initial development of the Sure Start programme.
- During **Phase 1 and 2** (2006-08) Barnet had 13 centres covering a relatively small part of the Borough **focusing on the most deprived areas**. Each had a reach area of approx 1km in diameter.
- During **phase 3 a further 8 children's centres** were opened in less deprived areas - largely based in local libraries or community centres. This offered a network giving full borough coverage.
- In 2011 Barnet **downgraded the phase 3 centres to linked sites** attached to the original phase 1 and 2 centres, each delivering 10 hours of activity.
- To ensure the network continued to provide full borough coverage the **reach areas were redesigned**, taking into account the number of under 5s and the number of LSOAs, including the number of LSOAs with a deprivation score of 30% or less.
- These revised reach areas are geographically quite large and many now have **families living more than 1 bus journey away from the centre**.

# Children's centres – reach areas developments

- A significant proportion of families access a centre that is closest to them but is not their “reach” centre. As currently configured in Barnet, parents can attend any centre but if targeted family support work is required families are referred back to their “reach” centre.
- Recent Ofsted Inspections, and the Hemsall’s evaluation have highlighted that the current reach arrangements make it difficult for centres to engage with the required 65% targeted families. This is due to the size of the reach area, the high number of families using centres not within their defined “reach” and the number of hours of delivery expected from the phase 3 sites in more affluent areas of the borough.
- Children’s centre managers have voiced their concern that the current reach areas hinder their ability to engage with targeted and vulnerable families.
- Families understandably find it difficult to understand that their most local centre is not in fact their allocated centre for family support. They may be engaging with their local centre for universal services (e.g. stay and play) however if the centre identifies that the family may require more 1:1 family support the family has to be referred to another centre and the family then need to build a relationship with new staff.
- The socio-economics of Barnet have changed. This has resulted in anomalies such as a centre with no deprived LSOAs even though its immediate neighbourhood is deprived.

# Healthy children's centres

- The public health team are currently commencing a programme to achieve public health outcomes through the children's centres. This includes:
  - **Mother and baby's health and wellbeing before, during pregnancy and beyond** - parenting programme, volunteer led parenting for domiciliary support, training, tooth brushing programme and fluoride varnish for oral health
  - **Nutrition/physical activity** – training, healthy eating/cooking workshops, resource development and provision, physical activity sessions, health and Wellbeing coordinator
  - **Breastfeeding** - peer supporters (3) paid on a session basis (£7.50 /hour)
  - **Smoking Cessation / family planning / drugs and alcohol** – support to women smoking in pregnancy, targeted work with fathers who smoke, training of early years and health professionals.
- This programme is a good example of commissioning through established delivery vehicles rather than further complicating the early years web of services.

# Health visiting and the family nurse partnership

- Closely aligned to this work is public health's review of school nursing, health visiting services, and the family nurse partnership in Barnet and Harrow. This will include:
  - Health Needs Assessment –demographic and geographical analysis
  - Stakeholder Analysis
  - Review of Service
  - Workforce Analysis
  - Options Appraisal
- The review will help understand any gaps in the current workforce and identify any risks to and probabilities of achieving expected trajectories.
- The review will help us develop an implementation approach to the recommendations in this report.



## Other services

A range of other services are offered in regard to wider family support. These include;

- Parenting programmes for hard to reach families
- Parenting programmes offered by family focus
- Community coaches
- Safer families service

# Practitioner feedback

Focus groups with a range of early years practitioners in Barnet highlighted the following issues:

- Children's Centre's could be improved by a **more joined up** approach, especially overcoming the issues of reach areas and sharing expertise and skills.
- **Outreach work** was seen as very important for getting to most vulnerable. Opportunities to focus more on the 120 toddler groups run by volunteers across Barnet and improved interaction between pre-schools / nurseries and Children's Centre
- Improved referrals. Changes could include a more effective and co-ordinated approach to **working with GP's** and improved relationships with **private nurseries**.
- Importance of **promoting the Common Assessment Framework** – needs wider understanding and use to improve early intervention
- Need improved **information sharing**, especially with health. Improved data means it is easier to target the most vulnerable or those who do not access to services.
- Biggest improvement in relationships required are with **mental health and housing** – need to improved mechanism / referrals / support

# Evidence review – children’s centre effectiveness

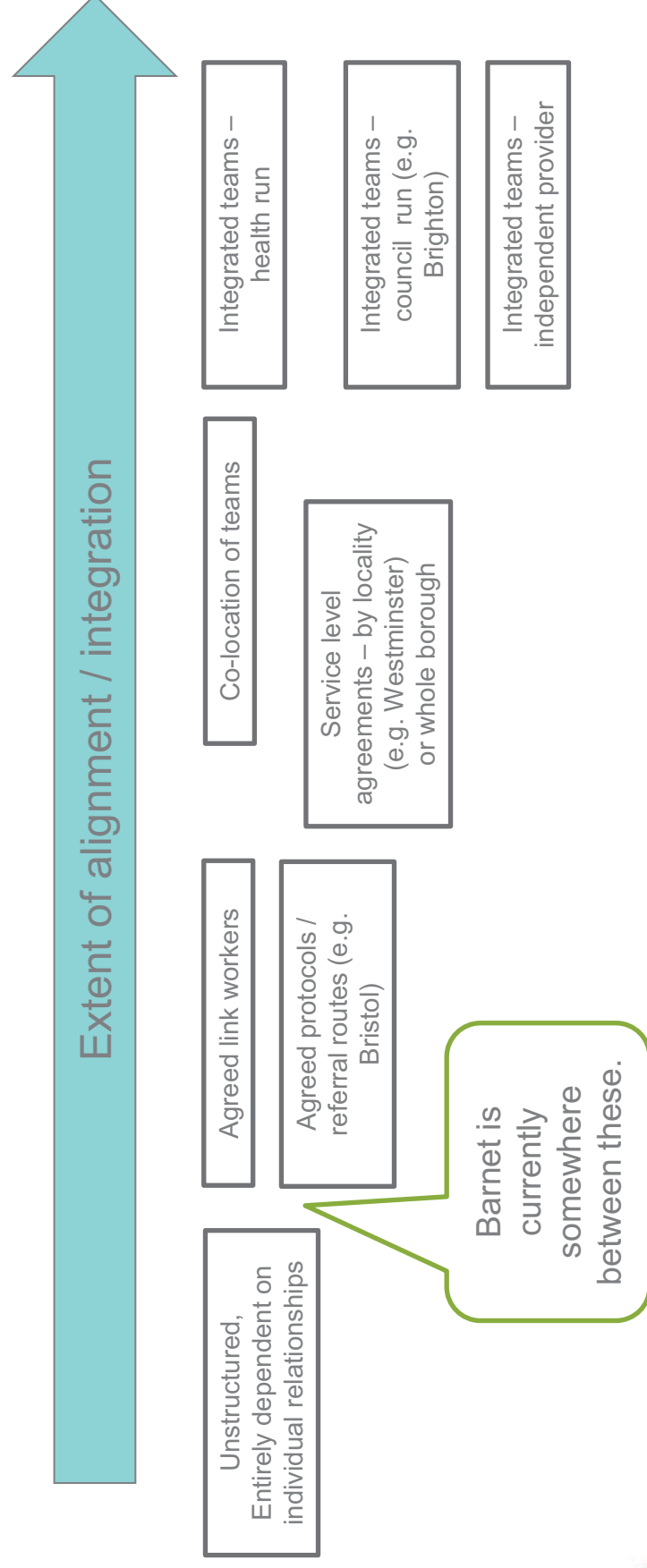
- A balance between universal and targeted services needs to be developed – ‘services targeted at the poor risk being poor services’ - Need to offer distinct and **finely tuned services to particular groups.**(*Innovation Unit Report*)
- All centres should develop a **volunteer force** – employing a **volunteer co-ordinator** (*Parliamentary report*)
- Jobcentre Plus must be a key partner for Sure Start Children’s Centres with **JCP advisors delivering sessions** in key centres (*Parliamentary Report*)
- A future model of children’s centres must be co-constructed by local people and offer more **mutual self-help**, helping people to find their own solutions (Innovation Unit) - **Participatory planning processes** and the participation of stakeholders are features of successful collaborations (C4EO)
- Important to explore the opportunity for **income from services**, yet be careful not to put people off (*Innovation Unit*)
- Service integration is best understood as an ecological ‘integrated Children’s System’ that is **centred on the child and their family**’ (*Effective practice in integrating early years services*)

# Evidence review – health

- There is a national lack of support for **perinatal mental health** – the Wave Trust estimate 750 families struggling with this in the average local authority area.
- All **perinatal services should be delivered under one roof** with midwifery, health visiting and Children's Centre services all being accessed from Children's Centre's (Parliamentary Report).
- The effectiveness of the **integrated model** in Brighton is demonstrated through outstanding Ofsted scores for health for all their children's centres (under the old framework).
- Frank Fields review into early years stressed that CC should look at **developing birth registrations, naming ceremonies** and other benefits advice in Centres.
- The **importance of health visitors** in identifying risk factors, promoting infant mental health (emotional wellbeing); assesses young children's social and emotional development, support parental psychological health and parenting capacity. (Wave 2)

# Integration with health

There are a range of options for how early years services can be configured with differing levels of alignment / integration :



# Health led model – Brighton case study

Brighton and Hove developed an integrated health led model from the outset of Children's Centres. Health Visitors, along with other children's health professionals, were seconded into the council under a section 75 agreement.

In the Brighton model;

- Health visitors are the lead professionals for CAFs
- HVs supervise Early Years Visitors (council outreach) – all families are known, no referrals or duplication
- Support is based on the HV 4 levels of support (e.g. universal, universal plus, universal plus partners)

Success:

- Effective identification and targeting of families for Universal Partnership and Partnership Plus Services
- High breast-feeding rates
- Reducing the number of looked after children and child protection numbers

Ofsted report on one CC – “well... The health led model plays a fundamental role in streamlining services and integrating provision... Highly effective intervention by the centres health partners has made an impressive impact on children's welfare and family well-being”

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# Early identification and support - national research

- **Influencing social and emotional capability** becomes harder and more expensive later on in someone's life.
- Early intervention should be more widely adopted to make '**massive savings** in public expenditure'
- Recommends a focus on **antenatal education / preparation** for parenthood and 0-3 social development, health and well-being boards should create **integrated early intervention approaches**.

*(Graham Allen Review)*

- The early years are crucial - by the age of 3 a babies brain is 80 per cent formed.
- GP's, midwives, health visitors, hospital services children's centres and PVI nurseries offer **fragmented support** which is neither well understood nor easily accessed by all of those who might benefit from it most.
- Local and central government should give **more prominence to the earliest years** in life, from pregnancy to age 5 and that funding moves to early years and weighted toward the **disadvantaged children** as we build the **evidence base** of effective programmes.

*(Frank Fields Review)*



# The potential for prevention – Barnet evidence

- In August 2013 a sample of 81 randomly selected CP, LAC, and TF cases were reviewed to identify the proportion of cases that could have been prevented, and how the escalation of need could have been averted
- In total, 48 practitioners were interviewed as part of this review.
- The review found the following:

Type of case	Percentage preventable	Parental factors			
		DV	Drug abuse	Alcohol abuse	Mental health
Troubled families	<b>77%</b>	54%	23%	23%	31%
Child protection	<b>29%</b>	64%	49%	47%	45%
Looked after children	<b>14%</b>	62%	67%	48%	67%

- A significant number of LAC cases were where one or more siblings of the child had already been taken into care and practitioners felt it was inevitable that subsequent children would also. Over time, if we intervene early there may be greater potential as these cyclical incidents are avoided.
- A similar exercise recently run by Bexley found that 39% of looked after children's cases were very likely to have been avoided and 39% might have been through an improved whole family approach.

# Adult services working with parents

The case review work was followed up by interviews with the lead service providers who support people with mental health issues, drug and alcohol abuse and domestic violence. These included; Westminster Drug Project (WDP), Safer Families Team (DV) and Barnet Community Alcohol Team.

- The providers are predominantly **adult focused and not family focused** – this is how they have been commissioned.
- Where attempts have been made to **look more holistically** at the family (e.g. parenting courses run by WDP), these have **often stalled** or had limited impact due to resource constraints.
- The majority of services would refer all / most cases where a child was involved (0-18) to **safeguarding** as the first point of call. However, where cases do not meet the social care threshold workers have a very **limited awareness** of other family services (including children's centres) and so there is often little support provided with parenting. Domestic Violence, through the Safer Families Team, was the only service with clear links to children's centres and early years services.
- The numbers accessing services with young children was fairly low, estimating **around 5 per cent of clients** (this, for example, equates to 15-20 clients per year for the Westminster Drug Project)
- It was felt **targeted parenting support** would be the most suitable intervention - parents would feel comfortable attending such sessions.
- The adult mental health service identified a short term opportunity to quickly develop a bespoke parenting programme for adult service users with young families and co-deliver this with children's centres.

# Early Intervention work in Barnet

Below are just a few examples of good early intervention work in Barnet. As part of Phase 2, learning from the successful elements of Barnet's early intervention work will be used to develop a new model of delivery.

## **Parenting programmes for hard to reach families (EIP contract)**

As detailed in the slide on family support, there are a range of parenting programmes offered to support families, preventing them from reaching a higher level of need.

## **Community coaches (EIP contract)**

Homestart Barnet provided a service that is citizen-led and designed to enable people too effectively navigate the support available to them and support themselves out of disadvantage.

## **'Team around the setting' – MAST team.**

The MAST (Multi-agency Safeguarding Team) work on having a 'team around the setting'. These teams will work around a setting, for example, a school and co-ordinate the support to those identified as vulnerable within the school.

## **Coppett's Wood case study**

Coppett's Wood Children's Centre have developed a number of case studies which demonstrate the impact of early intervention and the savings that have come from that work.

# Evidence review highlights – early identification

- **Risk factors during pregnancy** (including factors as maternal stress, diet and alcohol or drug misuse) should trigger targeted services (for example training on the social and emotional development of children, talking therapies) (Wave Trust).
- By **fully integrating health staff** and children's centres, Brighton use midwives and health visitors to quickly identify high risk families and use the professional status and trust of these staff to encourage take-up of additional support such as parenting programmes.
- Croydon have invested in **relationships with local community organisations** on priority estates to build trust and increase the take-up of parenting support amongst high risk families.
- The importance of **health visitors** in identifying risk factors, promoting infant mental health (emotional wellbeing); assesses young children's social and emotional development, support parental psychological health and parenting capacity. (Wave Trust)

# Evidence review highlights – supporting vulnerable families

- There is evidence that a **combined family approach** to intervention through an ‘Integrated Children’s System’ is effective (*C4EO’s effective practice in integrating early years services*)
- **Children’s centres should re-focus** on their original purpose – to identify, reach and provide targeted help to the most disadvantaged families. Councils should aim to make children’s centres a hub of the local community – maintaining universal services but aiming to target where the most impact can be had. (*Frank Fields review*)
- The **Greater Manchester community budgets** pilot is investing an extra £38m pa in early intervention with a projected net ROI after 5 years. Their “cautious” Cost Benefit Analysis suggests a cost-benefit ratio of 1:4. Some of the more interesting aspects to their approach include **regular screening** of all children through a multi-agency eight stage assessment process; a programme of **evidence-based interventions**; a shared **outcomes framework** and a CAF pathway from pre-birth to 48 months.

# Early years evidence review

The early years review has included a literature review and investigation of best practice that has spanned the following sources:

- Early Intervention Notes July 2013 (contained in email – password access only)
- Prevention and Early Intervention in Children's Services – Social Research Unit at Dartington - [here](#)
- Children Count Survey Tool – Social Research Unit at Dartington [here](#)
- Investing in Children (overview) – Social Research Unit at Dartington - [here](#)
- Early Intervention – Grasping the nettle – C4EO - [here](#)
- Integration Early Years – C4EO - [here](#)
- Conception to age 2 - [here](#)
- Early Years Framework Evidence Briefing - [here](#)
- Intervention or prevention? The leadership response to performance risk - [here](#)
- Early intervention: Good Parents, Great Kids, Better Citizen's - [here](#)
- Child and Maternal Health Intelligence Network – [here](#)
- DfE - Evaluation of children's centres in England: Strand 3 – [here](#)
- Best practice for a Sure Start Children's Centre – The Way Forward for Children's Centres - [here](#).
- Early Intervention Evidence – Coventry City Council - [here](#)
- Other examples of best practice (evidence) - [here](#)
- Bexley benchmarking - [here](#)
- Bright futures: local children, local approaches – LGA best practice - [here](#)
- 21<sup>st</sup> century children's centres – [here](#)
- Family and foundation years – evidence pack - [here](#)

Also, further discussions with Brighton & Hove, Bristol, Westminster, Croydon, Newham, Central London Community Healthcare NHS Trust, Early Intervention Foundation.

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# Summary of recommendations

- A joined-up Barnet early years system.
- A sustained focus on doing what works.
- A family approach with higher risk groups.
- Simplifying the system for parents and partners.
- Consolidation of support for early years settings .
- A further shift in the balance from universal to targeted services.
- Developing the workforce and strengthening volunteer programmes.
- Developing a sustainable funding solution for nursery schools.
- Ensure there is sufficient childcare in Barnet.



# A joined-up Barnet early years system (1)

- Though the current configuration of children's centres is not ideal, they are the best hubs we have to provide services across the borough.
- A **single approach to the management of children's centres** is needed. This would create one service operating through a hub and spoke system that shares resources, ideas, learning and data. This should be consistent but recognise the need for local approaches to local issues and the targeting of resources where they are most needed.
- Quickly introduce a more **formal partnership and collaboration agreement** between the children's centres that will allow families to be supported by any local centre, information to be shared and practitioners to work across more than one centre. Retain the widespread local delivery of services but work to identify how resources can be most effectively managed across the borough. Allow centres to focus on engagement with targeted families **reduce the minimum hours** of delivery from the **phase 3 hubs** from 10 to 4 hours p.w.
- Conduct an **options appraisal** to determine the most appropriate structure to deliver a joined up Barnet service. This should also consider how to develop consistency in how key workers are supported to relate to families whether children's centre outreach & family workers, family focus workers or volunteers (including community coaches) and identify how they can be micro-commissioners of early intervention programmes including parenting courses.

## A joined-up Barnet early years system (2)

- Further **integration / closer working with health** is needed to better identify high risk families and ensure they get the support that they need.
- Our priority should be to further **integrate services into children's centres** – especially health visitors, community midwives and mental health services.
- Put in place **partnership agreements** between health visitors and children's centres.
- Ensure that the children's centre options appraisal identifies the best model to **fully integrate health visitors with children's centres** when commissioning responsibility returns to the local authority in April 2015. This model should include a link worker attached to each GP surgery and a simplified referral route for GPs.
- Investigate how **families moving into the borough** with children under five can be referred onto health visitors / children's centres when registering with GPs.
- Our focus needs to extend beyond structures and processes to examine how to change **relationships and behaviours**.

# A sustained focus on doing what works

We need to develop a culture that is focused on evidence based improvement. Though this sounds woolly in practice this could mean:

- **Quarterly or termly reviews** with all partners to learn and improve. These will agree any activity to be stopped, trialled or expanded. Learning will be documented and made available to practitioners in an easily accessible format.
- Ensure effective use of **local and national evaluation** in determining commissioning / activity programmes.
- Reviewing **performance and contract management processes** to ensure they drive a focus on the delivery of outcomes.
- Reviewing administrative tasks and **data recording** to make them as efficient as possible – recording only what we need to improve, measure outcomes or meet statutory requirements.

# A family approach with higher risk groups

- Ensure all adult services supporting higher risk parents understand how to **work effectively with the Multi-Agency Safeguarding Hub (MASH)** and that the MASH understands what early years and family support services are on offer for ‘green’ or ‘blue’ cases (e.g. not a safeguarding risk).
- Development of **‘link’ officers** between family support / early years and adult social care and public health services (this could be achieved through the MASH)
- **Map out family services / early years support** services and provide to health, adult social care and public health services to counter the current lack of clarity.
- Develop a **shared training plan** between adult social care and public health services to improve the ability of practitioners to identify issues early on.
- Follow up the case review exercise with some more thorough **multi-agency reviews** of a smaller number of cases to see what other lessons can be learned.
- Review links with **housing**.
- Work with adult social care and public health to **review commissioning plans** and identify how the achievement of whole family outcomes can be incentivised.

# Simplifying the system for parents and partners

- Ensure all GPs have **named link workers** for children's centres, health visitors and community midwives.
- Review the **role and approach of FYi** to ensure it meets the most pressing needs of parents and partners. This needs to include the lessons learned from the benefits cap taskforce and the research recently undertaken with parents.
- Investigate the potential for FYi to provide a **single appointments system** / contact number for children's centres and health visitors (and option to extend further – e.g. for community midwives).

# Consolidation of early years settings support

- Conduct an **options approval** to evaluate the different ways in which we could develop a more coherent approach to support childcare settings to reduce duplication, improve the ability to target resources and improve accountability.
- Develop a consistent **outcomes framework** and review what is recorded to ensure that each team can report against this.
- This needs to include consideration of how the pre-school inclusion team fit with these services.

# A further shift in the balance from universal to targeted services

- We have to and want to **continue to provide universal** services but the **balance** of spend is not clear. As we develop options appraisals for children's centres, health visitors and support to settings we need to be clear on which services are targeted at which groups and that the **balance is appropriate**.
- Services need to be better targeted towards the clients of services for those **parental factors** most likely to result in a social care intervention – mental health, drug & alcohol abuse and domestic violence. Analysis of **community profile data** also needs to drive service planning and delivery
- A **clear pathway** should be developed to ensure that when **risk factors during pregnancy** are identified (e.g. high maternal stress, alcohol or drug misuse) that GPs and midwives should trigger targeted services (for example parenting classes, training on the social and emotional development of children, talking therapies).

# Developing the workforce and strengthening volunteer programmes

- Review the **skills required** to effectively work with vulnerable families and conduct an audit to identify any gaps.
- As other recommendations are implemented, develop a culture of learning, stretching and innovation through communications, management approach, knowledge management etc.
- Ensure that the **performance management** and **supervision** of practitioners focuses on the delivery of outcomes.
- Develop an **early years volunteer programme** focused on outreach, community relations and family support.



# Developing a sustainable funding solution for nursery schools

- Continue to recommend to the Barnet Schools Forum a further transitional year in which the nursery budgets are maintained at the same rate for **2014-15**. An initial review of the budget will be undertaken at the Schools Forum meeting on 4 October with a final decision on the budget in January / February 2014.
- Continue to conduct an options appraisal to find a sustainable longer term approach through a collaborative approach working alongside the nursery school head teachers.

# Ensure there is sufficient childcare in Barnet

- Increase both provider and parent **understanding** of the free entitlements.
- Engage in **market development** activities to:
  - **Increase supply** in the identified priority areas (South and West planning areas).
  - **Re-brand childminders**.
  - Encourage providers to offer **more flexible provision** with extended hours to meet the needs of working parents.
  - Overcome **specific cultural barriers** highlighted by a number of BME groups accessing childcare by ensuring children's centres are aware of their local target groups and have developed an approach to support them to access appropriate services.



NHS North Central London

<b>Meeting:</b>	<b>Date:</b>	<b>Agenda Item No: 6</b>
CHILDREN'S TRUST BOARD	24 October 2013	

<b>TITLE OF PAPER:</b> Increasing participation and addressing youth unemployment: learning lessons and next steps
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<p><b>SUMMARY OF PAPER:</b></p> <p>The paper updates the Board on key activities of the partnership to increase and broaden opportunities for Barnet's young people as they transition through into employment. In particular, it sets out the recent initiatives of the local authority and Barnet and Southgate College, the lessons learnt through trialling new approaches to engage businesses and young people and how this experience is shaping our future work.</p>
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<p><b>ACTION REQUIRED BY BOARD:</b></p> <p>The Board is asked to:</p> <ul style="list-style-type: none"> <li>• note the progress made and lessons learnt,</li> <li>• identify opportunities within their organisations to increase work-based opportunities for young people and</li> </ul>
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<p><b>AUTHOR OF PAPER</b></p> <p>Ian Harrison, Education and Skills Director, Barnet Council David Byrne, Principal, Barnet and Southgate College</p>
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**Increasing participation and addressing youth unemployment:  
learning lessons and next steps**

**Children's Trust Board**

**1. Context**

Barnet's Children and Young People Plan 2013-2016 sets out our partnership ambition to support young people in 'Preparation for Adulthood' where young people are ambitious for their futures and contribute positively to society'. We are measuring our success in meeting this vision through reducing the number of young people who are not in employment, education or training (NEET) and by increasing the number of young people that achieve a level 2 qualification by the age of 19.

One of the key activities set out to deliver this ambition is to offer 'relevant and tailored learning and employment opportunities'. In developing Barnet's Education Strategy, our partnership identified a need to broaden the range of opportunities available both to support a successful transition into adulthood and to enable young people to become economically independent. Whilst a high proportion of our young people in Barnet stay on at school to continue their studies and a higher proportion go on to university compared with elsewhere, we need to improve the opportunities available to ensure that all young people actively participate in employment, education and/or work related training.

The percentage of young people not actively engaged in education, employment and/or training at any one time is low when compared nationally, however, this percentage translates into around 300 young people aged 16-18 (based on June figures). There is a further cohort of young people for whom we have no confirmed activity and we know that there are a number of young people identified by schools at potential risk of becoming NEET when they leave school. This, together with the emerging evidence of significant churn at the end of year 12 suggests that we need to do more to ensure a broad and accessible offer. This is of particular concern in the light of impending changes to the A level curriculum and the requirements for young people to participate in employment, education or training for longer (Raising Participation Age).

Ensuring young people are ready to access the world of work and that they acquire the right skills and expertise is also crucial to Barnet's plans to grow. Whilst we work and engage with employers and businesses to open up opportunities to young people, education providers in the borough need to ensure that they are equipping young people with the right skills and helping them to become job ready. Schools and colleges now have the responsibility for delivering careers guidance, sharpening the focus on the future employability of students as they go through their school and college career.

Improving opportunities and the employability of young people has been a particular focus of the partnership of schools, the council and Barnet and Southgate College over the last year or so and this paper sets out the learning from our partnership programmes and outlines next steps.

The Board is asked to:

Note the progress made and lessons learnt,  
Identify opportunities within their organisations to increase work-based opportunities for young people

## 2. Local initiatives

Building on the initiatives and activities steered through our 14 -19 partnership group comprising of the local authority, schools, Barnet and Southgate College and alternative provision providers, last year, the council invested £1m to kick-start a specific programme of activity to increase local employment and training opportunities for young people aged 16-24 and to help young people improve and build their employability skills, confidence, motivation and work readiness.

The scheme, known as 'Platforms' was designed to develop a wide range of options and to pilot a number of approaches in order to gauge impact and to evaluate which projects were most successful to take forward. Following consultation with key stakeholders, businesses and young people, 8 work streams were piloted, all designed to tackle youth unemployment and to test and develop sustainable delivery models for future investment.

- Apprenticeships
- Internships
- Prince's Trust for young people needing support to motivate
- Voluntary Sector Placements
- Graduate Support
- 16-24 Employability Support
- Enterprise and Start-up Support
- Support for young people with learning difficulties and disabilities (LDD)

Delivery of the projects was developed through partnership and cross-directorate working by the Council, schools, Barnet and Southgate College, local employers, Job Centre Plus and voluntary sector organisations. Some of the funding was used to pump prime a Barnet Apprenticeship Training Agency and to fund research into a Studio School and a Retail Skills Shop.

Barnet and Southgate has also become the first college in London to develop a strategic partnership with REED NCFE which offers its young students (16-19) an exclusive pathway to gain employment within the Barnet area by providing bespoke employment advice and negotiating vacancy opportunities with local and regional employers.

### 2.1 Key successes of partnership working

- The main aim of the Council's Platforms programme was to reduce the number of young people not in education, employment or training aged 16-24 years in Barnet. During Phase 1, the JSA claimant count for 18-24 year olds living in Barnet has decreased from June 2012 to June 2013 by 1.1% (approximately 255 young people).
- By the end of July 2013, Platforms had engaged with over 290 young people, with over 160 young people actively participating over the 8 projects. Over 260 employers were engaged with, and of these over 70 employers actively participated with Platforms to boost their staff capacity and to support young people on the programme. 8 Internship and Jobs Mob placements were converted into full apprenticeships, demonstrating the benefits of a 'work trial'.
- Barnet Apprenticeship Agency established and generated 40 vacancies for young people during the period June 2012/13.
- New provision commissioned and open for young people with learning disabilities or difficulties leaving school. There have been 14 new places created in from September 2013 through a partnership between Oak Lodge School and Barnet and Southgate College. The new build due to open in 2014 on the Southgate campus of

the college will offer between 130-180 places and will create approximately 50 new places.

- The REED NCFE programme at Barnet and Southgate College generated over 100 direct part time job outcomes in 2012/13 for its learners.
- The College has developed sector based employer forums for 16-19 year old students which enables employers to directly promote careers and earnings potential and raise awareness of job vacancies.
- Barnet and Southgate College is an apprenticeship ambassador and has been involved with Barnet Schools in promoting the benefits of apprenticeships to young people.

## **2.2 Learning Lessons from the Platforms Programme**

- Apprenticeship opportunities have been the most difficult to fill and very resource intensive for the number of outcomes generated. The low minimum wage for apprenticeships appears to have put off young people aged 19-24 years, maybe due to overhead costs, such as travel. This is a feature common in London. However, we need to consider the types and levels of apprenticeship opportunities to make sure that we learn lessons from elsewhere in the country which have similar employment patterns where the take up of apprenticeships has been high.
- There has been a lack of interest in the enterprise support element of the Platforms offer, something reflected at a national level, potentially due to the economic climate and lack of confidence in starting a business at a young age. However, given the high number of small businesses in Barnet, we need to consider what support young people need to encourage more to join this local enterprise economy.
- Projects aimed at the harder to reach young people found it challenging to encourage take up among young people who lack motivation or face significant personal barriers to work including housing, family and mental health issues.
- Some young people were not job ready so required not only motivational support, but also intensive employability skills, which were provided by the Skills and Enterprise Adviser. Working directly with the young people and the associated business engagement and support is resource intensive.
- Most successful and popular elements of the Platforms projects were the paid Internships, the Princes Trust projects helping to motivate young people and voluntary sector funded work placements offering nine month placements for young people from the more deprived parts of the borough.
- There are a plethora of initiatives in place and emerging offered through a variety of routes. For example, DWP Day One, DWP graduate support projects, ESF project and the extension of New Enterprise Allowance. There are also a number of ESF and Youth Contract funded projects aimed at NEETs and young people at risk of becoming NEET which are also vying for referrals. It will be important going forward to tie in with National Initiatives being developed and include the flexibility to adapt projects to avoid duplication and achieve best value for spend on projects. Young people and employers find it difficult to navigate their way through.
- It is important to distinguish between DWP led provision and provision delivered by schools and colleges, in some cases a lack of clarity around the purpose and outcomes of programmes is leading to perceptions of competition and duplication when programmes may have very different goals and outcomes for young people.

- Some employers, initially interested in securing an apprentice are put off and confused by the range of requirements and paperwork demands as well as the need to go through the National Apprenticeship website/portal. We need to ensure local employers are aware of benefits of the Barnet Apprenticeship Agency and the support available through this route.

## 2.3 Sustainability

- The Council continues to support the development of apprenticeships through the Barnet Apprenticeship Training Agency (ATA) which was pump primed to become self-sustaining. On the back of the successful support for businesses, the Council has also won funding through London Councils from the National Apprenticeship Service, for a new project working with businesses to create apprenticeships for 16-18 year olds up to February 2014.
- Several of the voluntary sector organisations are seeking funding to retain their young person following the end of the 9 month placement and a number of the internship placements have converted into apprenticeships or extended placements. We will explore innovative and creative funding models to build on this success.
- Job Centre Plus continues to work closely with partners to provide a referral mechanism for NEET young people who are eligible for benefits onto suitable projects. Jobcentre Plus also continues to provide support for graduates through the Sector Based Work Academy
- Good examples of partnership working have been established through the Princes Trust projects working with Greenwich Leisure and Saracen's, providing positive destinations for some of the harder to reach and more challenging young people. The Prince's Trust project is being supported for a further year and we are seeking other sources of funding for further motivational programmes for young people.
- Other projects have now established the right structures and approach in order to be in a strong position to bid for alternative funding sources. For example, Dimensions have received core funding to deliver support for young people with LDD and the Work Pairing project.
- Barnet and Southgate College has won the opportunity to manage the corporate training operations and deliver its own retail and catering training (including JCP) at the Hospitality Guild's new "Hospitality House" venue in Finchley from October 2013.
- Barnet and Southgate College has received Retail Academy status for North London and will be delivering a range of Retail training from pre-employment programmes to Apprenticeships and Higher level retail management qualifications. The Retail Skills shop will be located within Hospitality House, capitalising on the synergies that exist across the hospitality and retail employment sectors.
- The Retail Skills shop will be promoted as a centre of excellence to retail employers and will directly support the council's regeneration programme programmes at Brent Cross.
- The College has also developed and is now starting to roll out Traineeships to local participating employers which will lead to full apprenticeship pathways.



#### **4. Next steps**

**To incorporate the lessons learned so far in developing future activity across the partnership through:**

- Identifying potential funding opportunities to sustain and develop the most successful elements of the Platforms project: paid internships, the Princes Trust projects and voluntary sector funded work placements
- Promoting the creation of apprenticeships within the Barnet economy, including leading through example within the council, other public sector organisations and their associated supply chains
- Supporting schools in the early preparation of young people for apprenticeships and the world of work through for example, expanding apprenticeship clubs in schools, promoting the benefit of work trials to young people, supporting and improving information, advice and guidance in schools through sharing best practice
- Developing a studio school/ university technical college to broaden the offer for pupils aged 14-19 to engage earlier in a more focussed vocational/work based curriculum – with the aim of submitting an application to the DfE in May 2014.
- Working with businesses and employers to translate their workforce needs through to schools to ensure schools are able to guide young people appropriately
- Fostering the collaboration between schools and colleges to provide a curriculum offers that provides a smooth transition from school to college. (e.g. extending the new collaborative 6<sup>th</sup> form between 4 schools and Barnet and Southgate College)
- Fostering relationships with the business community and promoting the benefits of employing young people. Helping businesses to acknowledge that young people, particularly in the harder to reach cohort may need more support in the early stages of their placements
- Exploiting opportunities available through government funded schemes (e.g. ESF and Youth Contract) to ensure services are directed effectively to those Barnet young people who will most benefit. (The Risk of NEET indicator (RONI) will provide data that will enable a more effective matching of young people to appropriate provision.)
- Testing whether there is a need for, and if so, develop a plan to clarify opportunities for businesses to host apprenticeships, internships and work placements, as employers are overwhelmed by the options presented to them through different organisations.

Ian Harrison, Education and Skills Director, London Borough of Barnet  
David Byrne, Principal, Barnet and Southgate College

October 2013

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<b>Meeting:</b>	<b>Date:</b>	<b>Agenda Item No: 7</b>
CHILDREN'S TRUST BOARD	24 October 2013	

<b>TITLE OF PAPER:</b> Annual Safeguarding Report 2013-14
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<p><b>SUMMARY OF PAPER:</b></p> <p>The Council has a statutory duty to promote the safeguarding of both children and vulnerable adults.</p> <p>Safeguarding children is defined by the Department for Education as protecting children from maltreatment, preventing impairment of children's health or development, and ensuring children are growing up in circumstances consistent with the provision of safe and effective care.</p> <p>The attached paper reports on the activities and progress during 2012/13 of the Barnet Safeguarding children's Board. It highlights the key activities and progress and the areas for continuing focus.</p>
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<p><b>ACTION REQUIRED BY BOARD:</b></p> <ul style="list-style-type: none"> <li>- to note the content of this report.</li> </ul>
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<p><b>AUTHOR OF PAPER</b></p> <p><b>NAME:</b> Nicola Francis  <b>POSITION:</b> Director Family Services  <b>ORGANISATION:</b> LBB  <b>PHONE NO:</b> 020 8359 4610 / 07853 308795</p>
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# Barnet Safeguarding Children Board

*Making Safeguarding Everybody's Business*

## Annual Report 2012-2013



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## Foreword by Independent Chair

Welcome to the Annual Report of the Barnet Safeguarding Children Board.

On a personal level it has once again been a privilege to be the Independent Chair of the Barnet Safeguarding Children Board (BSCB) and to work with the representatives of the agencies that make up the BSCB. The most notable achievement in my view over the last year was the further recognition of the contribution that young people in Barnet have made to Safeguarding through Youth Shield. The detail of their work is outlined at page 51 of this report but the significance of that work and their ability to sustain it was reflected in their receiving the London Board's Safeguarding award for 2012 having been runners up in 2011.

The intention of the report is to outline the progress that has been made in the last year against the priorities that the Board set for itself, to identify work that needs to be carried out to improve safeguarding in Barnet and to assess the performance of the Local Authority and partners in delivering safeguarding outcomes for children young people and their families in Barnet.

In order to do that the Annual Report reflects the completion of a number of actions specific to the BSCB that were required by Ofsted following their last inspection in January 2012 and also a comprehensive assessment of the progress made in relation to the Board's own Work Programme.

As with the previous Annual Report each of the main agencies and partners to the Board has been asked to identify their own internal governance structures for safeguarding, their achievements over the last year in terms of impact for children and young people and their plans to further improve it over the next year. The Board continues to feel it important that agencies highlight their own individual contribution to overall safeguarding in Barnet so that it is possible for the wider public and the Board to make a judgement about the quality and quantity of the work being carried, out and more importantly how this translates into improving the lives of children and young people in Barnet. To that end each of the partners has been asked to highlight the positive outcomes for children and young people.

The Annual Report records a good deal of impressive work, jointly and individually, with the highlight being the work of Youth Shield being recognised through an award at the Annual London Safeguarding awards in December 2012 (and to which the Board has recently agreed to provide additional substantial funding), but there have been many other areas of positive work which are reflected within the Report.

Children's Services in Barnet offered themselves in late 2012, as a Munro Demonstrator pilot site which is intended to implement the recommendations of Professor Eileen Munro (who completed a report for Government into Child Protection and Safeguarding). A significant focus of that work has been around addressing neglect and related issues through early intervention and through the Board it has been possible to drive that agenda across the partnership. Whilst that work is still developing and being evaluated, the early signs are that it is effective and that the principles are shared by all the partner agencies. That focus on neglect has been adopted by the Board as a priority over the coming years because a number of case reviews that have been carried out over the last year have reflected major themes around neglect and the sharing of information. One of the existing priorities for the Board has been encouraging and supporting the creation of a Multi Agency Safeguarding Hub (MASH) where a range of partners can share information more quickly and appropriately at an early stage. The full implementation of the MASH from late July 2013 will go a large way to addressing many of the issues.

There are a number of other concerns which are likely to be major challenges over the next year which the Board will monitor and those are outlined in detail below;

## Challenges facing the BSCB

- A key challenge will be the continued priority and capacity to deliver safeguarding at a time of budgetary restraint and organisational change across a range of partners, particularly the Local Authority, Probation, CAFCASS and Health. Despite efforts to protect children's services across the partnership, the threat of diminishing resources available to member agencies to safeguard children

and young people remains. This has been logged as a risk and will continue to be actively monitored by the Board. This is particularly significant given that the Ofsted proposals currently subject of consultation propose Ofsted will make a separate judgement in relation to the overall performance of the Board as well as Safeguarding across the partnership.

- Following the restructuring of Primary Care Trusts into Clinical Commissioning Groups (CCG's) on 1<sup>st</sup> April 2013, arrangements for the Safeguarding of children remain a priority for Barnet's Clinical Commissioning Group. The Director of Quality and Governance, Designated Nurse and Designated Doctor Safeguarding Children represent Barnet on the Safeguarding Children's Board. The CCG Clinical Director for Quality and Safety and, the CCG Children's Lead represent the CCG on the Health and Well Being Board. As yet NHS England representation on Safeguarding Boards has not been agreed.
- The community and voluntary sector has experienced a significant impact from the changes to allocation of grants and funding to grassroots services. There are real concerns that over the next year that may impact on their ability to work with children and families.
- Learning from review in Barnet has highlighted concerns regarding professionals' access to information about children and families with whom they work. The prevailing culture of caution in relation to information, driven by recent breaches of data protection, is viewed as a barrier to information sharing on the ground. The Board considers this to be a risk that potentially undermines good risk assessment practice. It is hoped that the implementation of the Multi Agency Safeguarding Hub (MASH) will improve safety in this regard. As part of the response to the most recent case review, it has been agreed that work will be carried out regarding access to the information systems.
- The continued independence of the Board and its role as a 'critical friend' is paramount. The position of the BSCB within the revised structure of Barnet should be monitored for impact in terms of any perceived dilution of that role or variance with the position outlined in Working Together 2013
- Ensuring that the lessons learned from local case reviews and case file; audits become embedded in local practice and improve the quality of the provision of services to children.
- Ensuring that the views of children and young people are taken into account in service planning and provision including setting priorities for staying safe.
- Continuity of key staff will continue to be an issue throughout the forthcoming year as we are about to lose the BSCB Manager
- The proposal to strengthen links with adult services through the appointment of a single Chair for both the Adults and Children's Boards will need to be implemented and should be reviewed to identify benefits and any associated risk.

**Tim Beach**  
Independent Chair

## Context:

**Definition of Safeguarding:** Safeguarding and Promoting the welfare of children is defined within the Working Together 2013 Guidance as

- Protecting children from maltreatment
- Preventing impairment of children's health or development



- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care: and
- Taking action to enable all children to have the best outcomes

**The Children Act 2004** requires Local Authorities to establish Local Safeguarding Children Boards (LSCB) for their area as the key statutory mechanism for agreeing how organisations will co-operate to safeguard and promote the welfare of children.

*Section 14 of the Children Act 2004 sets out the objectives of LSCBs, which are*

- To co-ordinate what is done by each person or body represented on the Board for the purposes of safeguarding and promoting the welfare of children in the area; and*
- To ensure the effectiveness of what is done by each such person or body for those purposes*

*Working Together 2013, Chapter 3*

This report is prepared in line with the statutory requirements outlined in Working Together to Safeguard Children 2013. The report will be submitted to the Chief Executive and Leader of the Council, The Mayor's Office for Policing and Crime, and the Chair of the health and wellbeing board. The report will also be submitted to the Children's Trust Board (CTB) and will be published as a document in the public domain.

The report forms part of the LSCB scrutiny function that should provide challenge in driving improvement.

*The report should provide a rigorous and transparent assessment of the performance and effectiveness of local services. It should identify areas of weakness, the causes of those weaknesses and the action being taken to address them as well as other proposals for action. The report should include lessons from reviews undertaken within the reporting period. (Working Together 2013:3:17)*

The document has been structured to a template which is recommended for national use. The intention is to both reflect progress made but also capture the priorities and areas which will need to be subject to additional focus over the coming year

This report will cover the extent to which the functions of the LSCB as set out in "Working Together 2013" are being effectively discharged. The scope of the LSCB continues to be very broad and encompasses broader prevention as well as early intervention and child protection services: Within this framework, children at risk of harm will be a priority for consideration. The report will therefore include:

- The priorities of the Board: Why these areas have been identified as particular priorities and progress in relation to the priorities.
- Governance and Accountability of the Board: Effectiveness of the board and its sub groups.
- Monitoring & Evaluation/Quality Assurance Activity.
- Future challenges.

# Summary of outcomes for the BSCB

Key activity and achievements of the Board itself over the last year include the following;

## Ofsted Action Plan Update:

Barnet had a full inspection of its services in relation to safeguarding and looked after children in January 2012 and was judged to be good in all areas with the exception of quality of provision for safeguarding and looked after children services which were adequate.

An action plan was developed to address areas identified as a priority for improvement and the key area for the BSCB was as follows:

*The BSCB to ensure that all schools adopt the correct safeguarding procedures by referring appropriate safeguarding concerns to either the LADO or children's social care before interviewing children in detail or undertaking any further investigative actions before a strategy discussion or meeting has been held*

**Action:** In response to this, refreshed guidance was re issued to schools and the procedures were highlighted at relevant heads and safeguarding leads meetings. Schools have also been encouraged to take up training provided in relation to allegations management as well as safeguarding and child protection.

Additional training was also arranged with an input from the police Child Abuse Investigation Team (CAIT)

The LSCB was also identified as the lead for 3 additional issues, as below, that were raised in the Ofsted report, but which had not been included within the 15 recommendations and did not have a fixed time frame.

1. *Attendance at BSCB by all members is not consistent*

**Action:** Attendance at the Board continues to be monitored and subject to discussion between the Chair, Board Manager and individual agencies as appropriate and overall has improved

2. *BSCB needs to strengthen its management oversight of the impact and quality of work undertaken on its behalf*

**Action:** The change to the arrangements for the Executive Group have been effective in shaping the agenda for the main Board and providing additional detailed scrutiny to areas of focus such as case reviews and the examination of data

3. *Whilst the BSCB receive safeguarding performance information, scrutiny of this data is not robust and there is limited evidence that the board's oversight is having an impact in driving improvements*

**Action:** The BSCB does receive performance information directly and work is ongoing to refine that information so that the Board can fulfil its strategic role whilst being alerted to issues of real concern or risk. This involves the development of an information dash board which indicates areas significant change or agreed priorities.

## S11 Audit:

A focused audit for partner agencies to review compliance with the safeguarding duties contained in Section 11 of the Children Act 2004 has been completed between March and May 2013. This report will be fully considered at the Performance and Quality Assurance Group and the Board and an action plan developed and monitored over the coming year. The returns for the S11 Audit have generally been of a better quality in terms of the level of analysis and the detail of the supporting evidence provided by the agencies than has been the case previously. This reflected well in terms of the thought and effort which had gone into completing the Audit. The Audit highlighted a great deal of positive work but also a number of areas that will require planning and focus.

Key areas highlighted for focus by the report are as follows:

1. The monitoring of S11 requirements and maintaining standards in relation to commissioned services is a significant area of work for the BSCB, particularly the Performance sub group
2. Identified gaps in some services systems to capture the views of children and young people and how they contribute to service development, especially in relation to diversity policies
3. Induction training regarding safeguarding was not universal
4. Training in diversity appears to be a gap for some services
5. Agencies did not evidence impact of training in many cases and the training sub group will need to address this.
6. The Safer Recruitment Procedures standard had a number of elements which highlighted gaps in relation to assuring safer recruitment practice across commissioned services, training, knowledge and understanding of allegations management processes, support for staff and audit activity which will require follow up by the Performance sub group and monitoring by the Board.
7. The S11 audit also highlighted several areas for development in relation to the monitoring of attendance at meetings, demonstrating outcomes in terms of children and families and consultation with children and young people.

**In the BSCB Annual Report from 2011/12, the Board identified the following priorities and below we assess our level of success in addressing them:**

What we said	What we did
<b>Quality Assurance, Challenge and Scrutiny</b> To further develop scrutiny of BSCB in monitoring and evaluating the effectiveness of safeguarding activity across the partnership so that children and young people in Barnet are safe from abuse, neglect, violence and sexual exploitation	We have a strong basis to move forward as we have secured engagement of all key partners in our Performance and Quality Sub-group which is a well functioning group. Audit activity during the last year has included health, children's social care and other partners and work is in progress to agree an outcome based framework in line with Munro. Partners have played an active role in bringing their own QA processes to the scrutiny of the group. A S11 audit has been conducted based on an agreed London wide tool. This will be considered at the PQ group and the BSCB over the year.
<b>Risk Assessment, Information Sharing and Partnership Work</b> Seek to develop tools /Protocols to promote improved information sharing, risk assessment and partnership working, including support for development of MASH	The BSCB through its Professional Advisory Group piloted a multi-agency risk assessment tool designed to be used as an 'aide memoir' to support universal services in the identification of risk. This has also been used to good effect to review cases in supervision. Information sharing continues to be a priority and has emerged as an area of concern in our partnership reviews. This is now being reviewed in response to the

	learning from the SCIE review. Work has also progressed on the development of a Multi-Agency Safeguarding Hub – MASH which will begin in July 2013. A multi-agency steering group includes representation from the BSCB Independent Chair in order to provide oversight. A programme of training to support implementation has been developed by the London Safeguarding Children Board.
<b>Young People at risk through peer violence and exploitation</b> To focus on peer to peer violence including Gangs/Sexual Exploitation/Anti Bullying/E safety	This remains a national and local priority and a reconvened task group led by Police colleagues will drive forward implementation of a coherent strategy based on the Pan London Multi-agency operating procedures. Training in sexual exploitation is being rolled out and the training programme also includes gangs training that features input from young people who have been gang affected. E safety training is also planned and a task group will update the BSCB e safety strategy. The work of Youth Shield has included training in peer support and will strengthen the contribution of young people in Barnet in providing peer support and education to promote healthy relationships
<b>Early Intervention</b> Promoting and evaluating a model of early help for children and families which reduces demand and cost (Munro)	Working Together 2013 sets out the importance of early help for children and the role of the LSCB in evaluating the impact of early help. Barnet has an early help offer that provides a coherent framework for family support. Many examples have been provided within the report below of how this can help families in practice, for example, through the therapeutic work in relation to domestic violence which has helped to improve safety for children. The Board will have an important role in monitoring the effectiveness of these arrangements
<b>Learning and Development</b> To strengthen the BSCB role in promoting learning and development across the partnership	As outlined in the report, BSCB has played an active role in promoting learning and development across the partnership. A number of reviews have already been conducted using the SCIE methodology and improvements made as a result of learning. Further reviews are in progress and the Board places a high priority on continuing to promote a culture of learning

## Additional Outcomes

- Completion of 3 multi-agency case reviews using the Social Care Institute for Excellence (SCIE) model, which has identified important learning for all partners. This will be outlined in further detail later in the report.
- An audit to track the journey of a child from needing help to receiving help through a range of universal and targeted services
- Strengthened governance and accountability through the repositioning of the Executive Group which has oversight of policy, strategy and performance in respect of safeguarding children. The Executive is also responsible for establishing the BSCB budget and agreeing agency contributions which will be reviewed annually.
- Continued work with faith and cultural groups to increase safeguarding awareness in partnership with CommUNITY Barnet.

- Enhanced arrangements for quality assurance using a dashboard which is currently in development. This will be monitored via the Independently Chaired Performance and Quality Sub-Group.
- Continued involvement of children and young people through the work of 'Youth Shield' and an expanded remit to further drive their contribution
- A renewed focus on tackling sexual exploitation linking with arrangements to safeguard missing children. A group has been reconvened which will be led by representatives from the Met Police with the task of developing a coherent operational structure based on multi-agency Operating Procedures across London developed by the Met Police. Training has also been delivered which aims to build capacity and confidence in identifying and responding to concerns about CSE.
- Learning and development events including a conference on trafficking and sexual exploitation held with a neighbouring authority, Enfield.
- Maintaining a focus on Safeguarding in challenging financial climates and organisational change. The LSCB has managed to maintain funding from contributing partners at current levels.
- Continued engagement with schools to identify and respond to safeguarding and welfare issues and the involvement of schools in a self audit of their safeguarding responsibilities
- Promotion of the Strengthening Families approach to Child Protection Conferences which has been found to be an effective way of engaging families in bringing about improved safety for children.
- The pilot of support and consultation for staff working with families where personality disorder or challenging behaviour is a feature. This initiative was developed in response to learning from review which evidenced the impact on professionals and the risk of loss of focus on the child. Evaluation of the pilot has shown that this is a valued opportunity for consultation which has helped practitioners to manage some elements of casework more effectively, for example, a complex case initially referred to the Multi-Agency Group was able to be managed without the need to escalate which would have required more intensive resources.

# Governance and Accountability Arrangements

The Board has an Independent Chair who formally reports to The Chief Executive, who, drawing on partners and where appropriate the Lead Member, holds the Chair to account for the effective working of the LSCB. The Independent Chair is a member of the Children's Trust Board where the work of the Board is tabled, including the annual report outlining the work of the BSCB which is also presented to the Overview and Scrutiny Committee. This ensures appropriate challenge where necessary.

The Lead member for Children's Services is a participant observer of the BSCB in accordance with the directive in Working Together 2013 and the Director of Children's Services a member of both the Executive and BSCB.

Barnet Safeguarding Children Board has recently seen a change in Lead Member and we are pleased to welcome Councillor Reuben Thompstone to this role. Councillor Thompstone replaces Councillor Andrew Harper whose contribution to the Board was greatly valued as a passionate and enthusiastic champion for children in Barnet.

The Board has continued to evolve structure and governance arrangements to ensure a sharper focus on scrutiny and monitoring. There is currently a two part structure with an Executive that meets in advance of the full Board meeting. Executive Members are responsible for policy, strategy and performance in respect of safeguarding children. They are also responsible for establishing the BSCB budget and agreeing agency contributions which are reviewed annually.

The role of the Executive has been further strengthened in the last year through a revised schedule of meetings to assure greater oversight of the BSCB agenda and maximise ownership of partnership working improvements.

The BSCB has established a large membership to include a wide range of partners, including Community (Lay) members and Youth Shield.

Attendance is actively monitored with gaps followed up and this is likely to be a continued challenge given the demands on partner agencies time and resources and overlapping structures that require some partners to service more than one LSCB. A breakdown of agency attendance is provided as an appendix and despite these challenges it is noted that attendance has improved significantly in the last year.

A further key development has been the work of the Joint Services Governance Group which has identified a number of opportunities for improved collaboration across Adults and Children's Services, including the appointment of a single Chair for both Boards, following the retirement of the current Chair of the Safeguarding Adults Board

The Board works to an agreed constitution and work plan and a number of sub groups are responsible for carrying out elements of the work programme and reporting back on progress at each Board meeting. This structure is also supported by a number of task and finish groups that are mandated to carry out specific pieces of work. Details of all of these groups are contained in Appendix 4.

## **BSCB Sub Groups:**

There are currently four sub groups in addition to the Standing Serious Case Review (SCR) Panel and the Child Death Overview Panel (CDOP). These are as follows:

**Performance and Quality Assurance Sub Group:** The Performance and Quality Assurance Group (PQA), chaired by the Independent Chair, has a remit to scrutinise the performance of partners in relation to safeguarding activity and report back to the Board. The development of a coherent framework of multi-agency data has been led previously by work across London in relation to a Dataset Project.



Barnet actively participated in this work but unfortunately funding was no longer available to extend the project beyond the initial start up phase. This coincided with the need to review data so as to reflect Munro indicators and incorporate a multi-layered approach that captures the views of children and professionals as well as 'hard' performance data. The London Board and Chairs Forum have recently started work across London Boards to create a shared or comparable dataset and Barnet has supported this work.

The London Borough of Barnet data analysis team has provided input in reviewing the dataset and a revised framework is in development. The Board needs to continue to explore creative methods for capturing data from children and young people, drawing on work done by partners in this area, for example, patient experience data in health and the work of Youth Shield in the forthcoming year.

Partners are also being encouraged to report improved outcomes for children and young people and a number of examples have been provided from a range of services using a 'Positive Outcomes' proforma. This has enabled us to build an 'evidence bank' of the impact of our interventions which will give a picture of how measured activity has made a difference to the lives of children and families.

The PQA has also enabled partners to report on their own internal audit and monitoring processes. Health partners, Children's Social Care, Police and Probation have given informative presentations in this regard.

A further key vehicle of assessing multi-agency performance is the audit based on compliance with the requirements of S11 of the Children Act 2004.

The S11 audit recently completed has been presented to the PQA group and in turn the Board in the near future. Additional detail is outlined below within the report.

**Training and Development Sub Group:** The LSCB is responsible for the strategic overview of safeguarding training both by single agencies (to their own staff) and interagency training. The Training and Development sub group discharges this function in collaboration with the Children's Workforce Development Team to ensure that both single and multi-agency training is delivered to a consistently high standard and that a process exists for evaluating its effectiveness. Recent work has focused on the quality assurance role of the group and it has been agreed that the group will take an active role in reviewing course evaluations. Alongside this, the workforce development team will be introducing a system of impact analysis using follow up questionnaires.

**Professional Advisory Sub Group:** The Professional Advisory Group (PAG) includes members with direct operational knowledge and its function is to ensure that all policy and procedure is both appropriate and operable. It also oversees the work of a number of Task and Finish Groups which have a remit to develop policy or examine specific issues and report back to the PAG, and through that the LSCB, for example, in relation to sexual exploitation. During the last year the PAG developed a directory of professional guidance and resources which have been uploaded on the BSCB website. The group has also successfully piloted a Multi-Agency Risk Assessment tool for universal services. An E-Safety task group has been reconvened in order to review and update the E-Safety strategy on behalf of the PAG and has created its own action plan for work over the next year. There has also been work focusing on child sexual exploitation and the links with missing children that is also reflected upon within the report.

**Cross-Generational Sub Group/ Joint Services Governance Group:** This group operates as a cross service group responsible to both adults and children's safeguarding boards. The aim is to ensure that services collaborate as far as possible in promoting the safety and welfare of children and a holistic approach to working with families. The group has not been operational during the last year as this work

has been subject to review as part of the wider review of adults and children's joint governance arrangements which has identified areas for development in working across the interface.

**Child Death Overview Panel:** This panel is responsible for the specific functions relating to child death as outlined in Working Together 2013. Its purpose is to review all child deaths and identify any matters of concern in relation to any child death in Barnet and its work is covered in greater detail on page 26.

**Standing Serious Case Review Sub Group:** The Standing Serious Case Review Sub-Group (SCR) links to the Child Death Overview processes when a child has died or been seriously harmed and abuse or neglect is believed to be a factor. Independent Chair arrangements further enhance the capacity to exercise scrutiny and challenge. The serious case review sub-group has a wider remit in supporting learning from reviews and has carried out 2 case reviews using the SCIE systems methodology following an initial case review as part of a London pilot. This has identified learning and improvements in practice for a range of multi agency staff. A number of learning events have been held throughout the last year with further events to follow. The work of the group is outlined in greater detail on page 19.

## Monitoring and Evaluation

The figures below reflect the current reporting period 2012/13 and cover children and young people within Barnet considered to be at the higher levels of risk.

Generally the statistics for Barnet in comparison with other London Boroughs are on the face of them reassuring in that the figures are relatively low when examined against population figures. However in 2011 as reported previously there were concerns at increasing numbers of children being placed on child protection plans which was greater than similar Boroughs. Some internal audit work was carried out by LBB and BSCB and whilst no single cause was clearly identified some focused work was carried out on monitoring those trends.

The figures below and the historic data in Appendix 1 reflect a more reassuring picture in that whilst 2012/13 saw a small rise in initial assessments, a significant rise in core assessments and a rise in Section 47 child protection investigations, the number of children on a child protection plan reduced significantly. Similarly the numbers of children being returned to a plan or remaining on a plan for over two years also reduced. The additional focus by Children's Services and partners in assessment and early intervention appears reflect better joined up planning and to have led to a reduction of children being subject to child protection plans without increasing the numbers of children having to be returned to plans at a later date.

### Children's Social Care in 2012-13



**277 children Subject  
to Initial Child Protection Conferences (inc Pre-births & Transfer-Ins)(2012/13)**



**311 Children in Care**



**229 children Subject  
of a Child Protection Plan (2012/13)**



**1,118 Children in Need (2012/13)**





**3,468 referrals  
to Children's Social Care (2012/13)**



**86,809 children  
aged 0-18**

## The Effectiveness of Safeguarding in Barnet:

Making an informed judgement as to the quality of work to safeguard children and generating consistent activity to make improvements where they are needed is probably the most difficult task facing an LSCB. The Annual Report is intended to reflect the most significant work that has gone on in the last year in Barnet that we judge to have had a real outcome in safeguarding children and families in Barnet. Key outcomes are provided with some narrative throughout the report and within Appendix 3 from the agencies individually.

Much of the work is concerned with activity or output. It is not always easy to identify the outcome, or result of the actions we take but our aim is always to try and maintain a focus on actions that make a difference to a child or young person.

Partners have been helping the Board to build an 'evidence bank' of positive outcomes which demonstrate the effectiveness of interventions. Below are some of the examples which reflect the range and effectiveness of the safeguarding partnership within Barnet:

*Children's Social Care Services worked with Targeted Youth and Housing to support a vulnerable young person in transition.*

**Positive outcome** *The young person was helped to apply for and secure a place on the "Get Real Project". The Get Real project offers shared accommodation and ongoing support to young people who show a commitment to education, training or employment. The scheme is aimed at breaking the culture of antisocial behavior, alcohol and drug abuse and welfare dependency that frequently exists among young people in temporary accommodation. The Young person is now thriving and is acting as a role model to other young people taking an active role in community projects aimed at encouraging young people from Black and Minority Ethnic Communities to engage in education and enterprise.*

*Junior Role Model Army (Young People in Care) Film Production*

*The issues which the film highlighted were the following;*

- *Children and young people having to move repeatedly until the right placement becomes available.*
- *Leaving family members*
- *Issues around trust*
- *Changing social worker*

**The positive outcome** *was that the children and young people's voices were heard, this was done by showing the film to the Lead member and Councillors from the Corporate Parenting Advisory Panel group. The film has been used for training with foster carers, designated teachers for looked after children and Educational Psychologists. It has been shown at a Social Care service study day, to ensure staff and professionals had the opportunity to hear the young people's journey through care. Having a film is an effective tool for raising awareness and understanding of issues with professionals across the Children's service (e.g. with colleagues in education).*

*Norwood*

*Issues highlighted - History of allegations of physical and verbal abuse by the parents towards the children. Three separate concerns were raised historically. Parents denied this, and also said that they would never use physical chastisement as this is wrong. Social care closed the case accepting the parents and communities assertions that this was a malicious referral.*

*Child disclosed to school that the father was using physical chastisement. When parents were questioned over*

this, father said that he did not know that this was inappropriate, and it was a cultural method that he was using, and now that it had been highlighted he would stop.

Complex cultural issues within the family.

Mother and one child has a learning disability, which seems to impact on ability of mother to take on board parenting advice. Mother becomes tearful.

Parents are refusing to get youngest child assessed by a paediatrician as there are concerns around developmental delay.

**Positive outcome** - Barnet allocated social worker did some excellent investigative work, taking into consideration the historical concerns and Norwood's Significant events record to help the assessment, and liaising with all professionals involved.

Children's wellbeing is being monitored and services accessed to ensure that their needs are met.

Continuous monitoring of parents ability to meet the needs of these children, ensuring that concerns are not minimised.

Referral to CIN team.

**Barnet, Enfield and Haringey Mental Health Trust**

Issues highlighted - Current statutory guidance states that children under eighteen should not be admitted to adult ward. Although an assessment suite is not a ward, it is within a mental health unit and there was a lack of clarity in the statutory guidance about the use of assessment suites for children and young people under eighteen who were experiencing an acute mental health difficulty in the community.

At the same time as this local event, there was national recognition of the impact of the admission guidance for children and young people in these situations. Although highly unusual for a younger child it is an increasing problem for 16-17 year old young people.

Subsequently the organisation that monitors health providers, the Care Quality Commission, published revised guidance in the form of a briefing suggesting that there may be circumstances that it was in the child's interest to admit to an appropriate adult facility for a short period with oversight by a child psychiatrist to enable an assessment and the provision of an appropriate care setting to be organised. This will avoid children and young people waiting in inappropriate settings.

**Positive Outcome** - There is no indication that the child concerned suffered harm because of the delay in admission. There was good communication between the police, A&E, children's ward and the mental health Trust and during the delay the child was seen by a paediatrician. They were subsequently assessed in the assessment suite, seen by a psychiatrist and found a bed in a specialist out of borough mental health facility for those under twelve, early the following morning

**Barnet and Chase Farm Hospitals NHS Trust**

Issues highlighted from several cases were Domestic violence ; allegations of physical and sexual abuse; maternal alcohol , learning difficulty and mental health issues ; maternal drug dependency issues in pregnancy ; neglect ; teenage alcohol issues; teenage pregnancy ; teenagers at risk of sexual exploitation ; vulnerabilities of looked after children; parental responsibility;

**Positive Outcome** - Seeking to ensure the safety of children at potential or actual risk of significant harm. Ages of children range from neonates to teenagers and the vulnerabilities are diverse, as highlighted above.

Ensuring engagement of relevant agencies including local Social Care Early Intervention and Troubled Families Teams, Child and Adolescent Mental Health Team, local sexual health clinic, School Nurses and Special Educational Needs Coordinators, and on occasion Social Care professionals from outlying boroughs.

**Solace Women's Aid**

Issues highlighted - When a family first arrived at the refuge, child was observed to be quite rough in his play with other children. Due to the language barrier child found it difficult to communicate his wishes and feelings and would hit and push where he became frustrated and to get someone's attention.

Along with this frustration child's experience of relationships also taught him that violence was a part of communication with others.

Due to his rough play other children would shy away from playing with him. When child started school they also

flagged up concerns about child's ability to interact appropriately and to make friends

Child's mother was initially referred to Strengthening Families, who were running a parenting group in her native language. However, she decided that he did not feel safe attending this group as she was worried by attending a group with members of her community she might meet someone with a connection to her husband, whom she was fleeing.

**Positive Outcome** - Since coming to the refuge child has been able to access one to one play therapy and is now accessing this support within a group. The refuge has worked closely with school and they have been able to offer extra support, such as working with mother to look at supporting Child with his homework. In the refuge child and mother were supported to start using a star chart which mother says has helped greatly. Within play sessions held twice weekly in the refuge and in general day to day interactions staff supported the Child by mirroring positive interactions and praising where he played gently.

Mother was referred to picking up the pieces – a parenting programme for mothers who have experienced domestic violence. An interpreter was provided for this group, enabling her to engage well and to contribute to the group. Mother was also referred to an ESOL class at the local children centre, especially aimed at mothers supporting bilingual children.

Through this support school have reported that child is calmer. Child is able to access breakfast club which has helped with his punctuality. He also attends twice weekly after school clubs – supporting him to build a network of friends.

The play therapist reported that following his one to one sessions child was better able to demonstrate his affection and interact with her by using gentler and more peaceful means. She continues to provide support through group play therapy.

Through accessing parenting classes and through one to one work with the FSW mother has been able to build her knowledge of the effects of DV on her child and how best she can support him.

#### Safeguarding Division

##### Issues highlighted:

- Child being left unsupervised outside of the family home since the age of 4
- Allegations that the child had been physically chastised by parent
- Concerns re : children's clothes too small worn out or dirty
- Parents bereaved - Mother recently lost an unborn child and father lost his father
- Children hungry and packed lunch for school sparse
- Lack of stimulation in the home
- Mother finding it difficult supervising the children
- Family are from Afghanistan and children are allowed to play out unsupervised there , family thought this was alright
- Child struggling at school
- Child playing in an aggressive way
- Child being left outside unsupervised
- Parents depressed and living in crowded accommodation
- Child had behavioural issues at school
- Child was made the subject of a CP Plan under the category of neglect

**Positive outcome** - The family have moved to a house in another area and the family have a garden

- The child has not been left unsupervised outside of the home and the parents understanding the risks of this
- The parents are interacting more with the child is making good progress at school and behaviour is good
- Parents are proud of the child's achievements at school
- The child seems happier is clean and well presented and has school dinners now
- both parents have engaged with professionals and are learning new ways of stimulating their children
- Children made subject of CIN Plans after 7 months

#### Children's Social Care

##### Issues highlighted

- Child wanted to return to a family he had previously been placed with by his mother under a Private Fostering arrangement. Child had been happy living with this family, however, sadly his mother had fallen out with this family and could not see that, if she was not in a position to care for him then it was in his best interests to

- return to somewhere he felt happy and was familiar with rather than foster carers who were strangers to him.*
- *Some of the family circumstances of the proposed family that Child wished to return to, presented challenges for the assessing social workers. Despite this, a sensible and proportionate response to the issues of concern has been taken and the child's wishes to return have been taken seriously.*
  - *Contact continues to be an issue as child does not wish to have contact with birth mother and siblings.*
  - *DBS traces on adults in the household*

#### **Positive Outcome**

- *Returned to a placement that he was happy and comfortable in where his cultural, developmental and emotional needs are being met.*
- *Emotional health. Child is happy and feels content and supported in placement.*
- *Child is settled in school and is awaiting CAMHS input for further emotional support. The carers have been proactive at supporting this to happen.*
- *Child re-established since being in care, relationship with birth father – once monthly contact.*
- *Carer is supporting indirect letterbox contact with birth mother as an on-going process of re-introducing future contact.*

#### **Central London Community Healthcare (CLCH)**

##### **Issues highlighted**

*This child was at risk largely due to her two older brothers having a long history of criminal activity. They were both involved in drugs and gang culture and were living in the family home where a series of threats had been made*

*Concerns regarding the mother's ability to protect her daughter from the activities of her two sons (who were both young adults).*

#### **Positive Outcome**

- *Mother moved house into Barnet so she and her daughter were removed from the ganga culture that her sons were involved in.*
- *Referral to safer families' project*
- *Good engagement with professionals*
- *Mother maintained safe environment away from her sons*
- *One son was re-housed in a different part of the country with the help of probation service, whilst the other son is currently serving a prison sentence with a view to him being re-housed in a different area on his release.*
- *Concerns reduced sufficiently to enable the child to become subject to a CIN plan early this year.*

The Munro review identifies the LSCB as having a crucial role as the vehicle for scrutiny of safeguarding activity across the partnership. The Performance and Quality Assurance Sub-Group leads on this work and has responsibility for monitoring and evaluation through an agreed multi-agency programme of audit and review. Chair arrangements provide an opportunity for independence and challenge which has enabled the group to develop a strong basis with improved attendance and representation over the last year.

*"LSCBs play an extremely valuable role and will remain uniquely positioned within the local accountability architecture to monitor how professionals and services are working together to safeguard and promote the welfare of children. They are also well placed to identify emerging problems through learning from practice and to oversee efforts to improve services in response".(Munro Chapter 4)*

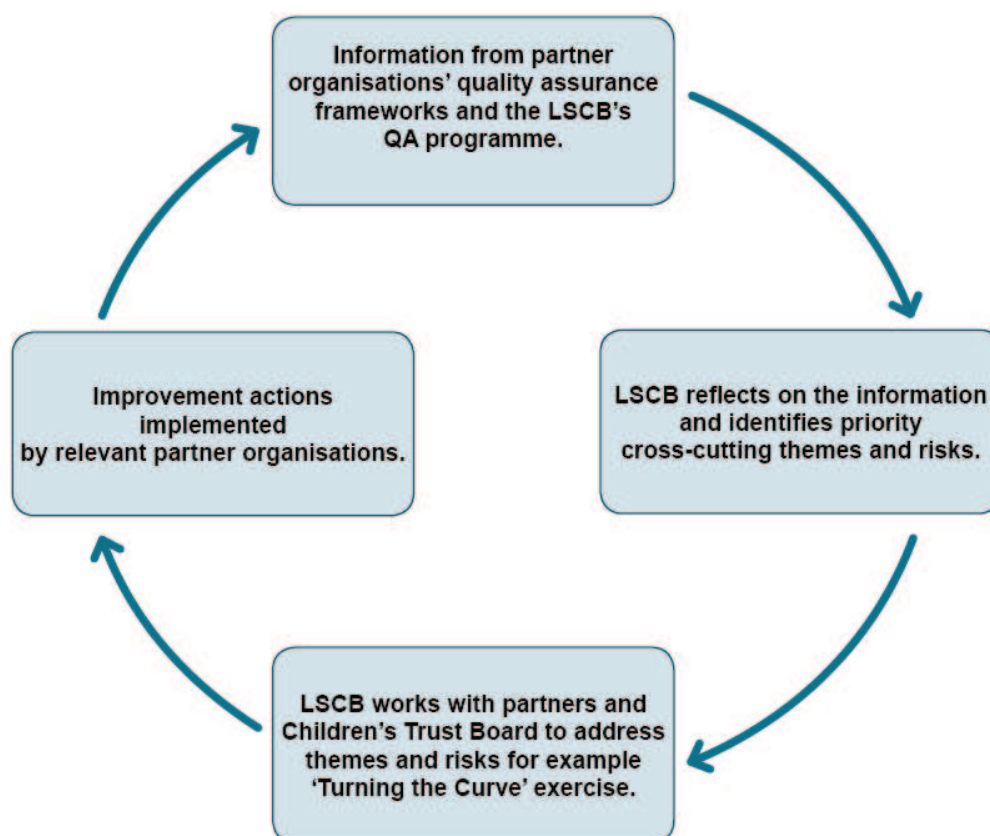
A review of partners Quality Assurance frameworks over the last year across a range of partners has provided assurance of robust processes within single agencies as well as across the partnership. Barnet has continued to review partnership data across the range of outcomes for children. Interrogation of the dataset has highlighted several areas of note, such as the stabilising of referral rates to children's service, which had been appropriately flagged as an area of risk and subject to ongoing monitoring and levels of participation and General Practitioners in case conferences. The latter issue allowed focused



work with GPs to be carried out to assist their involvement in the provision of information appropriately in individual cases.

The Safeguarding dataset discussions need continued work at local and pan London level if the national and local performance indicators recommended by the Munro Review are to be adopted. This work has been accepted by the Board and Sub Group as part of their contribution to the Munro Action Plan being managed through Children's Services and as one of the four priority areas for the Board. This work including the development of feedback from service users and the workforce, will therefore assist in identifying the outcomes for children and families and remains work that needs to be completed. Substantial work has gone into producing useful quantitative data, but the progress in obtaining qualitative data from service users has been slower and is therefore a priority over the next year.

The Sub-Group has adapted the London Safeguarding Children Board Quality Assurance Framework for local use so that we have a comprehensive means of assessing how well we safeguard children in Barnet, based on key priority areas. This is based on recognised good practice. A diagrammatic representation of the process is shown below. It should be noted that there is current work in progress through the London Safeguarding Board to develop that framework and share it as widely as possible across London and Barnet has played its part in that work through the London Board and the Chair's Forum.



## **Audit Activity:**

A number of audits have been undertaken in the last year including the following:

**Journey of the Child:** In line with the Munro report, a multi-agency audit group drawn from membership of the Professional Advisory Group piloted an audit intended to provide a picture of a child's journey from needing to receiving help through a range of universal and targeted services. An audit tool was developed which enables a qualitative judgement of practice outcomes in line with existing gradings used by Ofsted. This audit tool is structured to reflect the child's journey from early years to transition to adulthood. These stages of the child's journey broadly relate across to Barnet's current Children and Young People Plan 2013-2016 which was reviewed in late 2012.

The case selected was that of a young person who had experienced a number of services and following an initial scoping meeting in which services were identified, each provided a return which enabled the child's journey to be tracked over time. The case group met to analyse each of the reports and an overview report of key findings will be produced and reported to the PQ group. It is felt that this has generated valuable learning and the model will be used to audit cases at varying levels of need which will help inform knowledge and contribute to the improvement of multi agency planning. The audit reflected largely good work across the partnership with a complex case and required a significant commitment across the partnership.

**S 11 Audit:** As outlined in the earlier section of the report on Page 7, the S11 audit highlighted a number of areas that the Board and partners will need to focus upon. The move towards an increased commissioning role of the Local Authority and some partners for a significant number of services will mean that there is a concomitant responsibility to ensure that those services fully reflect all the necessary safeguarding commitments. Similarly the Action Plan will need to address some organisations not having robust mechanisms in place to seek and respond to the views of children and young people when planning services.

**Schools Audit:** A small sample of a range of schools under S175 Education Act 2002 where subject to audit in parallel with the S11 process. The results have been collated and reported to the Performance and Quality sub-group. The audit reflected that schools have appropriate safeguarding arrangements in place and compliance with training and Ofsted requirements.

**Future Audit:** Audit work around neglect and information sharing has been agreed for the coming year. Additional audit programme work will be informed by, learning from the SCIE reviews. The Section 11 and schools audit will also identify areas for development.

**Joint Work:** We have also explored the potential for peer audit with Enfield and had a useful cross borough review of data from Barnet and Chase Farm Hospital which illuminated difference in thresholds between boroughs. It is anticipated that the implementation of the MASH will have a positive impact on the consistency and response to initial reports of concern about a child.

A revised Children's Social Care Quality Assurance framework and audit programme has been agreed which will include a heightened role for Independent Reviewing Officers and Case Conference Chairs in scrutiny through identification of 'practice alerts'

Routine audits are now undertaken on an ongoing basis on children subject to Child Protection plans for 2 years or more and those re-registered'. This is to prevent 'drift' in those cases which can sometimes occur as a result of turnover of staff.

Following a successful pilot which the BSCB supported across the partnership the safeguarding division has implemented the 'Strengthening Families' approach to the conference process which has been found to be an effective way of engaging families in bringing about improved safety for children. In adopting the 'Strengthening Families' approach to Child Protection, and moving from a more traditional conference model, Barnet has aimed to create more effective partnerships between families and professionals. Barnet staff were invited to outline that work at a workshop at the London Board Safeguarding Conference in December 2012.

Professionals who have attended Child Protection Conferences are on the whole enthusiastic and supportive of the new approach. Feedback evidences that the structure is helpful and generally people have commented on the use of a visual tool for the headings.

There is generally positive feedback from families attending Child Protection Conferences. During the year 62 questionnaires have been completed.

The majority of the questionnaires reflected the fact that both families and professionals felt that the arrangements enabled them to better contribute to the process and produce more effective plans.

The London Borough of Barnet Cabinet and Overview and Scrutiny Committee receives annually an overall Safeguarding Report which covers both Adults and Children's Services. This document reflects the general picture of Safeguarding within Barnet across the Partnership.

## Serious Case and other Reviews

The Standing Serious Case Review Group is chaired by an Independent Consultant Sally Trench and has a remit to promote wider learning from review

The panel has been responsible for ensuring action plans have been completed in respect of previous SCRs and these will continue to be monitored as required via the Performance and Quality Assurance sub-group.

Barnet has not been involved in a Serious Case Review for over 3 years.

However, a key area of activity during 2012/13 has been reviews carried out using the SCIE systems methodology. This is a collaborative approach, drawing on the contribution of the professionals involved, which explores the underlying conditions that affect professional decision making in the journey of a case.

Barnet is therefore well placed to fulfil the requirement of Working Together 2013 to adopt a systems approach to learning from review.

In relation to the initial review, BSCB has successfully delivered a series of learning events which have been attended by over 250 staff. The BSCB is actively implementing the findings of the review which have been collated into a composite thematic response from all the agencies involved.

2 further reviews have been conducted using this model and the reports are currently in the process of being finalised and agreed with SCIE and will be brought back to the group for consideration. Both cases featured children who had suffered neglect, albeit in very different circumstances. One case involved transfer from another area and has enabled both areas to share findings about professional practice.

The reviews have powerfully illuminated the challenges for professionals in the identification and management of neglect and have also highlighted failures in information sharing and the process to refer concerns. Central to the action plan agreed as a response to the second full case review is work to improve information exchange and, as is highlighted elsewhere within the report, the MASH and work supporting its introduction are seen as fundamental to addressing this particular challenge.

A further review looked at a case involving an unexplained injury to a very young baby and provided useful learning about inter agency practice across hospital , police and social care services and the application of parallel processes for child protection and allegations investigations.

The group has also discussed in detail the case of a teenager who died by hanging and had an overview of all the Health reports produced for the health SUI review process.

The case raised issues about communication with private health providers and their standards, as well as about support for a school where such an incident has occurred. Liaison with a neighbouring authority has enabled a review of the schools safeguarding practice to be carried out, following concerns expressed at the inquest.

Several members of the group have recently undertaken the SCIE Foundation training which will enable increased capacity for review using this model.

Two colleagues who completed the training are now acting as internal reviewers to assist an independent reviewer in conducting a further review. An initial meeting has agreed the scope of this review which will commence in September. The review will focus on a case involving both adults and children's services and will explore practice across the interface of services which will inform the joint services work in development.

The SCR group has functioned in line with Chapter 4 of Working Together 2013 which requires LSCBs to maintain a learning and improvement framework. This provides a timely opportunity to refresh the terms of reference and consider renaming the group to reflect its wider role in promulgating learning from review.

## Managing Allegations against Adults working with Children

One of the prime responsibilities for the BSCB is to monitor allegations against professionals and a comprehensive report is prepared each year for the Board. The report outlines below a substantial increase in allegations being reported. The view of the Safeguarding staff is that this is linked to the high level of media attention to these issues which has in turn increased awareness and the level of alertness to these issues.

The allegations against staff arrangements continue to be supported by the Local Authority Designated Officer (LADO) and a full time Investigations Officer to complete case work tasks. In 2012 Barnet Social Care was inspected by Ofsted and a recommendation made that the LADO arrangements should be subject to review. A review took place in June 2012 and reported as follows.

*The systems for managing allegations against people who work with children, or LADO arrangements, in Barnet, are effective, well-managed, and child-centred. They are compliant with all aspects of procedures contained within Working Together to Safeguard Children 2010, including Appendix 5,*



*(Procedures for managing allegations against people who work with children). There is a clear distinction between the roles of the LADO and the Investigations Officer, with the LADO making well-considered and thorough initial evaluations, and directing the work. She consistently reviews progress and makes a final evaluation, which identifies lessons to be learned from the case. Each case ends with a written outcome sent to the referrer which ensures clarity and a proper ending. The Investigations Officer role is one which is distinctive to Barnet. This role enables the service to offer more support to referring agencies and services, and also ensures expertise in the complex area of conducting investigations and involving children appropriately. In other councils, the LADO role is often an isolated one, but strength in Barnet is the distribution of responsibilities between the Divisional Manager, LADO, and Investigations Officer. This facilitates debate and a teasing-out of the issues, leading to better outcomes on individual cases, and on wider developments.*

*The recommendations to be made are minor. A strength of the service, as detailed within the body of the report, is that there is a proactive approach to learning lessons from casework involvement. This means that there is an inbuilt system of continuous improvement. Plans to strengthen the service further, through making direct contact with a wide range of Barnet organisations; and to publicise the service through a leaflet, will have a beneficial effect. Some stakeholders who provided feedback on the service also had ideas for developing the service further which should be considered.*

*It is clear that key senior managers in partner agencies and services in Barnet are aware of procedures and work well with the service. However, a challenge is to ensure that all employees working in a position of trust with children, and the general public, are also aware of safe working practices and how to report concerns. This of course is a challenge nationally, and not specific to Barnet. Plans to broaden the training workshops to groups of employees; to take a proactive approach to meeting Barnet organisations; and to dissemination of the publicity leaflet, will contribute to this goal. But it may be helpful to consider increasing of awareness as an overriding objective, and to undertake a range of actions which will help to meet it.*

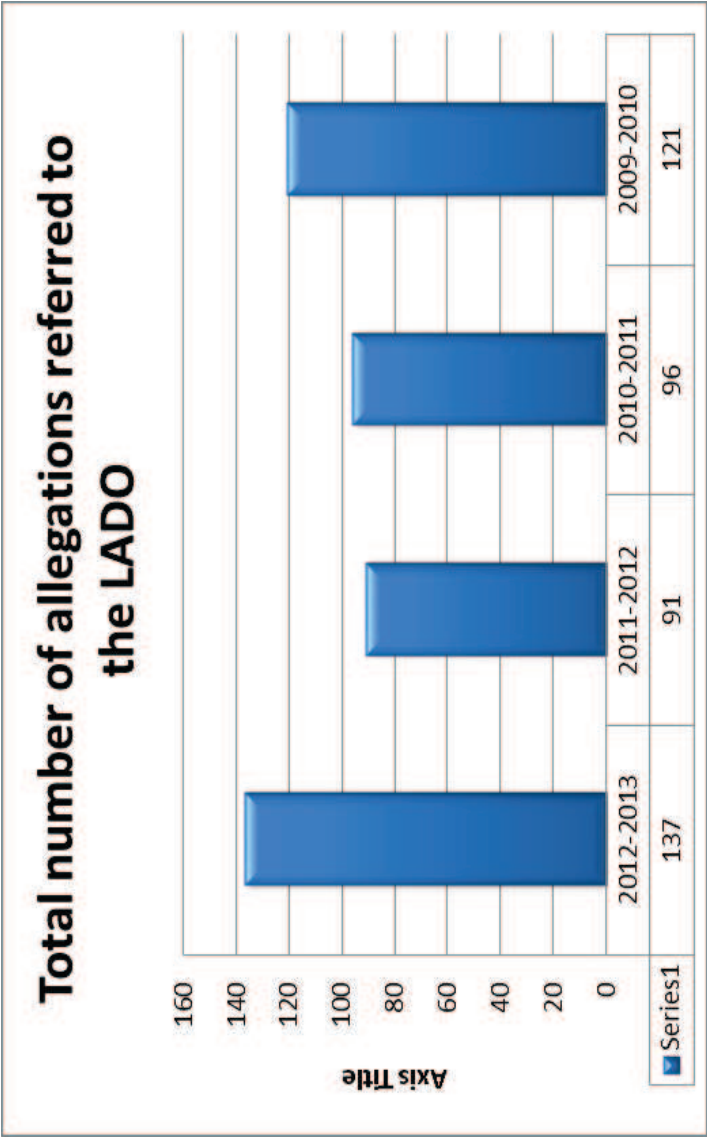
Since the review a leaflet has been completed detailing the LADO arrangements within Barnet and publicising the contact details for making a referral. There is now a dedicated LADO webpage on the Barnet Safeguarding Board website which includes the leaflet as well as other information regarding safer working and how to access training. This material has been publicised via the BSCB newsletter as well as directly to partner agencies for example within health, the voluntary sector and to head teachers and governors at breakfast and twilight briefings. All referrers are directed to this information. Training by the LADO is available to all multi agency partners 6 times per year and is well attended by a broad range of agencies. A leaflet designed by young people explaining the process to children will be available shortly.

Data below indicates there has been a rise in referrals to **137** the figures being **121** (2009/10) **96** (2010/11) and **91** (2011/12). There has been an increase in referrals from social care which may indicate greater awareness and a broadening of the sources of referrals. Physical contact continues to represent the biggest category of referrals, with the vast majority being of a minor nature and not requiring any statutory follow up. There has been an increase in referrals regarding sexual abuse, this may reflect a greater number of those working with children being arrested for downloading child abuse images as well as for historic sexual offences, the latter perhaps a reflection of the "Savile" effect. These referrals reflect a proportion of those requiring child protection and criminal investigations the remainder relating mainly to physical abuse allegations. In terms of timescales for completion of LADO input there has been an increase in those completed within 1 month and over 90% are completed within 3 months. Of those remaining more complex support is required to resolve the case with only a tiny minority remaining outstanding, in the main where there is a criminal trial underway or there has been a prolonged police investigation.

More detailed analysis will be available in the full LADO report which will be presented to the Board at a later date.

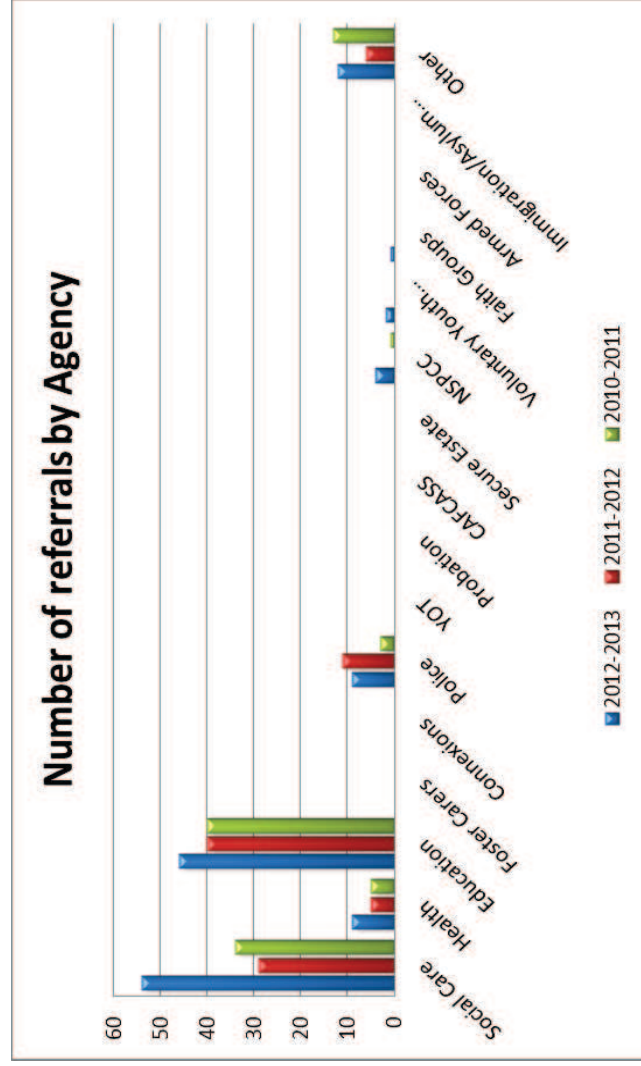
1. Total number of allegations referred to the Local Authority Designated Officer (LADO) from 1<sup>st</sup> April 2012 to 31<sup>st</sup> March 2013 in comparison to previous years:

Total for 2012-2013:	137	Total for 2011-2012:	91	Total for 2010-2011:	96	Total for 2009-2010:	121
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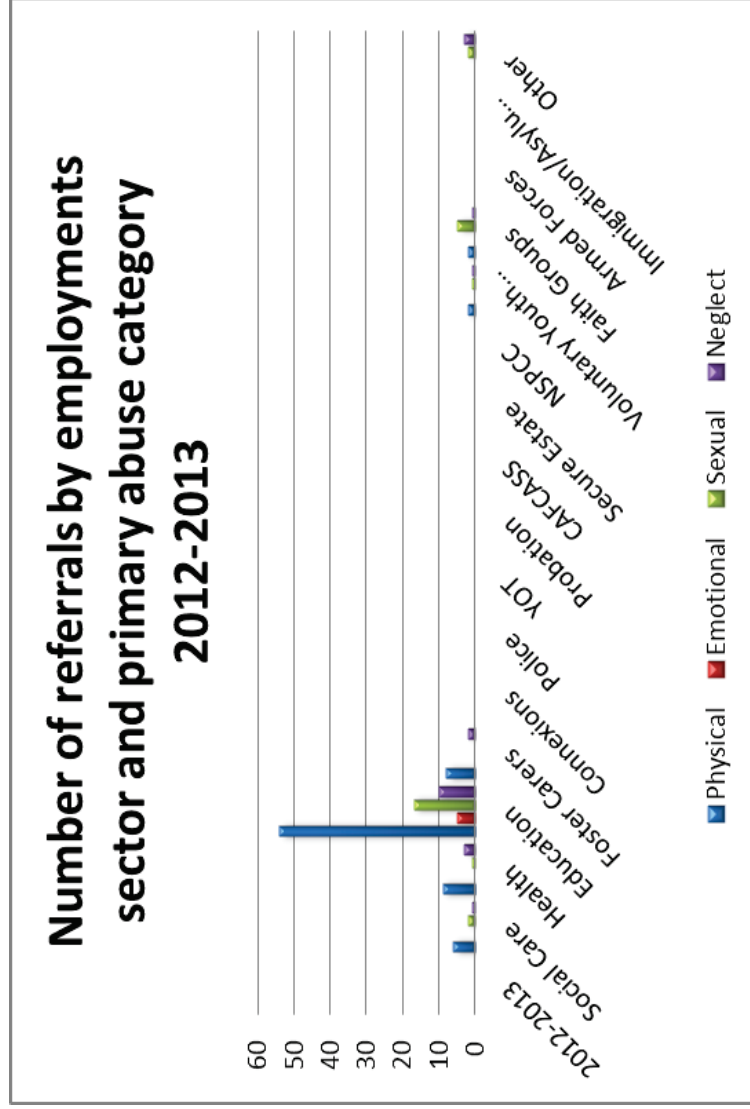
2. Number of referrals by agency for 2012-2013 in comparison with previous years:

Agency:	2012-2013	2011-2012	2010-2011
Social Care	54	29	34
Health	9	5	5
Education	46	40	40
Foster Carers	0	0	0
Connexions	0	0	0
Police	9	11	3
YOT	0	0	0
Probation	0	0	0
CAFCASS	0	0	0
Secure Estate	0	0	0
NSPCC	4	0	1
Voluntary Youth Organisations	2	0	0
Faith Groups	1	0	0
Armed Forces	0	0	0
Immigration/Asylum Services	0	0	0
Other	12	6	13
<b>Total (should equal question 1)</b>	<b>137</b>	<b>91</b>	<b>96</b>

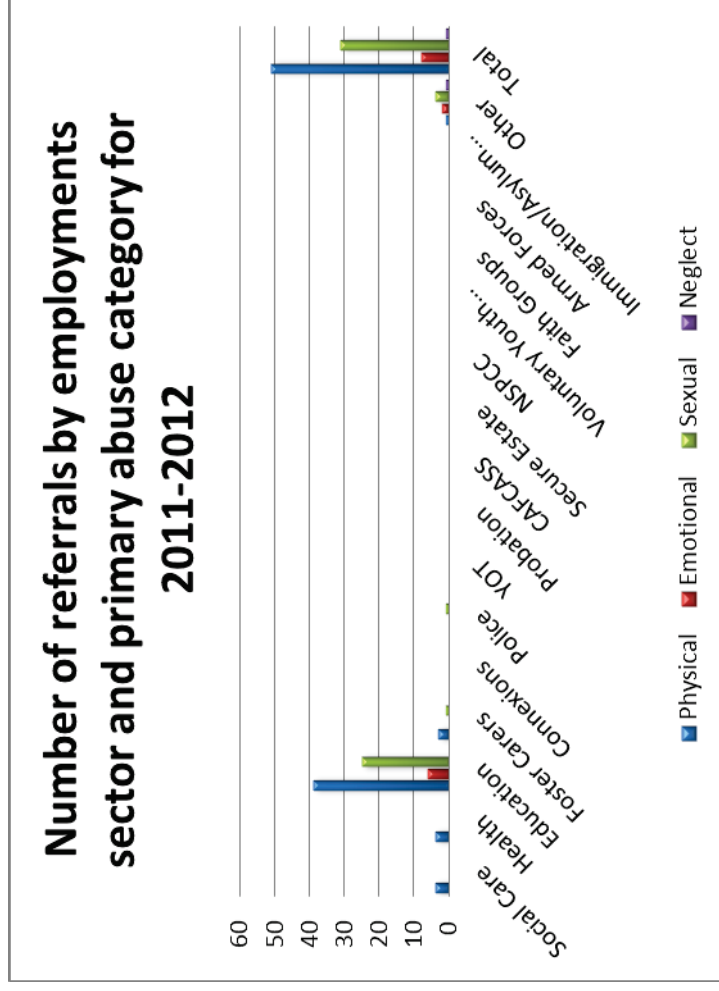


3. Number of referrals by employments sector and primary abuse category for 2012-2013 in comparison with previous years:

Agency:	Physical	Emotional	Sexual	Neglect	Total
<b>2012-2013</b>					
Social Care	6		2	1	9
Health	9		1	3	13
Education	54	5	17	10	86
Foster Carers	8			2	10
Connexions					
Police					
YOT					
Probation					
CAFCASS					
Secure Estate					
NSPCC					
Voluntary Youth Organisations	2		1	1	4
Faith Groups	2		5	1	8
Armed Forces					
Immigration/Asylum Services					
Other			2	3	5
<b>Total</b>	<b>81</b>	<b>5</b>	<b>28</b>	<b>21</b>	<b>135</b>

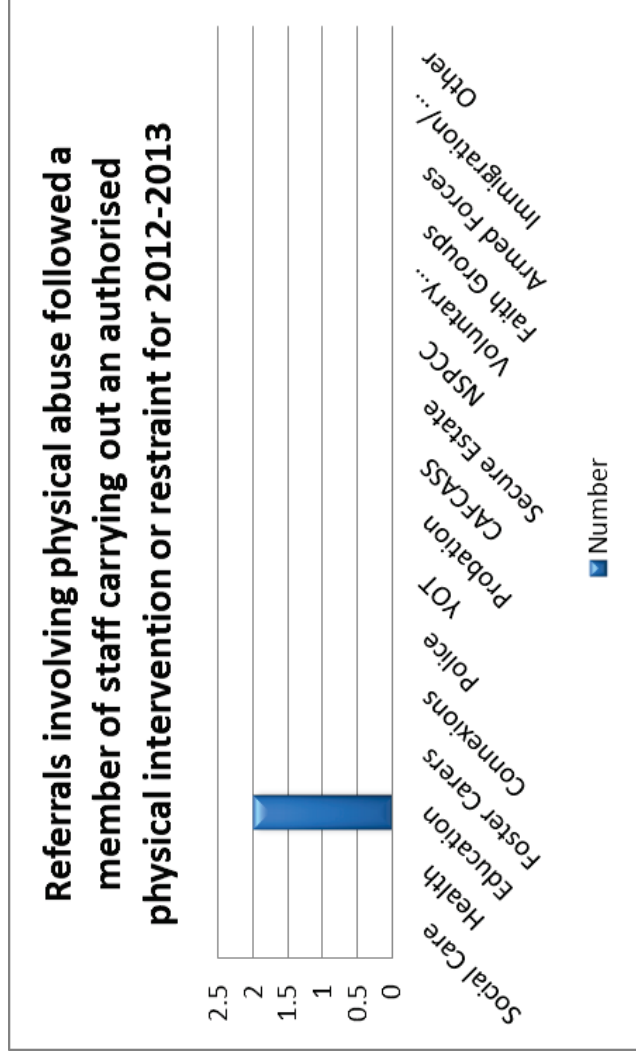


Agency:	Physical	Emotional	Sexual	Neglect	Total
<b>2011-2012</b>					
Social Care	4				4
Health	4				4
Education	39	6	25		70
Foster Carers	3		1		1
Connexions					
Police			1		1
YOT					
Probation					
CAFCASS					
Secure Estate					
NSPCC					
Voluntary Youth Organisations					
Faith Groups					
Armed Forces					
Immigration/Asylum Services					
Other	1	2	4	1	8
<b>Total</b>	<b>51</b>	<b>8</b>	<b>31</b>	<b>1</b>	<b>91</b>



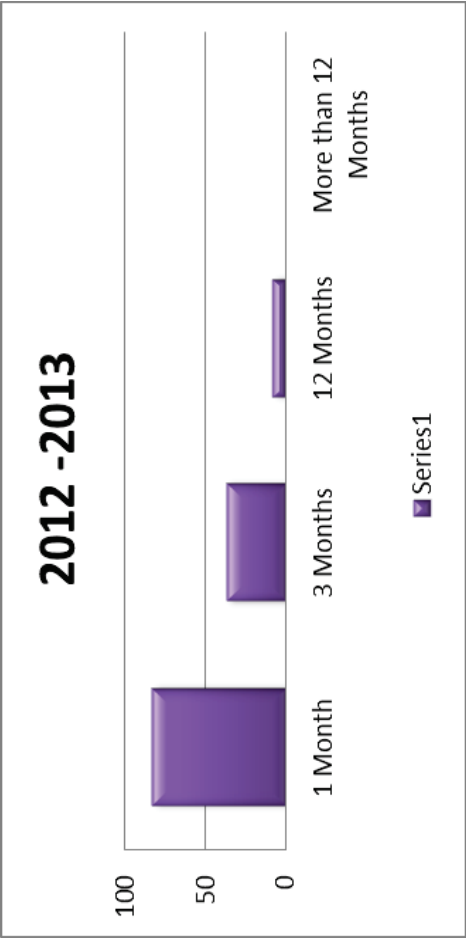
1. How many of the referrals involving physical abuse followed a member of staff carrying out an authorised physical intervention or restraint for 2012-2013?

Agency:	Number
Social Care	
Health	
Education	2
Foster Carers	
Connexions	
Police	
YOT	
Probation	
CAFCASS	
Secure Estate	
NSPCC	
Voluntary Youth Organisations	
Faith Groups	
Armed Forces	
Immigration/Asylum Services	
Other	
Total (should be less than question 1)	2

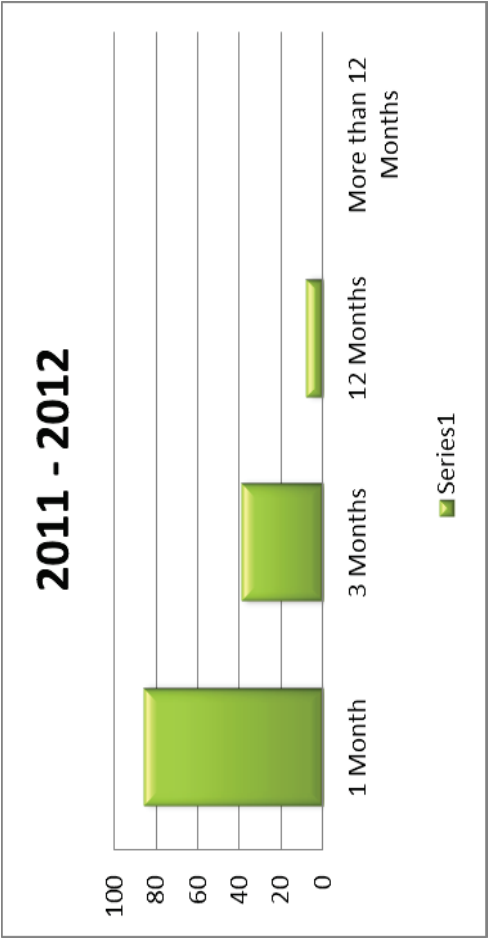


2. At the point of conclusion, the number of referrals that were resolved within the following timeframe:

2012-2013	
1 Month	83
3 Months	37
12 Months	8
More than 12 Months	

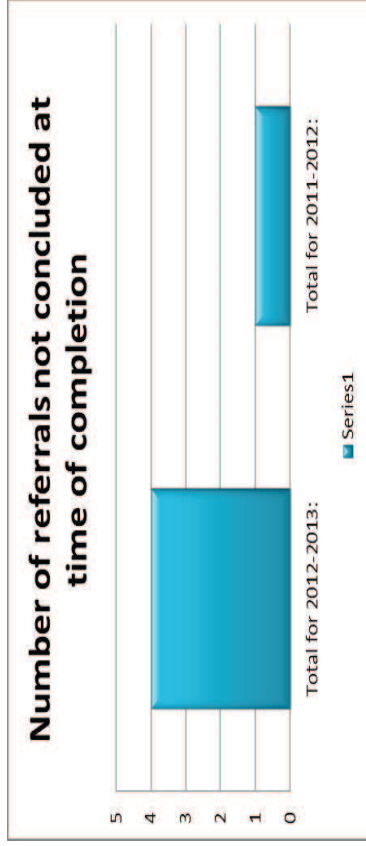


2011-2012	
1 Month	86
3 Months	39
12 Months	8
More than 12 Months	



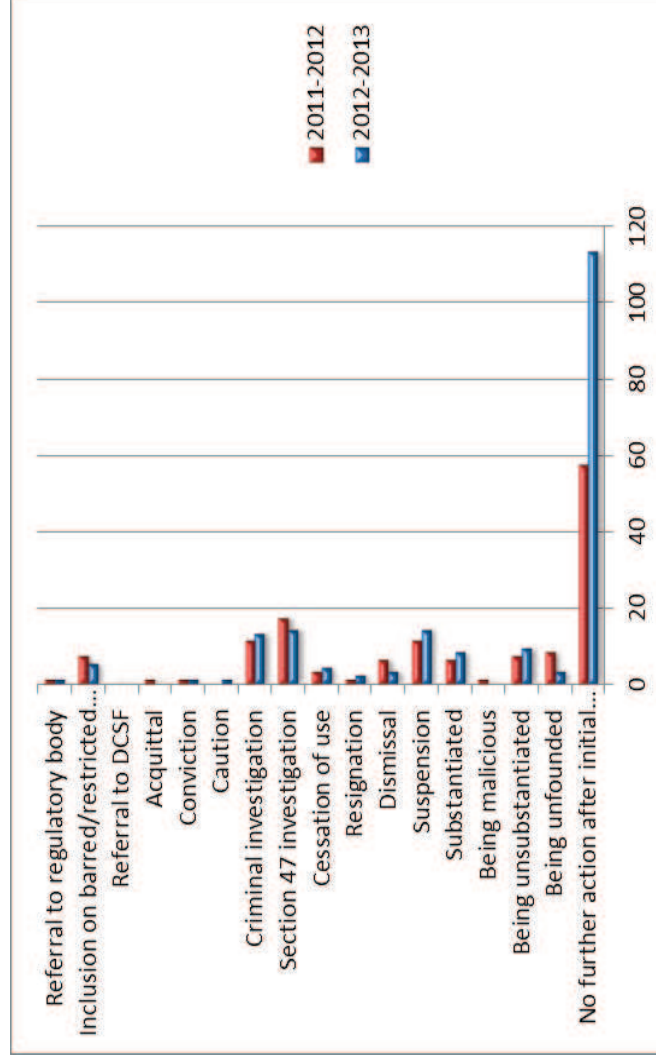
3. Number of referrals not concluded at time of completion 2012-2013 in comparison with 2011-2012:

Total for 2012-2013:	4
Total for 2011-2012:	1



4. Number of concluded referrals that resulted in (for 2012-2013 in comparison with 2011-2012):

	2012-2013	2011-2012
No further action after initial consideration	113	57
Being unfounded	3	8
Being unsubstantiated	9	7
Being malicious		1
Substantiated	8	6
Suspension	14	11
Dismissal	3	6
Resignation	2	1
Cessation of use	4	3
Section 47 investigation	14	17
Criminal investigation	13	11
Cautions	1	
Conviction	1	1
Acquittal		1
Inclusion on barred/restricted employment list/Referral to DBS (ISA)	5	7
Referral to regulatory body	1	1





# Measuring Performance and Progress in Other Policy Areas

The policy areas and priorities for BSCB have largely been reflected in the work of the Sub Groups and Task and Finish groups operating throughout the year, and the progress and performance is as outlined below;

## **Child Death Overview Panel:**

Of the 28 cases reviewed during the period 1<sup>st</sup> April 2012 to March 31<sup>st</sup> 2013, 15 were female and 12 were male, one was recorded as 'blank'. They were aged in the range of 0 day to 15 years, with 53.6% of deaths occurring prior to the age of one.

- Of the cases 28 child death cases reviewed for this period 5 were categorised as a Perinatal/neonatal event, 14 were chromosomal, genetic and congenital anomalies, 2 due to malignancy, 1 due to infection, 1 due to a chronic medical condition, 2 due to suicide or deliberate self-inflicted harm, 2 sudden unexpected deaths and 1 acute medical or surgical condition.
- Ethnically, there was a higher prevalence of "white other" cases. However in 9 cases no ethnicity was recorded as they were recorded as 'blank' or 'unknown'.
- On analysis Golders Green and Burnt Oak wards appear to have highest number of child death cases.
- 8 of the 28 child deaths were categorised as preventable/potentially preventable with the remainder noted as not preventable.
- Currently there are 6 outstanding cases, with 6 'ready to be discussed' at the September CDOP meeting.
- Neonatal deaths – There were 6 of the 28 cases which were primarily due to congenital abnormalities, whether known or unknown and or due to extreme prematurity with some life limiting chronic underlying conditions
- Unexpected deaths – There were 12 of the 28 cases in this category. Primarily these cases were due to congenital abnormalities.
- Expected deaths – There were 16 of the 28 cases in this category and again these deaths were due primarily to congenital abnormality.
- Sudden Unexplained Death of an Infant (SUDIs) – There were 2 cases reviewed. One of the cases reviewed three key contributory factors to cot death were present. They were co-sleeping, alcohol and smoking. The issues identified were recognised by the panel as contributory factors to cot death.
- Suicide or deliberate self-inflicted harm – There were 2 cases reviewed. Each of the cases had issues identified, learning points and recommendations. In case one the issues identified were social networking, interface between private healthcare and statutory services. The learning points for this case were the consistent equitable support to all (professionals in schools and the children). Nationally it would be helpful review these deaths.
- In case two the issues identified were; communication between private care and NHS; access to record between GPs from children that are in boarding school; ambulance services and police need to follow the set protocol. The matter was referred to SCR however it did not meet the criteria. The learning point for this case is that the protocol for suicides is being developed. Recommendations made for this case were that the Chair of Barnet Safeguarding Children Board wrote to the Chair of Hertfordshire's Safeguarding Board regarding the management of bullying within the school setting.

## Number of Deaths by Quarter (statistics reported by date of CDOP review 1<sup>st</sup> April 2012 – 31<sup>st</sup> March 2013)

Quarter	Number of Deaths
1st April 2012 – 30th June 2012	9
1st July 2012 – 30th Sept 2012	7 (one out of borough)
1st Oct 2012 – 31st Dec 2012	8
1st Jan 2013 – 31st Mar 2013	4 (one out of borough)
<b>Total</b>	<b>28</b>

## Category of deaths reviewed 2012-13:

	Gender Breakdown							
	No.	%	Male	%	Female	%	Blank	%
Deliberately inflicted injury, abuse or neglect	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Suicide or deliberate self-inflicted harm	2	7.1%	0	0.0%	2	7.1%	0	0.0%
Trauma and other external factors	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Malignancy	2	7.1%	0	0.0%	2	7.1%	0	0.0%
Acute medical or surgical condition	1	3.6%	1	3.6%	0	0.0%	0	0.0%
Chronic medical condition	1	3.6%	0	0.0%	1	3.6%	0	0.0%
Chromosomal, genetic and congenital anomalies	14	50.0%	7	25.0%	6	21.4%	1	3.6%
Perinatal/neonatal event	5	17.9%	3	10.7%	2	7.1%	0	0.0%
Infection	1	3.6%	0	0.0%	1	3.6%	0	0.0%
Sudden unexpected, unexplained death	2	7.1%	1	3.6%	1	3.6%	0	0.0%
	<b>28</b>	<b>100.0%</b>	<b>12</b>	<b>42.9%</b>	<b>15</b>	<b>53.6%</b>	<b>1</b>	<b>3.6%</b>
	<b>28</b>							

## Preventability of Death (of total deaths listed)

	No.	%
Preventable	5	17.9%
Potentially Preventable	3	10.7%
Not Preventable	20	71.4%
Inadequate Information	0	0.0%
	<b>28</b>	<b>100.0%</b>

## Expected and Unexpected Deaths

	No.	%
Expected death: planned palliative care	3	10.7%
Expected death: other	10	35.7%
Unexpected death: Found dead/collapsed	2	7.1%
Unexpected death: Active withdrawal/cessation of treatment	2	7.1%
Unexpected death: Brain stem death	0	0.0%
Unexpected death: other	4	14.3%
(Blank – not stated)	7	25.0%
	<b>28</b>	<b>100.0%</b>

### Key Outcomes:

- The current backlog of child death cases to be reviewed stands at 6. For the majority of these cases there appears to be a delay due to information that is still required from one or more agency.
- Coronial engagement at CDOP panel meetings remains a challenge. For the CDOP process to work well and for the aggregated findings from all child deaths in Barnet to feed into strategic planning in a timely way, engagement across Coronial service needs to improve significantly. Particularly as this also appears to be impacting on the transfer of the information required to support the Rapid Response and thus CDOP process. The issue has been raised in the past with the Coroner's Office and will need to be again.
- CDOP panel meetings for the last year have now reverted back to being held on a quarterly basis as the backlog of cases from the previous years (2008 – 2010) have all been reviewed.
- To improve the efficiency and timeliness of the Rapid Response process the designated Doctor for Child Death has set aside regular once weekly meetings to accommodate any unexplained child deaths that occur which would require activation of the Rapid Response process.
- Terms of Reference have been updated
- Clarity around resource (staff & finance) availability has impacted on the timeliness of implementing a robust process for communicating and engaging with families around the CDOP process. The process for informing parents about CDOP has now been implemented. Continued funding to support the CDOP process has been agreed.
- The number of child deaths remains small and as such it remains difficult to establish any clear trends or patterns.

### Child Sexual Exploitation Task Group /Missing Children Sub Group:

This continues to be a high priority in Barnet and nationally with several high profile cases giving further impetus to the work of the Children's Commissioner's enquiry, now in its second year.

Work has focused in the last year on bringing together work streams linking sexual exploitation and missing children in recognition that they are one of the groups most vulnerable to sexual exploitation. A sexual exploitation and missing children task group has been reconvened to promote a more coherent approach to the management of risk in this area. The group will oversee the implementation of the Metropolitan Police Pan London Child Sexual Exploitation Operating Protocol created in conjunction with the NSPCC and recently piloted in two inner London Boroughs with the aim of establishing consistent

approaches to operational practice across Barnet. This work is regarded as fundamental to the work of the Barnet MASH.

Barnet has also been represented at a cross borough group convened by Enfield and a joint conference on sexual exploitation and trafficking was successfully held in Jan 2013

Following a review which identified the need for better assessment tools, a Protocol and Risk Assessment Tool for children missing from care or from home (Part 1 and Part 2) has been developed for multi-agency staff and carers in order to guide decision making in relation to assessing risk and defining action. It has been written with the assistance of Barnet Missing Persons Unit and Barnet Police Jigsaw Team and was piloted successfully with staff in residential homes before being issued.

Training has been commissioned and delivered to raise awareness and build capacity of staff to identify and work with children and young people to prevent sexual exploitation and reduce risk.

### Key Outcomes:

- Protocols and Risk Assessment tool launched for children missing from home and from care
- Reconvened multi-agency task group
- Sexual Exploitation training being rolled out to multi-agency staff to support identification and responses
- Cross borough collaboration and a Conference with L.B.Enfield attended by around 100 multi-agency staff
- Adoption of the Metropolitan Police Pan London Child Sexual Exploitation Operating Protocol by all partners at the BSCB

### Practice Examples

- *Hospital staff were able to help safeguard a 15 year old girl, missing for several months after running away from foster care, and considered to be at risk of being forced to be a street-worker, who had absconded from the inpatient ward after admission following assault. A Regional Police Alert was put out, of which the teenager became aware, and she presented herself to a North London police station.*
- *Safeguarding of 15 year old girl, admitted for deliberate self-harm, who made allegations of sexual exploitation by gang members. In patient mental health placement found and referred to police and social care.*
- *Deliberate self-harm by a 13 year old girl in foster care, also considered to be vulnerable to possible sexual exploitation. Referred to CAMHS and close liaison with social care.*

### Priorities for 2013-14

- Build the capacity of professionals to identify and support young people at risk of sexual exploitation, using the existing multi-agency framework.
- Review and work towards implementation of the Pan London Child Sexual Exploitation Operating Protocol
- Link with work of Youth Shield in developing peer support for healthy relationships

## **Safeguarding Across Faith and Cultural Groups:**

The Faith and Cultural task group aims to establish and promote dialogue with a range of faith and other community groups that represent Barnet's diverse population. It operates as a cross cutting group that includes representation from adults services. CommUNITY Barnet has made a significant contribution to this agenda through its network of voluntary and community sector organisations. Through this umbrella organisation, a safeguarding advisor has established liaison with a range of community groups and has run safeguarding surgeries to offer advice and support, including training which is culturally accessible, for example, to a local Mosque.

Following the retirement of the previous Chair, this role has now been taken over by the Borough Commander Adrian Usher and membership of the group has expanded to include representation from the Britsom Somali network. A successful event was held in safeguarding month to explore safeguarding across different communities through themed case scenarios. The focus of the group will be faith groups. In particular the work that is currently being undertaken with the orthodox Jewish community. The group will also be focussing on faith groups where there has been no connection so far to partnership working.

Barnet has recently participated in a partnership review (involving a number of boroughs) which was commissioned following the death of a young person in Newham who was killed by family members in the belief of spirit possession.

The family had briefly lived in Barnet as one of a number of boroughs.

The focus of the review was to assess impact of local learning since January 2011 including progress in relation to the National Action Plan (NAP) which includes a particular focus on spirit possession. Although this was considered by the group as a consultation document, there is a need to review and consider local implementation of the action plan going forwards.

The review has enabled key areas for development to be identified which build on progress to date. This includes establishing liaison with local community and faith leaders to enable them to act as champions for safeguarding in their community. A learning event is planned later in the year for the 6 boroughs to disseminate learning and share good practice.

The group has also begun a mapping exercise to update information in the 'Faithbook' directory about local faith groups.

### **Key Outcomes:**

- Contribution of members to events in safeguarding month
- Recruitment of new members and links with Somali community

### **Priorities for 2013-14**

- Review national action plan to identify how it can be applied locally
- Consider and identify resources to take this work forward
- Continue to seek opportunities to work with faith leaders to enable them to become champions of safeguarding in their local communities
- Review literature, for example, through Project Violet, that may potentially be distributed to schools, health services and other universal services to ensure key messages on harmful cultural practices are effectively highlighted

## **Domestic Violence:**

Domestic Violence (DV) continues to be a concern for many children and families in Barnet and a high proportion of families known to Children's Services are affected by domestic abuse at some level. The Children's Service restructuring has enabled closer alignment of this work through locating the Domestic Violence co-ordinator role within the safeguarding and quality assurance division.

A range of early intervention services are provided to families through the Safer Families Project in partnership with our Family Focus team and Solace, the contracted providers of DV support services. This includes therapeutic work for children and mothers affected by DV which aims to promote support and safety planning. In some cases this has enabled children to be stepped down from CP planning. Within social care, there are three specialist DV workers who work with and support families affected by domestic violence who are deemed to be vulnerable and high risk.

The Multi Agency Risk Assessment Conference (MARAC) reviews and responds to high risk cases with the aim of reducing harm and makes a vital contribution to the protection of women and children. Regular MARAC training sessions continue to be delivered across the partnership, including to GPs to raise awareness and ensure the MARAC system is effective and high risk victims of domestic violence and their children are supported.

Barnet has recently agreed to move the response to DV so that it is placed within the wider Violence Against Women and Girls (VAWG) agenda in line with national and London policy. A strategy for 2013-16 has been developed which aims to coordinate services in Barnet in support of the wider safeguarding agenda. An action plan in development.

The recent Government change to the definition of DV to include young people is welcomed, as it will help raise awareness that young people experience domestic violence in their own intimate relationships as highlighted by the work of Youth Shield. This will mean that our safeguarding children systems in Barnet will need to be reviewed to ensure that are equipped to respond appropriately to younger victims.

As part of implementing the strategy for VAWG, BSCB will need to ensure strategic partnership responsibilities are clarified for responding to the strands which apply to children and young people, in particular

- Definition of DV
- Sexual abuse
- Sexual exploitation (including involvement in serious youth violence)
- Female genital mutilation

## **Key Outcomes:**

- An early intervention project to support families (with children aged 0-11yrs) affected by domestic abuse including therapeutic work for children
- Specialist social workers to work with high risk DV cases involving children
- Provision of services for survivors, children and perpetrators by Solace Women's Aid



## Practice Example

*Child aged 5 and his mother resides in a Women's Refuge, having fled Domestic violence. When the family first arrived at the refuge Child was observed to be quite rough in his play with other children. He became frustrated by language barriers and Child's experience of relationships also taught him that violence was a part of communication with others. Due to his rough play other children would shy away from playing with him. When Child started school they also flagged up concerns about Child's ability to interact appropriately and to make friends. Mother admitted to finding it difficult to get Child to listen to instructions and best respond to Child's needs.*

**Positive outcome;** *Since coming to the refuge Child has been able to access one to one play therapy and is now accessing this support within a group. The play therapist reported that following his one to one sessions Child was better able to interact with her by using gentler and more peaceful means. Through accessing parenting classes and through one to one work with the family support worker mother has been able to build her knowledge of the effects of DV on her child and how best she can support him.*

## Priorities for 2013-14

- Focus on domestic abuse in the context of young people's relationships.
- Ensure MASH arrangements extend to DV issues
- Contribute to implementation of VAWG as appropriate

## Training Sub-Group:

The Training Sub Group is responsible for the strategic overview and quality assurance of safeguarding training, both by single agencies (to their own staff) and interagency training (where staff from several agencies train together).

The work of the group is driven by the requirements outlined in Working Together 2010, the Inter Collegiate Framework for health partners and the London Safeguarding Children Board 'Competence Matters' framework

As well as working in collaboration with the Barnet workforce development group, there is an active link with the London Safeguarding Board to promote a consistent approach.

Barnet has an excellent training programme and offers a wide range of courses that are generally well attended and positively evaluated across the partnership.

There has been active involvement in supporting the delivery of single agency training to a wide range of staff including GPs, health service clinicians, schools, faith and community groups, caretakers, and others.

Partner agencies have played a key role in contributing to some of this training and in particular colleagues from the Police Child Abuse Investigation Team and Children's Social Care have made a significant contribution to GP training that has been very well received.

Safeguarding sessions have also been provided for elected members as part of their development programme.

There will inevitably continue to be some pressures on resources and the possibility of cross service and cross borough collaboration in commissioning training should be explored as a way of maximising access to training.

The core safeguarding and child protection courses are over subscribed and BSCB provided funding for additional courses to meet demand in the last quarter. Courses have continued to be provided free of charge for Barnet agencies but this should be kept under review and the BSCB would endorse implementation of the penalty for non-attendance as a means of mitigating some of the cost.

### **Training Data:**

The table below shows the number of courses and attendance broken down by agency, together with the %age that were quality assured. That feedback was overwhelming positive. The planning of the training is carried out annually and reflects the priorities of both the BSCB and the Children's Trust.

The recently reviewed Children's Trust Plan 2013/15 was deliberately planned following wide consultation to fit with a structure reflecting the Journey of the Child.

It should be noted that the chart refers to the workforce development/BSCB rolling programme and does not include specific or bespoke training which is shown separately. Take up of the on line programme by agency has also been included and identified gaps are being acted upon in planning training delivery. It should also be noted that some of our partners work across Boroughs and may therefore access training in neighbouring authorities. Some services such as Police and Probation provide their own training. It has been a matter of concern in Barnet and elsewhere in London that with the exception of specialist staff there is very limited take up of multi agency training by the police given their pivotal role in safeguarding. The concern has been raised locally and through the London Independent Chair's Forum with senior officers within the Metropolitan Police. It has been agreed that the Metropolitan Police will create additional training days to address the issue.

The recent S11 audit provides assurance that staff in all agencies are provided with safeguarding training. However, induction training appears to be less clear. An area requiring development is to demonstrate impact of training on practice and improved outcomes. There were also a number of returns which did not evidence training to enhance awareness of diversity issues, although training is available in this area as part of the multi-agency safeguarding training programme. Take up of Safer Recruitment Training also needs to be increased as not all managers had accessed this. These are all issues which will be followed up by the Training Sub Group



Description	11/12 outturn	12/13 outturn	Qtr 1 12/13	Qtr 2 12/13	Qtr 3 12/13	Qtr 4 12/13
Number of LSCB safeguarding children training courses provided in the past year	56	61	9	11	17	24
<b>Agency attendance total</b>						
Local Authority	259	351	31	46	108	166
Police	1	0	0	0	0	0
Health	154	132	35	13	21	63
Mental Health	38	77	2	10	15	50
Youth Sector		38	0	5	17	16
Voluntary	190	165	24	46	33	62
Private	181	164	23	23	33	85
Education	274	344	37	75	107	125
Probation	0	0	0	0	0	0
Service Users	0	0	0	0	0	0
Other	0	3	0	0	0	3
<b>Online Safeguarding Introduction Training</b>						
<b>Agency total</b>						
Local Authority	6	4	1	2	0	1
Police	0	0	0	0	0	0
Health	0	12	11	0	0	1
Mental Health	0	0	0	0	0	0
Voluntary	86	13	5	2	5	1
Private	71	102	18	26	22	36
Education	25	35	13	6	11	5
Probation	0	1	0	1	0	0
Service Users	0	0	0	0	0	0
Other	0	0	0	0	0	0
% of courses that were quality assured/evaluated/ audited	100%	100%	100%	100%	100%	100%

## Other BSCB Events:

### SCIE/DHR Learning Events Total Number 263

Agency	Number
Adults	30
Children's Service	105
Drugs/Alcohol Services	1
DV/community Safety	3
Early Years/Children's Centres	9
Fire Service	6
GPs/Hospital	7
Health ( CLCH)	27
Housing	12
Mental Health	28
Police	3
Probation	9
Schools/Education	17
Voluntary/Independent	7

### Sexual Exploitation and Trafficking Conference January 2013

Agency	Number
CAFCASS	2
Children's Service	8
Education/Schools	3
Health	21
Housing	1
Mental Health	1
Police	2
Probation	1

### Personality Disorder Workshops October 2012 – February 2013

Agency	Oct	Dec	Jan	Feb	Total
Adults	0	0	3	3	6
CAFCASS	0	0	0	1	1
Children's Service	2	1	11	7	21
Domestic Violence Services	1	2	2	1	6
Early Intervention and Prevention	4	8	3	3	18
Health	2	5	3	2	12
Mental Health	1	0	0	0	1
Probation	1	2	1	1	5
Schools/Education	9	1	3	4	17
Vol Sector	0	0	1	1	2
Youth/YOS	0	0	5	3	8

## Personality Disorder Consultation Slots

Agency	Number
CAMHS	1
Children's Service	2
Early Intervention and Prevention	3
Education/Schools	1
Health	1
Voluntary Sector	1

## Priorities for 2013-14

- Implement quality assurance framework to demonstrate impact of training
- Encourage greater take up of the safer recruitment and safeguarding and diversity training
- Ensure learning events reflect messages from review.

## Work of Youth Shield:

The Barnet Safeguarding Children Board (BSCB) is committed to ensuring that the views and experiences of children and young people play a key part in driving the agenda of the Board. Much work has been done in laying the groundwork to enable young people in Barnet to play an active role in the work of the BSCB. In order to support this process, the BSCB commissioned CommUNITY Barnet to consult with children and young people on the safeguarding agenda and this has helped to inform the work programme.

Youth Shield members have a standing invitation to the BSCB and report back regularly on their activity. At other times the Chair and Board Manager attend meetings with the young people.

The work of Youth Shield was recognised as an example of good practice through an award at the London Safeguarding Children Board in 2012 and the subsequent commendation at the full council meeting in Barnet.

Work carried out during 2012-13 has included giving young people a voice on health issues, for example, the CAMHS 3 year plan and designing a leaflet for young people regarding allegations.

Youth Shield members have also been involved in training to become peer facilitators in relation to healthy relationships and have piloted this in some of our youth provision.

Looking forward to the next year, as outlined in their section, Youth Shield have recently recruited new members and have put forward proposals for an expanded work plan that includes the roll out of healthy relationship peer to peer training and a mystery shopping exercise of different services. Youth Shield made a detailed Business Development Proposal to the BSCB for substantial funding and this was agreed.

## Cross Generational Work:

This has been taken forward through the Joint Services Governance Group which has identified areas for increased collaboration including induction training and the appointment of a single Chair for both

Boards. The existing faith and cultural group is also cross cutting as there are common concerns linked to how we work with faith and cultural groups to promote safeguarding in all communities.

Barnet has also adopted the recommended national strategy for Young Carers and this is an issue highlighted by one of our case reviews during the last year.

A further significant area of progress is the implementation of protocols with Barnet, Enfield and Haringey Mental Health Trust and Children's Services. Following a successful launch in 2011, the protocols have been updated following a multi agency review in Jan 2013. Implementation of this protocol is being supported through a system of operational interface groups that enable complex cases or issues to be considered by social care and mental health service managers with a view to promoting collaboration in practice and resolving areas of professional difference. These are reported to be working very effectively in supporting work on the ground.

### Practice Example

*The Mental Health Trust has also developed systems in relation to young people who require emergency assessment and treatment following an incident in which a child became acutely ill and required inpatient treatment. There was a concern about the child being admitted to an adult facility and a lack of clarity in the existing guidance*

**Positive outcome;** *Agencies worked together to devise an agreed response to such situations in the future.*

### Key Outcomes:

- Protocol between Children's Services and Adult Mental Health updated
- Interface meetings continuing to improve collaboration between services.
- Review of joint working through adults and children's services governance

### Priorities for 2013-14:

- Joint Services Governance has identified areas for increased collaboration
- Young Carers strategy to be promoted

## Communications Strategy

After a considerable period of planning and negotiation, and at times not a little frustration, we are delighted to report that BSCB now has its own independent website which includes sections for children, young people and families, professionals and members of the public. The website includes a directory of information for professionals which was developed by the Professional Advisory Group and provides a basis to further develop communications.

The website is regularly maintained by the BSCB Administrator and is a valuable resource to ensure key information is readily available.

The website also includes the BSCB newsletter which is produced after each meeting with the aim of providing a digest of the meeting and updates on new and emerging policy and guidance. Board members are asked to cascade the newsletter to front line staff. The Independent Chair carries out 'spot checks' from time to time to assess awareness of the Board on the ground but ensuring information reaches a wide ranging audience remains a challenge

As part of the work to create the website all the existing guidance and policies and procedures were formally reviewed and a directory created on the website to increase the ease of access to professionals but also allow access to a wider public.

BSCB actively contributes to the annual November Safeguarding Month in Barnet which enables messages to reach a wider audience both within the council and externally.

There is also regular communication with schools through the School Circular and meetings with safeguarding leads and Heads.

We intend to further develop communication with young people through the work with Youth Shield who have designed an allegations leaflet for young people as part of their work during the last year.

#### **Key Outcomes:**

- Website now launched
- Improved awareness of the work of the BSCB including contribution to safeguarding month.
- Newsletter regularly circulated to front line staff.
- Participation by young people in developing accessible information.
- Review of policy and procedures and creation of an accessible directory

#### **Priorities for 2013-14**

- Continue to build and develop website
- Work with Youth Shield to develop accessible information for young people

## **Safeguarding Month**

#### **'Safeguarding is Everybody's Business':**

November 2012 saw a repeat of the successful initiative safeguarding month at Barnet Council and, as part of this, a range of events took place to emphasise the message that safeguarding is everybody's responsibility. Safeguarding month has been a good opportunity to raise awareness about safeguarding and the challenge now is to keep up the momentum, building on best practice and ensuring that safeguarding issues are integrated into everyone's day to day work.

#### **Key Outcomes:**

- An informative presentation from the Lucy Faithfull Foundation regarding sexual abuse prevention. This was followed by the provision of free training sessions to a small number of Barnet Schools and Children's Centres. Further opportunities for this training to be delivered to a specific cultural group have recently been identified and will be explored via the Faith and Cultural Sub-Group.

- Wide range of events including express training sessions on how to spot and report a safeguarding concern to events about sexual exploitation of young people, trafficking, e safety and domestic violence.
- An event focused on faith and culture led by colleagues in the Somali Britsom organisation which included colleagues from both children's and adults services

## Looking to the Future

The priorities for the BSCB remain similar to those of last year and reflect the Board's Work Plan 2012/14 agreed in 2012. Additional focus has been made on issues of neglect, child sexual exploitation and reviewing e safety policies.

In May 2013 the BSCB held a planning day with a focus on the learning from the SCIE Case Reviews which had been completed and reviewing our existing Work Plan priorities.

The consensus from the day taken in conjunction with significant feedback from multi agency "Learning Events", with frontline staff which had been carried out through the year resulted in an agreed focus on the priorities below and with a strong emphasis on the fundamental role that the MASH will play in continuing to develop both the culture and operational practice across the partnership in Barnet;

### **BSCB Priorities for 2013/14:**

#### **Quality Assurance, Challenge and Scrutiny:**

To further develop scrutiny of BSCB in monitoring and evaluating the effectiveness of safeguarding activity across the partnership through a combination of S11 and multi-agency audit together with shared performance information, so that children & young people in Barnet are safe from abuse neglect, violence and sexual exploitation

#### **Risk Assessment, Information Sharing and Partnership Work:**

Seek to develop Tools/Protocols to promote improved information sharing, risk assessment and partnership working, including support for development of **MASH**

#### **Young People at risk through peer violence and exploitation:**

To focus on peer to peer violence including Gangs/Sexual exploitation/ Anti Bullying/e safety

#### **Neglect/ Early Intervention:**

Promoting and evaluating a model of early help for children and families which reduces demand and cost as part of the Munro Demonstrator pilot with a particular focus on issues of neglect.

#### **Learning and Development:**

To strengthen the BSCB role in promoting learning and development across the partnership.

## Conclusion

This Report is intended to reflect the current state of safeguarding activity across Barnet, highlighting the level of work undertaken, outcomes and those areas which need additional focus. It is clear that a great deal of extremely positive work is either underway or has been completed.

On the whole it has been reflected in that the statistics above for Barnet, in comparison with other London Boroughs, are on the face of them reassuring. The figures are relatively low when examined against population figures. However in 2011 as reported there were concerns at increasing numbers of children being placed on child protection plans at a rate of increase that was greater than similar London Boroughs. Internal audit work was completed by LBB and BSCB, and whilst no single cause was clearly identified, some focused work was carried out on monitoring those trends.

The figures below and the historic data in Appendix 1 reflect a more reassuring picture in that whilst 2012/13 saw a small rise in initial assessments, a significant rise in core assessments and a rise in Section 47 child protection investigations, the number of children on a child protection plan reduced significantly. Similarly the numbers of children being returned to a plan or remaining on a plan for over two years also reduced. The additional focus by Children's Services and partners in assessment and early help reflects improved planning and appears to have led to a reduction of children being subject to child protection plans without increasing the numbers of children having to be returned to plans at a later date. That is a significant achievement and needs to be maintained.

Other significant strands of work that are currently being carried out also reflect a determination to improve the quality of services to children, young people and their families.

In particular the work to embed the MASH structures will undoubtedly continue to improve information sharing arrangements and thereby assist in the integration of the early intervention and child protection processes to the benefit of children and young people. There is already good evidence of that work being effective across the partnership wider than just the local authority. Similarly the courage in taking up the challenge of being a Munro Demonstrator site has given a clear message that improvement and professionalization of social work in its widest sense is something which is desired in Barnet.

Finally the additional substantial funding that has been agreed to support Youth Shield will enable them to assist the Board in developing services that are built around the needs of vulnerable children and also to test the efficacy of the Board and individual agencies in delivering them over the next year.

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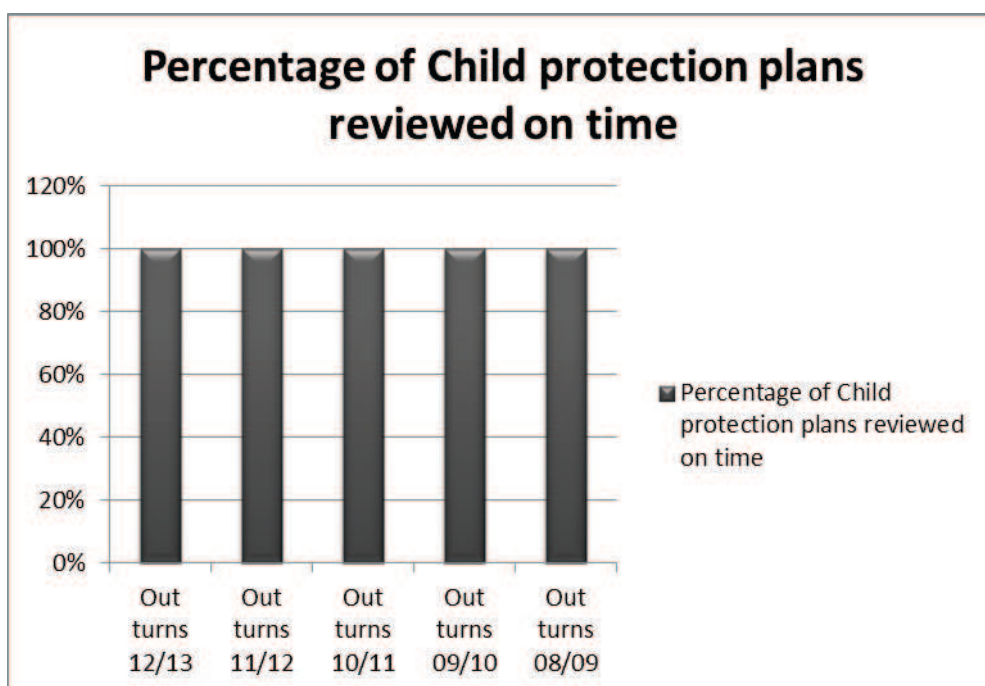
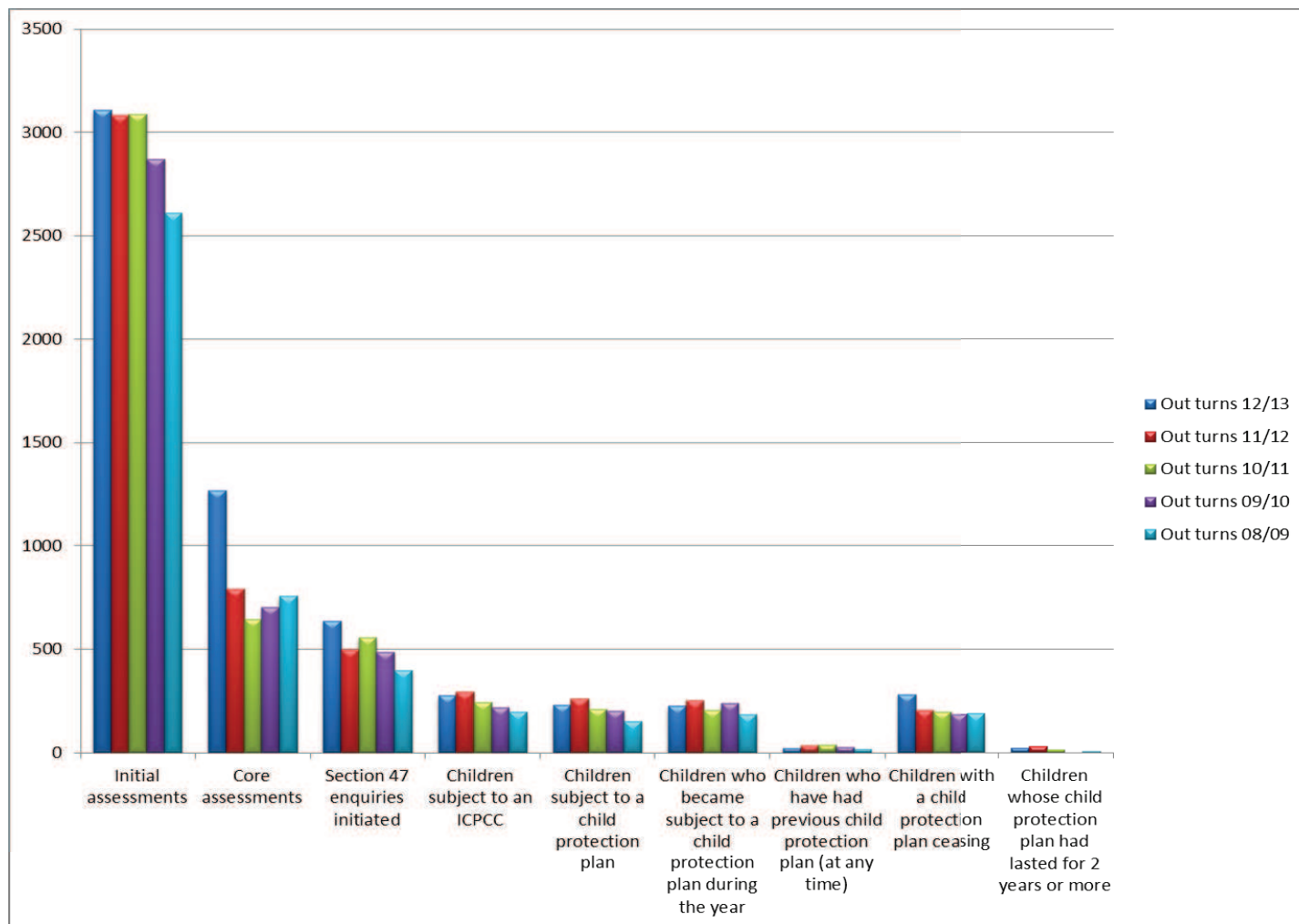
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Partner Contributions as identified

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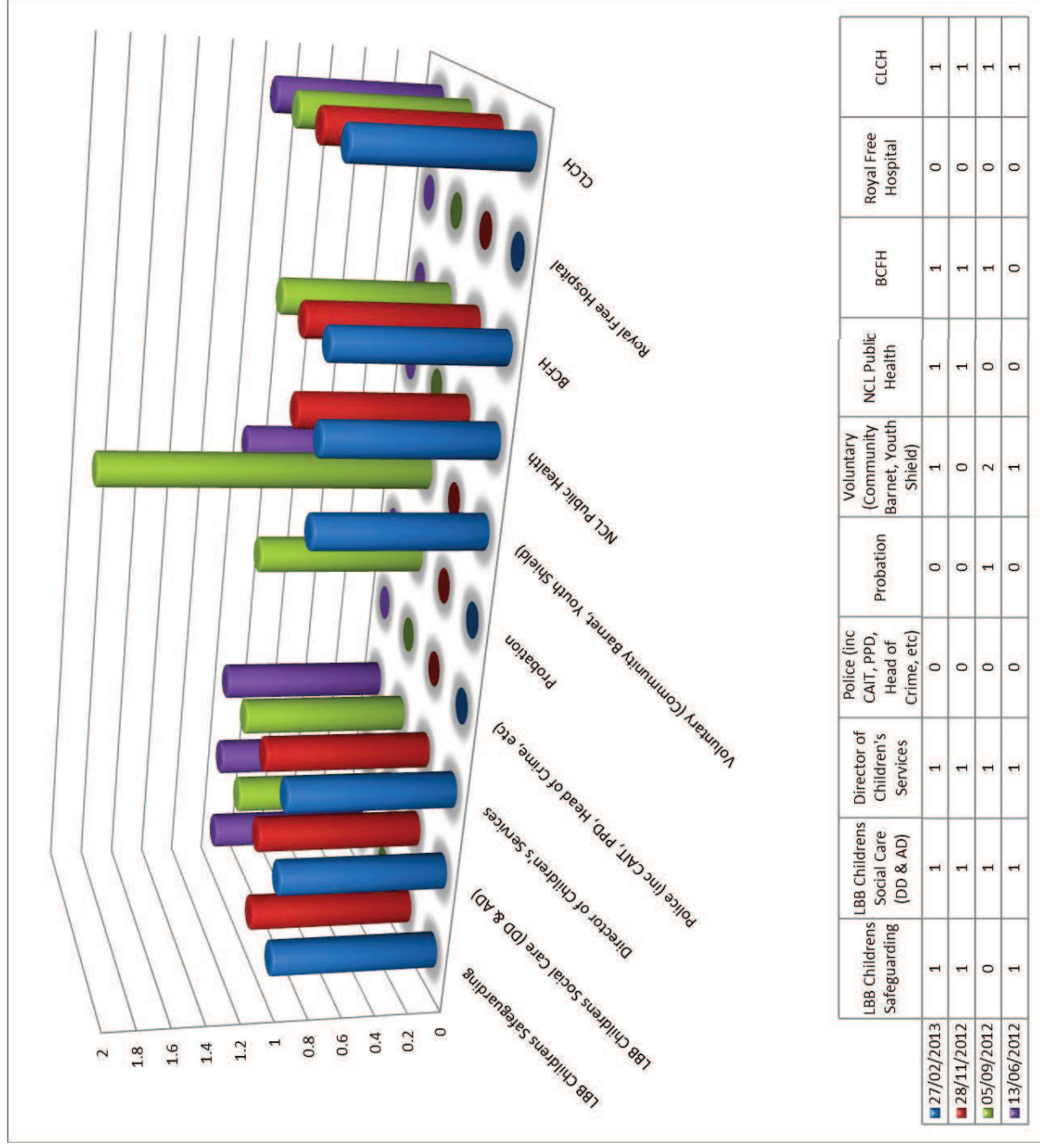
**July 2013**

## Appendix 1: Indicators for Barnet Safeguarding Children Board

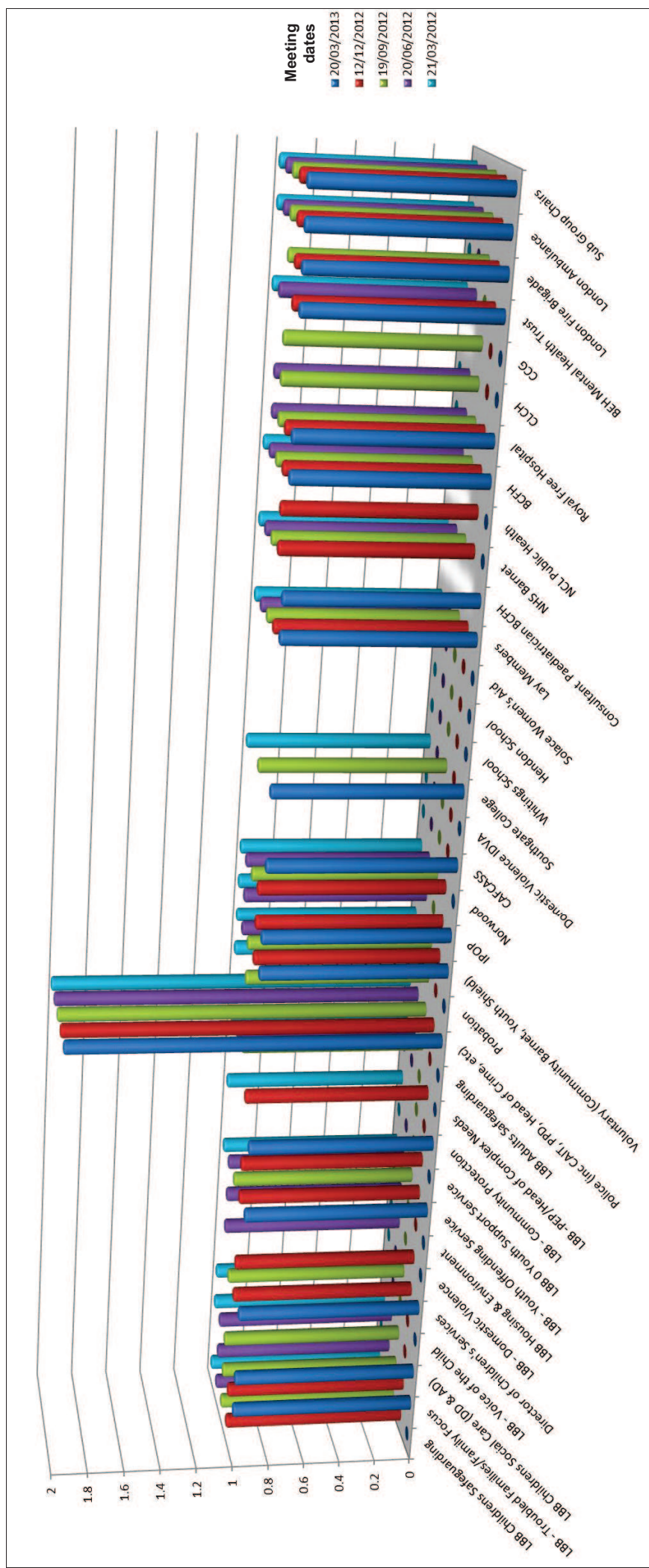




Executive Board Meeting Attendance



## Board Meeting Attendance



## Appendix 3: Barnet Safeguarding Children Board Agency Updates

### Organisation: Children's Social Care

#### Internal arrangements for governance regarding safeguarding children at risk:

- In accordance with legislation and statutory guidance, local authorities have a duty to safeguard and promote the welfare of children in need living in their area.
- As part of ensuring effective partnership working, the local authority has a responsibility to ensure that arrangements are in place to promote cooperation with partners and others, as appropriate working with children in the local area.
- Children's social care carries out these duties working with other services and agencies both internal and external to the council.
- Children's Social Care works within the framework set out by the Barnet Safeguarding Children Board and adheres to the required policy and procedure, for example, the London Safeguarding Board procedures.
- The Chief Executive is the chief paid Officer of Barnet Council. The Director for People who is the Council's statutory Director of Children's Service reports directly to the Chief Executive. The Assistant Director for Children's Social Care is the Council's senior officer with day to day responsibility for safeguarding arrangement and children's social care and, reports to the Family Services Director who is accountable to the Director for People.
- The Council's organisation structure is available on the council website and shows the relationship between Children's Social Care and other services across the council. For more information on the functions within Children's Social Care, please see either the Children and Young People Plan or Barnet's Children's Service Plan both available through the internet.
- All social workers undertaking statutory functions in Children's Social Care hold a recognised qualification and are currently registered through General Social Care Council as required. From 31 July 2012, the registering body will be the Health Professions Council. All GSCC registered social workers will retain their registration.
- Social workers undertake regular training to maintain their registration.
- Children's Social Care is represented at the BSCB, Children's Trust Board, Health and Well Being Board, Domestic Abuse Strategic Board and other strategic groups relevant to promoting the welfare of children and young people.
- Safeguarding and promoting the welfare of children and young people is a strategic priority for the council. The performance of Children's Social Care is central to achieving the Council's objectives. Please see the Council's Corporate Plan.
- Within the Council, the Assistant Director for Children's Social Care attends the Assurance Meeting of the Strategic Commissioning Board which is chaired by the Chief Executive on a bi-monthly basis to report on safeguarding matters and risks related to children and young peoples. The Director for People is a member of the SCB. The Assistant Director is also a member of the Children's Service Senior Leadership team and other relevant teams within Children's Services.
- The AD CSC works with staff across Children's Social Care to continually improve outcomes for children and young people.
- The Governance of Children's Social Care is inspected by Ofsted as are many of its functions such as its fostering service, adoption service and children's homes.

### **Key outcomes and achievements for 2012/13**

- Work has progressed on integrated safeguarding arrangements through the development of a Multi-Agency Safeguarding Hub – MASH. The MASH will begin in July 2013. The Independent Chair of the BSCB has provided oversight of the delivery arrangements through a steering group.
- Early Intervention for families to prevent their needs escalating to a point where statutory intervention is needed. This includes preventing admission into care, helping troubled families, and providing on-going support when children are no longer subject to child protection plans or return home.
- Implementation of a Strengthening Families model of Child protection Conferences
- Work has started on the development of a new single assessment to replace the current initial and core assessments and this is due to be implemented in March 2014.
- The implementation of the Family Justice Review and reduced timescales for Family Courts is underway
- Revision of the Quality Assurance Framework which includes a revised audit process. Increased scrutiny and oversight of children subject to CP plans and children in care by Child Protection Chairs and Independent Reviewing officers through practice alerts which will inform future workforce development.

### **Work Planned for 2013/14**

- Making sure through Quality Assurance audits and performance management that our staff, are challenged and supported and learn the lessons from the review of serious cases and incidents.
- Assessments and interventions are of a high quality and plans are outcome focussed.
- All managers are confident and competent in the provision of good supervision, reflective decision making and service development.
- Ensure the views and experiences of children, young people and families inform practice and service development.

***Ann Graham***

**Assistant Director of Children's Service  
Barnet Children's Service**

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### **Organisation: Barnet Borough Police**

#### **Internal arrangements for governance regarding safeguarding children at risk:**

- The Metropolitan Police Service (MPS) has a specific policy and standard operating procedure for Safeguarding Children; awareness of which is delivered, through training, to all operational staff.
- We have centrally managed, dedicated Child Abuse Investigation Teams (CAIT) based at Borough level, with specialist knowledge and skills to investigate child abuse cases.
- Barnet Police has a Detective Chief Inspector lead for Public Protection matters, which incorporates Safeguarding. Along with a dedicated Detective Sergeant with responsibilities to provide a link between local police staff and the central CAIT unit, part of the role includes championing Safeguarding matters and learning.
- Existence of a Police Community Safety Unit (CSU) which is dedicated to the investigation of all hate, domestic violence and ensuring that matters relating to safeguarding children are referred to appropriate bodies e.g. Child Abuse Investigation Command.
- All CSU staff undertake a specific two-week course to be able to understand and effectively investigate the above crimes



- Representation on the Children's Safeguarding Board through attendance of senior police leaders, from the local Borough and the CAIT (minimum Detective Superintendent and Detective Inspector level).
- Daily Management meetings, chaired by a member of the Senior Leadership Team, where risk and harm for all crime is assessed and appropriate resources allocated. All matters involving children at risk/victims/perpetrators of crime are listed and reviewed at the daily meeting at local Borough level and CAIT unit.

#### **Work undertaken and achievements in 2012/2013**

- Implemented Phase 1 of a Multi-Agency Safeguarding Hub (MASH), to ensure a more dynamic and holistic approach to safeguarding victims.
- Worked with partners to implement a co-located Integrated Offender Management Unit, allowing a more joined up and speedy response to offender's risks and needs.
- Supported the multi-agency homicide review processes, designed to capture learning and improve our ability to prevent serious crimes of violence.
- Delivered two mentoring programmes with Barnet Education Business partnership and Friern Barnet School Blue Skies project.
- Continued to support Youth Shield.
- Fully supported the Troubled Families project.
- Undertaken Junior Citizens scheme for year 6 pupils approaching transition.
- With Partners introduced a new multi-agency 'operational approach' to Gangs to reduce youth violence, reduce opportunities/desire to join gangs and offer alternatives to gang involvement/lifestyle.

#### **Work Planned for 2013/2014**

- Implement a new local policing model ('go live' date 24/06/13), with the aim of improving performance, public satisfaction, and enhancing capability, particularly in respect to crimes of violence and risk.
- Implement the final phase of MASH; whereby the multi-agency team will be completely co-located, to ensure timely risk assessment and action in relation to vulnerable children across the partnership.
- Continue to provide information, support and resources into the Troubled Families project, to concentrate partnership resources on those families with the most complex needs across all agencies.
- CAIT developing a plan to increase staff to allow greater focus on risk/harm caused by sexual exploitation of children.
- Continue with a strong safer schools team concentrating on support and identification of threat, harm and risk. Running a 2013 Junior Citizens scheme.
- Undertake further mentoring programmes where police staff support Year 11 students at local schools.
- Continue to develop the newly formed multi-agency gangs approach
- Work with Youth Shield and other youth groups to improve confidence in police, including establishing which areas in the Borough young people do not feel safe and why.

**Mark Strugnell**  
**Detective Superintendent,**  
**Neighbourhoods and Crime**  
**Metropolitan Police Service**  
**(Barnet Borough)**



## Organisation: Barnet Youth Offending Service

### Internal arrangements for governance regarding safeguarding children at risk:

- The Youth Offending Service have a statutory responsibility to have regard for the welfare of children and young people in the Criminal Justice System; Safeguarding is therefore threaded through all areas of practice.
- Barnet YOS forms part of the Children's Service organisational structure. All YOS staff are required to update their Safeguarding training on a periodic basis which they access through the Barnet internal multi-agency Safeguarding programme.
- The YOS Management Board provides strategic oversight and direction, and coordinates the provision of youth justice services by the YOT and partner organisations, of which Social Care is a key partner.
- The YOS complies with safer recruitment policies and processes and all staff, including volunteers are CRB checked and these are periodically renewed. There are two GSCC registered, qualified Social Workers on the YOS staff team, one of whom is an Operational Team Manager holding delegated responsibility as the Safeguarding lead and the other is a Senior caseworker. The staff base also includes a designated Nurse, a Clinical Psychologist and there is a strong partnership with Drugs Counsellors and Psychiatrists through Barnet Young People's Drug and Alcohol Service.
- The Youth Justice Board assessment framework requires the Youth Offending Service to undertake assessments of vulnerability for all young people who receive YOS service. Vulnerability Management Plans are drawn up to identify how needs will be addressed. These assessments and plans are regularly reviewed.
- A corporate target for the YOS is to reduce the number of children and young people remanded or sentenced to custody, with resources dedicated to creating robust bail support programmes and community sentences.
- The Legal Aid, Sentencing and Punishment of Offenders Act 2012, received royal assent in May 2012 and became effective in the courts from December 2012. This has brought about some key significant sentencing changes which have an impact on the YOS' way of working, including the implementation of new Out of Court Disposals in April 2013 which removed the automatic escalation through the Youth Justice System. The Act has also for the first time, devolved its remand budget to each Local Authority and each young person remanded into custody is now considered a "Looked After Child"; potentially eligible for a leaving care service. Barnet Children's Service has created a multi-agency task group to ensure that the Local Authority has a shared understanding of the implications of this legislation. This group is responsible for identifying and implementing targeted approaches to minimise remand episodes and creating protocols around shared responsibilities and roles.
- As of April 2013, the Youth Justice Board has introduced a new set of National Standards that are less prescriptive and provide the YOS with the opportunity to implement a more flexible approach which promotes more direct, targeted work with young people. The emphasis is also on professional judgement and accountability for risk led decisions.
- The HMIP Inspection regime has been redesigned and the YOS are expected to undergo a multi-agency Full Joint Inspection between 2013/14. There is a significant focus on the experience of service users of agency involvement and outcomes for young people.
- The YOS are represented on the Children's Safeguarding Board and relevant sub-groups, the Children's Leadership Team and Safer Communities Partnership Board.
- Monthly multi-agency High Risk and Deter Panel meetings, at which Social Care is represented, address the needs of young people known to the YOS who are assessed as presenting a high risk of vulnerability. Vulnerability Management Plans are discussed and agreed with appropriate resources allocated.

- Assessments of victims of crime are conducted by the YOS Restorative Justice Co-ordinator. These victims are then supported and encouraged to engage with restorative interventions designed to repair the harm that has been caused by their offender.

### **Work undertaken and achievements in 2012/2013**

- Significant progress has been made in relation to work identified in our HMIP Inspection Improvement Plan 2011/12 and key practice improvements are highlighted below:
- All YOS staff have undertaken refresher Safeguarding training relevant to their needs and role/responsibilities.
- Barnet YOS has been a key member of the sector led improvement project which comprises of 16 London YOS' and was brought together in order to develop an improved way of assessing and planning interventions. This has resulted in the new, streamlined Integrated Action Plan document which Barnet has implemented in full since December 2012.
- This initiative, together with the new National Standards for Youth Justice 2013, will allow the YOS to focus on delivering high quality interventions to young people in order to effectively reduce the involvement of children and young people in crime and anti-social behaviour; a strategic priority for 2013-16.
- There is a greater focus on more creative ways of working with and engaging young people and families and a Home Visits policy was re-launched in 2012; this ensures that young people are regularly visited in their homes, in the presence of a parent/guardian to facilitate an improved assessment of living arrangements and family circumstances.
- Barnet YOS has worked hard with the voluntary sector to increase and improve reparation projects throughout the Borough; all reparation staff are trained in Safeguarding and supported via consistent supervision. All new Referral Order volunteers have been trained in restorative approaches and the aim is to incorporate this way of working in future panels.
- Through the continued successful partnership with Barnet Police and Targeted Youth Support, we have successfully reduced the number of First Time Entrants to the Criminal Justice System by 21.9% in the last year through the use of a Triage model. This is an ambitious reduction rate to maintain, but the YOS is committed to continual reduction.
- There have been nominal reductions in the number of custodial sentences imposed in the last year and reoffending rate, which is in line with the national picture.
- The YOS have established links with partners to implement a co-located Integrated Offender Management Unit, allowing a more joined up and speedy response to offender's risks and needs.
- We have worked closely with Social Care colleagues to develop the MASH (multi-agency safeguarding hub) and have committed resources to the hub once this is implemented. All young people in Court will undergo a MASH screening process.
- A Family Support Practitioner from Troubled Families is now seconded to the YOS. This has helped to consolidate our partnership with Troubled Families joint agendas address and promote the welfare of children and young people through a systemic approach.
- YOS practitioners continue to contribute to Child Protection Plans through attendance at strategy meetings, Child Protection case conferences and other relevant multi-agency meetings. They also share Vulnerability Management Plans with Social Workers to ensure plans are joined up.
- YOS practitioners continue to work in close partnership with Social Care, Young People's Drug and Alcohol Service, CAMHS and Housing to ensure that targeted work is completed to safeguard young people and this work forms part of their Court Orders.
- Restorative Justice interventions with young victims of crime is a developing area of practice; the RJ co-ordinator has overseen successful RJ conferences resulting in verbal and written apologies to victims and victim information is now frequently represented at Initial Panel Meetings.

### **Work Planned for 2013/2014**

- Our HMIP Inspection Improvement Plan review 2013-14 includes targets to revise our Quality Assurance process to make it shorter, more focused and facilitate professional accountability and to also include theme based audits on safeguarding practice; to produce timely and good quality assessments of vulnerability and have plans in place within National Standards which are specific about what will be done to safeguard the young person and make them less likely to reoffend and minimise the risk of them causing harm to others.
- We have set a team plan target to reduce the use of custody by 5% in 2013-14 and in order to achieve this, we will offer the Court robust alternative community sentences. This work will entail more creative use of our Intensive Supervision and Surveillance Programme and Bail Supervision and Support packages, working with the Remand Steering Group to develop the use of Remand Fostering placements and more robust RILAA (Remands into Local Authority Care) packages.
- In order to reduce the number of young people identified in the gang matrix, we will develop a joined up and co-ordinated approach to serious youth violence, including a joint Local Authority action plan and increase intervention input from Police and TYS.
- In order to further enhance our Education interventions with young people, we will develop the use of accredited programmes to facilitate progression with literacy and numeracy skills and with speech, language and communication difficulties to assist young people to achieve their potential.
- As part of support offered through the High Risk and Deter Panel, YOS Police Officers will undertake home visits for young people leaving custody, or who are deemed to be high risk of vulnerability or harm to others. Closer liaison and information sharing will be developed with Parenting workers, the intensive family focus team and social care managers to ensure that existing home visiting provision is captured in YOS case recording and contributing to assessments.
- Partnership working will be strengthened via the High Risk and Deter Panel, IOM, PPO, MAPPA and Gang Strategy group and this will facilitate improved intelligence sharing with the Police and other agencies.
- The Barnet Restorative Justice Co-ordinator is working towards developing the service Barnet offers to victims and in expanding the use of Restorative Justice between young people and their victims. We are aiming to contact 100% of victims and engage at least 20% in Restorative Justice interventions.
- TYS staff will be trained in Restorative Justice in order to address the needs of victims in intervention delivery for Out of Court Disposals.
- We will focus on quality, accurate assessments, targeted planning of interventions, the delivery of which, will meet, where possible, the learning style of the young person.
- Feedback from young people and parents to be collated and used to inform service improvements, facilitate accurate targeting and allocation of resources.
- Our team training plan for 2013-14 aims to enhance practitioner skills in engaging young people and families and affecting positive, sustainable changes. Mandatory courses for all staff due to take place include Speech, Language and Communication Needs, Working with Families using a Systemic Approach and Cognitive Behavioural Therapy.

***Meeta Mahtani***

**Operational Team Manager**

**Barnet Youth Offending Service**



## Organisation: Central London Community Healthcare (CLCH)

### Internal arrangements for governance regarding safeguarding children:

### Summary - CLCH Key achievements:

1. **Development of a CLCH Safeguarding Adults Team:** CLCH has a commitment to link adults and children services to ensure transitions are managed and risk assessed. The development of a CLCH Safeguarding Adults team which works closely with the CLCH Safeguarding Children's teams and CLCH Looked after Children teams supports the identification and assessment of issues related to the transition from children to adult services and also offers support and advice in cases where the parent is an adult at risk. This ensures CLCH health professionals in children and adults services are aware and contribute to child in need and child protection plans.
2. **CLCH has a workforce that is trained and supported by robust safeguarding supervision.** Safeguarding supervision in CLCH has been extended across allied health professionals and walk-in centres (quarterly reporting of compliance) and audited annually regarding compliance to CLCH policy and supervisee experience. Compliance with safeguarding children training at levels 1 / 2 / 3 is published in the CLCH Safeguarding Declaration - CLCH external website. CLCH Declaration updated April 2013
3. **CLCH has a shared record and common understanding of risk and need:** CLCH in 2013 has implemented a version of Rio (electronic records) which is shared across the CLCH boroughs and links up children services. There is a robust system on flagging - placing an alert on records - where there are known vulnerabilities such as disability / Child in need plan / CP plan / domestic abuse incident. There is a common understanding of risk and vulnerability across CLCH children services with children and families assessed at a level of need 1 - 4 (CLCH Threshold of Need Procedure). This is recorded on Ri0 and reported on in CLCH quarterly reports.
4. **CLCH robust incident reporting:** all referrals to social care / police are recorded on CLCH internal incident report system DATIX. This would include all child deaths. This system assesses risk including action planning and is escalated to Board level. Deaths are reported to NHS England (London) and investigated as serious incidents (Si) parallel to the CDOP processes.
5. **CLCH contributes and participates in child protection processes.** CLCH achieved a high level of compliance with regard to attendance to child protection case conferences ( reported on quarterly)
6. **CLCH HUB** – CLCH has dedicated safeguarding pages on the CLCH intranet – HUB so promoting ease of access to policies, procedures, training, updates and all matters relating to safeguarding.
7. **CLCH achieved 100% attendance at MARAC.** CLCH participates and contributes to the safety planning of high risk domestic abuse cases – this includes the sharing of information and 'flagging' of the Ri0 electronic record.
8. **CLCH has in place a Named Doctor** - interim arrangement. This was an action from the 2012 OFSTED inspection.

### CLCH safeguarding priorities 2012/13

- **CLCH FGM** - CLCH had developed and delivered in house training to CLCH staff on FGM in 2012/ 2013 with additional sessions planned in 2013/ 14.
- **Response to national issues** - CLCH Safeguarding has considered the issues raised by the 'Savile Allegations' and reported on these to the CLCH Board.

### Key multi-agency safeguarding lessons from 2012/13

1. **Management of the CLCH electronic record** - ensuring all family members are linked and information shared.

2. **Escalation of concerns / professional disagreement** - CLCH Safeguarding Procedure has been highlighted so that staff has greater clarity as to the process of the raising of concerns and professional disagreement within and external to CLCH.
3. **Management of allegations against staff** - CLCH Safeguarding Procedure has been highlighted so that staff has greater clarity as to the process of managing an allegation against a member of staff within CLCH and external in relation to the role of the LADO.

## Monitoring and evaluation/quality assurance activity

1. Quarterly safeguarding adults and safeguarding children reports to CLCH Safeguarding Committee (SC). SC is chaired by Chief Nurse and Director of Governance Quality - with executive lead role at Board for safeguarding.
  2. Annual report to CLCH Board
  3. Annual Safeguarding declaration / statement on external website.
  4. Audit of CLCH safeguarding supervision records / online supervisee feedback audit / safeguarding 'flagging' audit.
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1. **CLCH Quality Account 2012/13.** CLCH has in place Patient Reported Experience Measures (PREMs) across services to ascertain the views of parents, young people and children. This is evidenced in the CLCH Quality Report.
  2. **Looked After Children** - implementation of an experience measure / feedback from looked after children. This has been adapted to ensure younger children 5- 10 years are able to give feedback as well as older children and young people.
  3. **Child Friendly complaints / compliments** project is being piloted in schools using an online web based feedback system.
  4. **Staff feedback:** Staff engaging in safeguarding supervision has completed an online audit of the supervision process and their experience of being supervised. The results / outcomes have been reported back to both teams delivering supervision and staff receiving supervision.

### CLCH Quarterly Safeguarding reports include:

- i. numbers of children at each threshold of need 1-4
- ii. numbers of children subject to plan and category
- iii. numbers of child in need plans
- iv. numbers of children with a disability subject to child protection plan.
- v. numbers of police notification received by Borough
- vi. numbers of referrals made to social care ( also DATIX – incident reporting mechanism)

## CLCH Partnerships

1. **Participation and understanding of the MASH.** CLCH has been actively involved in the development of the Barnet MASH. The Heath Representatives will be managed by the CLCH Safeguarding Team. CLCH staff have been made aware of the MASH – purpose and function through 1-1 supervision and staff updates at team meetings. CLCH Safeguarding professionals have been briefed at the 2013 CLCH Safeguarding Away Day. (April 2013).
2. **MARAC** – CLCH Safeguarding children and adult professionals attend the MARAC. CLCH records are 'flagged' to alert health professionals accessing the records that there is a high level concern relating to domestic abuse. The risks are known and shared across partner agencies.

## CLCH Priorities for the 2013/14

**Training** – CLCH staff to be trained in safeguarding to a level appropriate to their role and responsibility and receive additional training on specific topics / subject areas as they emerge.

1. **FGM** – CLCH will ensure that staff are aware of the issues of FGM and responsibilities – 4 training sessions planned for 2013/14.
2. **Domestic Abuse** - CLCH has in place a programme of Domestic Violence Awareness training (Level 3)
3. **Internet safety** – CLCH to participate in the LSCB work on internet safety.

**Supervision of CLCH staff** – CLCH to engage in supervision compliant with CLCH policy.

1. Reported in relation to compliance %
2. Reported in relation to supervisee experience

**Safer Workforce** – CLCH adheres to safer recruitment policies and procedures (NHS Employers)

1. Reported on in Safeguarding Declaration
2. CLCH Safeguarding Procedures and Whistleblowing Policy give staff clear guidance on reporting concerns at work.

**Engaging children and Young people** – CLCH will continue to develop systems to ascertain the views, opinions and feelings of families, children and young people relating to the delivery of CLCH services.

**Liz Royle**  
**Head of Safeguarding**

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### Organisation: NHS Barnet Clinical Commissioning Group CCG

#### Internal arrangements for governance regarding safeguarding children at risk:

On 1<sup>st</sup> April 2013 responsibility for children's safeguarding was handed over to Barnet Clinical Commissioning Group (CCG) from North Central Health commissioning cluster.

The CCG is currently responsible for the commissioning of services for children from both Acute and Community provision within Barnet i.e. Barnet Hospital services, Barnet, Enfield and Haringey Mental Health services, Royal Free Hospital services and CLCH.

Specialist services utilised by Barnet such as paediatric services at Great Ormond Street Hospital, tier 4 mental health services for Children and Young people and Primary care are now commissioned by NHS England (London), as are Primary Care Services.

NHS Barnet CCG has a General Practitioner who is the CCG board member for Quality and Risk who also chairs the CCG Quality and Risk Committee and in conjunction with the Director of Quality and Governance has responsibilities for Safeguarding across both adult and children's services.

The CCG seeks assurance from its commissioned providers that they have arrangements in place to safeguard children under Section 11 Children Act 2004. Quarterly reporting regarding safeguarding children assurance from commissioned providers was developed within the NCL structure and is on-going within the new commissioning framework with the support of the CSU. Information is routinely collected through CQRG clinical quality and Risk Group meetings with providers. These reports will be monitored through the CCG Quality and Risk Committee. Safeguarding compliance is also part of the quality contract schedule within the contract framework agreed within the National framework with providers.

Internally NHS Barnet host a Safeguarding Children's Advisory group (SCHAG) which is attended by both its NHS providers, including The London Ambulance service, General Practice Out of Hours Services and also some independent providers within the borough.

The SCHAG group has both a governance and also a professional advisory and support function, and the group reports directly to the Quality and Risk Committee, which in turn reports to the CCG main board and the Local Children's Safeguarding Board. The Terms of Reference, for the SCHAG and also the forward plan is agreed annually.

### **Key Outcomes and Achievements in 2012 /2013:**

In 2012/ 2013 health organisations in Barnet continued their role in ensuring that Barnet children were safeguarded both internally by ensuring that their arrangements were in line with CQC recommendations and also externally with their work with the Local Safeguarding Board.

Health services are represented and contribute to the multi-agency safeguarding agenda in Barnet.

Each health organisation provides a programme of safeguarding children training for their staff in addition to the multi-agency programme delivered by the local authority. This training is updated in line with findings from Serious Case Reviews/ SCIE reviews and other issues highlighted nationally.

Bespoke training was provided throughout 2012/ 2013 for Independent Health Contractors .This training was supported by colleagues in the Metropolitan Police and Barnet Social care as required. Since NHS England now commission primary care services the Designated Nurse for Barnet is a member of a work group to develop training for independent contractors to include General Practitioners, Dentists, Pharmacists and Optometrists.

Health agencies were actively involved in the Social Care Institute of Excellence reviews carried out in 2012/ 2013 and was represented in both the Review teams and the case teams and are in the process of ensuring that themes learned are disseminated to all staff.

The appointment of Director of Quality and Governance to the Barnet CCG Board has been made, and the post holder will represent the CCG at the Barnet LSCB executive board.

Resources for the Designated Doctor Safeguarding Children within Barnet were increased to enable the incumbent to engage more proactively with the safeguarding economy and become more involved in integrated work with other agencies. Monitoring of resources required to fulfil the role within the new commissioning framework is ongoing, particularly with regard to the proposal being made for NHS(London) to delegate responsibilities to the CCG Designated Professionals for Safeguarding Children and also with respect to recent Royal College of Paediatrics and Child Health advice for CCGS.

The CQC/Ofsted inspection of Safeguarding and Looked after Children Barnet in January 2012 resulted in an outcome of “good” for health across the board. The resulting action plan identified a need for a Designated Doctor for Looked after Children to support the role of the Health Looked after Children’s team and the Primary Care practitioners currently providing Looked after Children Medical Assessment. Health has agreed provision of a full time Specialist health visitor to be part of the MASH process with Barnet.

Improvement of training statistics for Royal National Orthopaedic Hospital was achieved following regular support and supervision for its Named Nurse for Safeguarding Children from the Designated nurse for Safeguarding Children NHS Barnet CCG.

#### **Work Planned for 2012/2013:**

- Designated professionals will continue to support the CCG in their Safeguarding commissioning role.
- Role of Lead CCG GP for Safeguarding to be developed and supported
- Continue to work with cluster Designated Professionals to develop the strategic work programme for safeguarding children across the former NCL area.
- Ensuring that Safeguarding Children remains high on Barnet CCG Quality agenda.
- Ensuring that the local focus and partnership working relationship remains excellent...
- Clarifying the ongoing framework for Independent contractor training. The Designated Nurse is part of a work group at NHS England to develop some consistency in safeguarding training for independent contractors.
- Develop the roles of named safeguarding professionals within provider organisations
- Embedding learning from 2 ongoing SCIE review across health agencies in Barnet. 2013/14.
- Continue to work with providers to ensure that the health representation on the Multi-Agency Safeguarding Hub (MASH) is functioning appropriately and to support information sharing as required.
- Review Health visitor Liaison services at BCFH
- Develop the CCG capacity to recognise and manage safeguarding through its governance processes
- Ensure safeguarding is incorporated into the OD plan for the CCG
- Ensure all transitions issues are identified and supported by clear risk management plans

***Vivienne Stimpson***  
**Director of Quality and Governance**  
**Barnet CCG**

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#### **Organisation: Barnet, Enfield and Haringey Mental Health Trust**

The Trust is a large NHS provider of integrated mental health and community health services. In Barnet this includes adult, child and adolescent mental health services and the Barnet Drugs Advisory Service.

The Executive Director of Nursing, Quality and Governance is the Trust’s Executive lead for Safeguarding. There is an Assistant Director of Safeguarding Children and a matrix of a lead nurse, a Nurse Consultant, four Named Doctors and a safeguarding children champion (usually the manager) in each clinical team to help provide the training, support and supervision to over 3000 staff.



### Key Outcomes and Achievements in 2012/2013:

There is a strong commitment to provide a wide range of preventative and responsive safeguarding children services throughout the Trust. The evidence from quality assurance activity indicates that this is being both achieved and evidenced across trust services. There has been a continued increase in the amount of safeguarding activity at a strategic, quality assurance and individual case level over the last three years.

Key Achievements
The development of the Trust's Domestic Violence and Abuse Protocol.
Active engagement in the strategic and operational Multi-Agency Safeguarding Hub (MASH) development in Haringey, Barnet and Enfield.
Joint quarterly meeting with Children's Services Social Care in each borough to encourage building of relationships and discuss arising interagency safeguarding issues at an early stage.
The publication of the multi-agency protocol "Safeguarding Children where there are concerns of Parental Mental Health" Fact sheet in March 2013. A training morning around the interface between Mental Health services and Social Care, when dealing with adults with mental health problems was held in Barnet and attended by 101 staff from children's services and mental health the Trust.
The level of attendance at level one and two safeguarding children mandatory training is above the 80% standard.
The Trust has contributed to multi-agency case reviews held under the provisions of statutory guidance. This includes three Domestic Homicide Reviews (Barnet, Enfield and Hertfordshire); three Serious Case Reviews (two in Haringey and one in Brent); three Social Care Institute of Excellence (SCIE) Reviews in Barnet and two multi-agency case reviews in Enfield.
The Trust's Forensic Services have been commissioned by Barnet LSCB to provide training and consultation to LSCB partner agencies in working with parents who have a personality disorder. These are now well established and feedback is very positive.
Increased the number of referrals to Children's Social Care in each borough (total 128) and increased the number of children that Trust staff are recorded as involved with safeguarding (total 744) from the previous year's. This helps to indicate an awareness of safeguarding issues amongst Trust staff.
Our work in providing specialist advice about the assessment and management of stalking cases nationally continues to develop.
Barnet CAMHS have developed a new protocol for emergency management of 16-17 year olds presenting at Barnet Hospital with mental health problems, which includes recommendation for joint assessments with Social Care.
Taken part in routine in-depth case audits with Enfield and Barnet LSCBs.
CAMHS-Social Care consultation workshops, clinic or advice sessions have been further developed and are held in Barnet and Haringey and Enfield.
Our Complex Care Teams offer systemic couple and family treatment when staff have concerns regarding child safeguarding or domestic violence and their intersection with parenting
The Trust's Forensic Services have been commissioned by Barnet LSCB to provide training and consultation to LSCB partner agencies in working with parents who have a personality disorder. These are now well established and feedback is very positive.
Completed action plans in respect of all the case reviews excepting the three Serious Case Reviews where the reviews themselves are not yet completed.

### **Work planned for 2013-2014:**

The Trust aims for 2013-14 support its commitment to safeguarding children and includes:

- Providing consistently high quality services to patients, delivered with kindness and compassion.
- Developing stronger collaborative partnerships.
- Developing our staff to work more effectively and flexibly, in line with patients' needs.

### **The Trust's safeguarding children and young people priorities include:**

The development of practice in responding effectively to Domestic Violence and Abuse.

Achieve at least 80% of eligible staff having attended appropriate level three safeguarding children training through continued improvement in attendance and recording of attendance at in-house training and Local Safeguarding Children Board Training.

The development of a child protection leaflet for children and young people.

The development of a leaflet for parents and carers to support them in accessing local resources to support parenting.

Ensuring that there is adequate specialist safeguarding resource within the Trust.

The Trust's safeguarding children work plan will guide the achievement of these priorities and is outlined in the Trust's Safeguarding Children and Young People Annual Report.

**Deborah Perriment**

**Assistant Director – Safeguarding Children  
BEH Mental Health Trust**

**Barnet, Enfield and Haringey**   
Mental Health NHS Trust

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### **Organisation: Royal Free London NHS Foundation Trust**

#### **Internal arrangements for governance regarding safeguarding children:**

The Royal Free London NHS Foundation Trust has all the required safeguarding professionals in post: Named Nurse, Named Midwife and Named Doctor. We also have dedicated administrative support and a safeguarding children training facilitator.

Internal governance is provided to the Trust Board by the Director of Nursing who is the Board lead for Safeguarding. The Safeguarding Children committee meets two monthly. The Trusts Board lead for safeguarding and the designate nurses for Barnet and Camden are members. The safeguarding committee reports into the Clinical Governance and Risk Committee which is chaired by the Medical Director and reports to the Trust Board.

The Trust undertook an annual section 11 audit to ensure that arrangements are in place to safeguard children.

The requirement to ensure Safeguarding people who use services from abuse Outcome 7 NHS Provider Compliance Assessment is reviewed quarterly. The most recent CQC unannounced inspection in October 2012 judged the trust to be compliant with outcome 7.

In January 2013 we responded to the Director of Quality and Safety NCL following the Saville allegations that our safeguarding procedures, policies, structures, staffing and reporting are assured and robust.

The Trust Board receive a bi-annual safeguarding Children report. This report provides a summary of work and activity undertaken by the safeguarding Children's team including progress with annual work plan, progress with any action plans, details of any incidents, training and development updates, audit outcomes, case conference attendance, supervision and safeguarding activity data.

The Trust Board also seek assurance through external inspection.

The named professionals provide governance through internal multi-disciplinary meetings, through audit of the management of every child who is admitted and has a diagnosis of child maltreatment and through supervision.

The Royal Free London NHS Foundation Trust was inspected in February and December 2012 by the CQC as part of the joint inspection with Ofsted. On both occasions health services were rated as 'good'

The Director of nursing is a member of Barnet Safeguarding Children Board. The named nurse is a member of the Professional Advisory sub- group and the training facilitator is a member of the Training Sub- group

### **Key Outcomes and Achievements in 2012:**

The main focus of the safeguarding team's work has been concentrated on the Emergency Department to further embed the lessons learnt from two Serious Incidents. These SI's were reported externally. Both were fully investigated and both have had action plans which are now closed off.

As a result of this process we have:

- Developed new paediatric multidisciplinary documentation for the ED
- Strengthened participation at our weekly ED meeting to include Adult mental health and plastic surgery
- Reviewing all safeguarding cases at the weekly ED meeting to ensure safe processes and safe children
- Using the weekly ED meeting for teaching and learning
- Producing a weekly written summary of the ED meeting that is distributed to all senior staff that contains details of non-compliance, good practice and attendees - to enable feedback to relevant teams and to maintain training records
- Audit compliance with ED processes relating to safeguarding
- All new ED nursing staff as part of their orientation have specific tuition in ED safeguarding processes
- New teaching programme for ED Doctors provided by a member of the safeguarding team



## Other outcomes and Achievements 2012:

### Training and Development

We continue to review our mandatory & statutory training programme in line with guidance and recommendations. We continue to be active members of the training sub-groups for both Barnet & Camden safeguarding Children Board sub-group.

The figures at the end of May 2013 are level 1 100% level 2 72% level 3 90%. There is an action plan in place to address the shortfall in level 2.

Our level 3 programme consistently gets excellent evaluation. In the level 3 monthly updates we are able to be flexible in relation to both local and national drivers. We provided training that reflected lessons learnt from the SI's. We have also provided training and have further sessions planned to raise awareness of sexual exploitation following recent national guidance and as requested by NCL.

### Inspection

Camden was invited by Ofsted to join their Pilot Multi-Agency Inspection. This new Inspection process has been devised following the recommendations made in the Munro Review of Child Protection taking in account the effectiveness of the contributions of all local services, including health, education, police, probation and the justice system. The CQC was the partner agency to inspect the Health providers. The inspection, which took place in December 2012 concluded an all-round finding of 'good' across the partnership.

Some of the positive points raised in relation to the health providers were:

- Multi-agency work contributing to the safety of unborn children at risk of abuse is outstanding,
- A culture of learning, support and mutual challenge is evident in and across all child protection services,
- The protection of children is given high priority by health service leaders and senior managers with suitable arrangements in place to deliver core responsibilities.
- The high priority to safeguarding children is demonstrated through the named and designated child protection lead roles working across health agencies.

The key areas across Health providers which required improvement were

- Improve the process to notify primary care staff of children's attendance at the accident and emergency departments so that information is consistently shared in a timely way

**RFH-** *The acute Trusts and primary care have met with the designate staff to ensure this happens. The current position for RFH is that we share information consistently within agreed timescales*

- Ensure health practitioners routinely receive regular structured safeguarding supervision

**RFH-** *We have reviewed our supervision processes. Dr Ben Lloyd has a more formal structure for providing and recording supervision to consultant colleagues. Supervision data is recorded monthly*

- Ensure that key professionals attend children in need and child protection meetings as a matter of course and that written reports are routinely submitted by all relevant agencies

**RFH-** this is part of the monthly data collected. Currently we only record attendance and reports submitted to child protection case conferences. We are not able to robustly collect data for children in need

- Develop an overarching strategy across the partnership for tackling child sexual exploitation

**RFH-** *The Named professionals to contribute to this ongoing work. Sexual exploitation is included in both level 2 & 3 safeguarding training*

### **Think Family**

The previous Ofsted/ CQC inspection in February 2012 highlighted that all agencies needed to embed the “Think Family” message across all areas. Think family requires staff in all areas to consider the family and their wider family. The Staff in the Emergency department are highlighting concerns where adults attending for their own Health needs have children. This is reflected in the referral figures to social services and the cases discussed at the weekly ED safeguarding meeting. The “Think Family” approach is to be rolled out on two adult wards as a pilot.

### **Supervision**

Currently the Assurance metrics only contain details of the number of staff who have received formal recorded supervision. This does not reflect the great numbers of staff who receive ad-hoc supervision from the named professionals via the phone or face to face. Nor does it reflect the many staff who receive safeguarding children supervision by attending the weekly multi-disciplinary team meetings which are held in all the paediatric areas, the Emergency Department and in midwifery.

The named professionals are working with colleagues from other Acute Trusts and the designate professionals to look at how to capture this information in a way that would be useful. This information is necessary to provide assurance to the Board that staff are receiving supervision and also to enable the named professionals to target the supervision appropriately.

### **Work Planned for 2013/2014:**

#### **On-going work plan**

- Use the flagging system to support further audit programmes
- Develop mechanisms to capture data about formal, non-formal or ad hoc supervision that are meaningful to external scrutiny
- Implement systems that support audit of supervision and promote service improvement
- Improve governance of case conference attendance and reports
- Develop more robust process to ensure that all referrals are copied to the named nurse
- Respond to assurance requests from the CCG's

**Deborah Sanders**  
**Royal Free Hospital**

Positively **welcoming** Actively **respectful** Clearly **communicating** Visibly **reassuring**

Royal Free London   
NHS Foundation Trust

## Organisation: Lay Advisers Report

This is our 3<sup>rd</sup> year sitting on the Barnet Safeguarding Children Board as Lay Members.

This has been a year which has seen much development in many areas and we have found it a privilege to sit on the Board, to listen to the thoroughly professional, caring and detailed reports of the various groups and to partake in the ensuing discussions.

We would like in particular to draw attention to the SCIE review and the auditing developments, with the significant and sensitive procedures evolving for retrospectively individual cases. Other issues which have emerged as important to us as lay members this year are the discussions on sexual exploitation and trafficking, the consultation on internet safety for young people and their families with its recommendations, the fantastic contribution by youth shield members on 'hot spot safety' and of course their award from the London Safeguarding Children Board. And finally of course, the launch of the website with its accessibility, wealth of information for young people, parents and carers, professional and the extensive links for information for all.

There are also areas around which we have concerns as lay members and residents of the Borough of Barnet, in particular the effects that outsourcing aspects council work may have on the provisions for safeguarding, along with any cuts in services connected with children and their safety. We hope and trust that as lay members who are not involved in the day to day work of professionals across the agencies, we can reflect back our observations on practice as affected by these changes.

We are delighted to be part of a Board that has been highlighted as one which has good methods for involving lay members and would like to thank the Chair and Administrators for ensuring that we can continue to feel as involved and valued as part of the on-going work.

We look forward to the coming year and further opportunities to utilise our skills

***Naomi Burgess and Maxine Zeltser***  
**Lay Members to the Board**

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## Organisation: Community Barnet & Youth Shield

### Community Barnet

Community Barnet's Head of Children's Services sits on the Barnet Safeguarding Children's Board as a representative of the voluntary sector within the borough. We also, with the support of a safeguarding officer, attend relevant sub groups. This participation allows us not only to contribute to discussions but also to inform the board / the sector of the findings / rising trends etc. Allowing us make the relevant changes in training / support so that we are enabled to make a positive contribution to help keep the children of Barnet safer.

Being part of the board facilitates the free flow of information between statutory partners and the voluntary sector. It also allows for the VS to be represented at SCIE reviews and other pertinent overviews, where learning is a vital part in moving forward in the protection and safeguarding of all children within the borough.

Our aims are clear - to continue to support the work of the BSCB and represent the sector accordingly.

We also support/facilitate Youth Shield through our participation officer. We will continue to work with the YSB to allow it to grow and therefore offer a wider service / level of support to children and young people of the borough.

## Youth Shield

Youth Shield members have a standing invitation to the BSCB and report back regularly on their activity. At other times the Chair and Board Manager attend meetings with the young people.

The Barnet Safeguarding Children Board (BSCB) is committed to ensuring that the views and experiences of children and young people play a key part in driving the agenda of the Board. Much work has been done in laying the groundwork to enable young people in Barnet to play an active role in the work of the BSCB. In order to support this process, the BSCB commissioned CommUNITY Barnet to consult with children and young people on the safeguarding agenda.

## Key Outcomes and Achievements 2012/2013:

- Recruited new members to Youth Shield who represent: Barnet Young Carers and Siblings, LGBT young people's group: Rainbow Head, GRT community, local schools and young volunteers
- Represented young people on Barnet LINK, giving young people a voice on health issues
- Sat on interview panels
- Attended a full council meeting
- Completed an Allegations Leaflet for young people
- CAMHS subgroup contributed to new 3 year CAMHS plan
- Winners of London Safeguarding Children Awards 2012 from the London Safeguarding Children Board. Our work was recognised as an example of best practice.
- Provision of a Workshop available to all London Boroughs to spread our good practice which was well attended



## Healthy Relationships peer to peer training

### Context:

We did a survey for young people in Barnet (Barnet Young People's Safeguarding Consultation 2011). 60% said they do not receive enough relationships education in schools. 15.8% said they had been grabbed, pushed or shoved by a boy or girl they were going out with and 69.5% thought that domestic violence exists in teenage relationships.

16-24 year olds are most likely to experience abuse from someone they know and every week 2 women are being killed by a partner or ex-partner here in the UK.

- Piloted the Healthy Teenage Relationships Training: a project for young people to become peer trainers and deliver sessions in schools and youth settings to 14 year olds.
- Delivered healthy relationships training at youth clubs, young people at the Barnet Youth Crime Conference and to adults as part of Safeguarding Month at NLBP
- Developed an in depth proposal to extend the healthy relationships project to reach a wider number of young people in schools and to train up 30 peer trainers a year.

### Feedback from the Healthy Relationships Training:

*"The best part of the training was the play we read out showing the beginning of an unhealthy relationship"*

*"I liked that the trainers are young because they can communicate with us on the same level"*

*"I thought it was good the trainers were young people because it was comfortable to speak to them about this topic."*

### Key Outcomes and Achievements 2013/2014:

- Created a survey for young people around their experiences and attitudes towards the Police, Youth Services and Social Care. Survey ready to launch summer 2013 (this will include going to youth events in Barnet to target young people).
- Taken part in the BSCB Review Day
- Continued healthy relationships training
- The approval by the BSCB of the Youth Shield Business Development Proposal to provide substantial funding to Youth Shield

### Youth Shield

#### Youth Members of the Board



## Organisation: Barnet Youth and Community Service

### Internal arrangements for governance regarding safeguarding children at risk

- Youth & Community Service deliver/operate all safeguarding processes within the Children's Service guidance and policy
- All Youth Support Service staff are recruited with an enhanced CRB and undergo a Warner Interview

- Members of the Management Team are represented on the Children's Safeguarding Board, Professional Advisory Sub Group, Raising Educational Achievements (REA) for Looked After Children, Inclusion and Tracking Transition group, Multi-Agency group (MAG) ,Pupil Placement Panel and the MASH
- All staff are required to attend Safeguarding training within 3 months of being employed and are responsible for updating their training at required periods
- Quarterly Health & Safety meetings include Safeguarding with details of accidents and incidents
- Head of Service attends special review child protection case conferences as required

#### **Work undertaken and achievements in 2012/2013**

- Supporting delivery of the Junior Citizens Scheme – attendance at workshops and funding
- Contributed to the CAF Practitioners forum and CAF steering Group
- Delivery of Positive Activities (to 1,921 young people) to targeted areas and groups of vulnerable young people during school holidays and evenings and work programmes for NEET young people
- Development of counselling provision at 2 drop-in sites
- Delivered Evolve training to all staff for risk assessment inputting
- Implementation of Court Assessment meetings in relation to attendance
- Delivery of targeted work on a casework basis
- Targeted Youth Support early intervention multi-agency approach
- Meetings held with Practitioners working with young people in Barnet from the statutory, voluntary and private sectors. The meetings during 2011-12 included focus on Safeguarding, Safer Places for young people and gangs. Each meeting was attended by between 70 to 90 Practitioners with additional communications going out to over 700 Practitioners
- Further development of the Barnet Youth Board which is the youth council for the Borough of Barnet. It represents 13-19 year old young people across Barnet secondary schools, colleges and many community groups. It aims to give young people a voice and allow them to take their views to decision makers. As well as schools (including PRU's), there are members representing children in care, young carers, faith groups, Youth Shield, BLAB (Barnet Libraries advisory board) and disabled young people.

#### **Work Planned for 2013/2014**

- Continued targeted delivery of Positive Activities to targeted areas and groups of vulnerable young people during school holidays and evenings and work programmes for NEET young people
- Training to all providers in Child Protection awareness
- Training to all providers in Risk Assessments
- Partnership in the Junior Citizens 2012
- Targeted 'gangs' work through courses e.g. boxing and mechanics.
- Alternative education provision packages for non-attendees and young people at risk of exclusion
- Regular meetings with Practitioners which will include updates/information on safeguarding developments
- Continued delivery of targeted work on a casework basis.
- Implementation of 'Detached' and 'Outreach' work.
- Development of UKYP and the youth voice through the Participation strategy group in line with the 'United Nations Convention on the Rights of the Child.'
- Embed Counselling Provision for young people
- Support and inform the Young Carers agenda
- Develop and deliver Sexual Health and information programmes to individuals and groups. This includes information on 'staying safe'.



- Identification of positive interventions to prevent and divert young people from low level offending through the 'Out of Court disposals' route.
- Partnership work with the CIC team, delivering group work to the young people in foster care and their carers.
- Collaboration with the IFF team in relation to co working cases particularly in relation to School Attendance issues.

**Karen Ali**

**Operational Manager**

**Youth & Community Service**

## **Organisation: London Fire Brigade**

### **Internal arrangements for governance regarding safeguarding children:**

- London Fire Brigade (LFB) has a policy specifically for Safeguarding Children which is known by all fire officers.
- If an officer suspects there may be a safeguarding issue, details are forwarded to the duty Assistant Commissioner who will decide whether to make a referral to the Local Authority or not.

### **Key Outcomes and achievements in 2011/2012:**

- LFB has started a new partnership arrangement with Barnet's Neighbourhood watch schemes and the MPS to identify at risk people to ensure that home fire safety visits are targeted at the individuals who most need them.
- The initiative commenced last year to identify premises in the borough that have had more than one fire in the home over the past two years has now been reinforced and is being promoted right across the North West area of London. As these premises are identified, LFB staff ensure that a Home Fire Safety Visit has been provided and that all appropriate measures have been considered to prevent further fires occurring. This includes liaison with other agencies including Barnet Social Services.
- LFB is actively campaigning to promote domestic sprinklers and fire suppression systems. We continue to work closely with Barnet Homes and other housing providers to look for an appropriate solution for our most at risk individuals.

### **Work Planned for 2012/2013:**

- Continued working with the Children's Safeguarding Board, seizing opportunities to make vulnerable people safer.
- Continued working with all identified partners, improving links when necessary to make vulnerable people safer.
- We will continue to promote the LFB's Juvenile Firesetters Intervention Scheme to partners.
- We will continue working with YOS, promoting the LFB's Local Intervention Fire Education programme.
- We will again be an active partner at Barnet's 4 week Junior Citizen event.
- We will continue to work with various youth groups, engaging with children to promote fire safety.
- We will have an Open Day at Finchley Fire Station on 1<sup>st</sup> September 2013, the day will primarily be for promoting fire safety to young people.
- LFB will carry out over 2600 Home Fire Safety Visits within Barnet during 2013/14, with at least 80% of these to vulnerable people or within areas that we have identified as being at higher risk of fire.
- Focus working with individuals at risk of fire due to rough sleeping /squatting/beds in sheds.

- Focus working with individuals at risk of fire due to hoarding tendencies.
- Develop closer links with Barnet mental health trust and voluntary mental health charities in the borough to identify high risk individuals.

**Steve Leader**  
**Borough Commander**  
**Barnet**




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## **Organisation: The Barnet Group**

### **Internal arrangements for governance regarding safeguarding children at risk:**

- The Barnet Group is a local authority trading company, owned by Barnet Council. We are the parent company to Barnet Homes, a social landlord which manages 15,000 council homes, and Your Choice Barnet, a social care organisation providing services to people with learning and physical disabilities
- The Barnet Group staff and contractors may come into contact with children in a number of ways and many people who use the service will themselves be parents, grandparents or related to children in some other way. Some of these adults may have difficulties that have an impact on their children, for example, alcohol or substance misuse or domestic violence, and it is important that staff are alert to potential risks of harm or other concerns about children.
- Barnet Homes have specific policy and procedures for safeguarding children. Awareness training is given to all staff and Barnet Homes complies with all safer recruitment processes. All mobile working staff are CRB checked and these are periodically renewed.
- Barnet Homes have a standing invitation to the BSCB and has a its own safeguarding group who meet monthly.

### **Key outcomes and achievements 2012/2013:**

- Safeguarding had been included the latest Barnet Group Business Plan to implement best practice safeguarding across the Group.
- The Barnet Group have implemented phase 1 of MASH and our representative for MASH is Afi Hossein.
- Our Domestic violence procedure was reviewed in 2013 and a referral must be made to Children's services/MASH where children are considered to be at harm.
- Representative from Barnet Homes will be on the newly formed Gangs Strategic Meeting Group.
- Our Internal Safeguarding group has developed and now has a senior manager from LBB's Children's Services as a member for partnership working and best practice sharing

### **Work Planned for 2013/2014**

- MASH awareness training for all staff.
- Review to take place of all safeguarding policies and procedure. Safeguarding triggers and monitoring to be incorporated into our new I.T. systems due to go live throughout 2013/14.



- Audit of safeguarding within Barnet Homes has/to take place? *Gladys I noticed on previous minutes this was mentioned but I do not know anything more*
- Continue to work with the Intensive Family Focus Team.
- Work with the Gangs Strategic Meeting Group.
- Continue to communication and promotion of safeguarding across the Group

**Helen Faith/Gladys Mhone**

Vice Lead/Lead persons for Children Safeguarding for the Barnet Group

## Appendix 4: Barnet Safeguarding Children Board Sub Groups

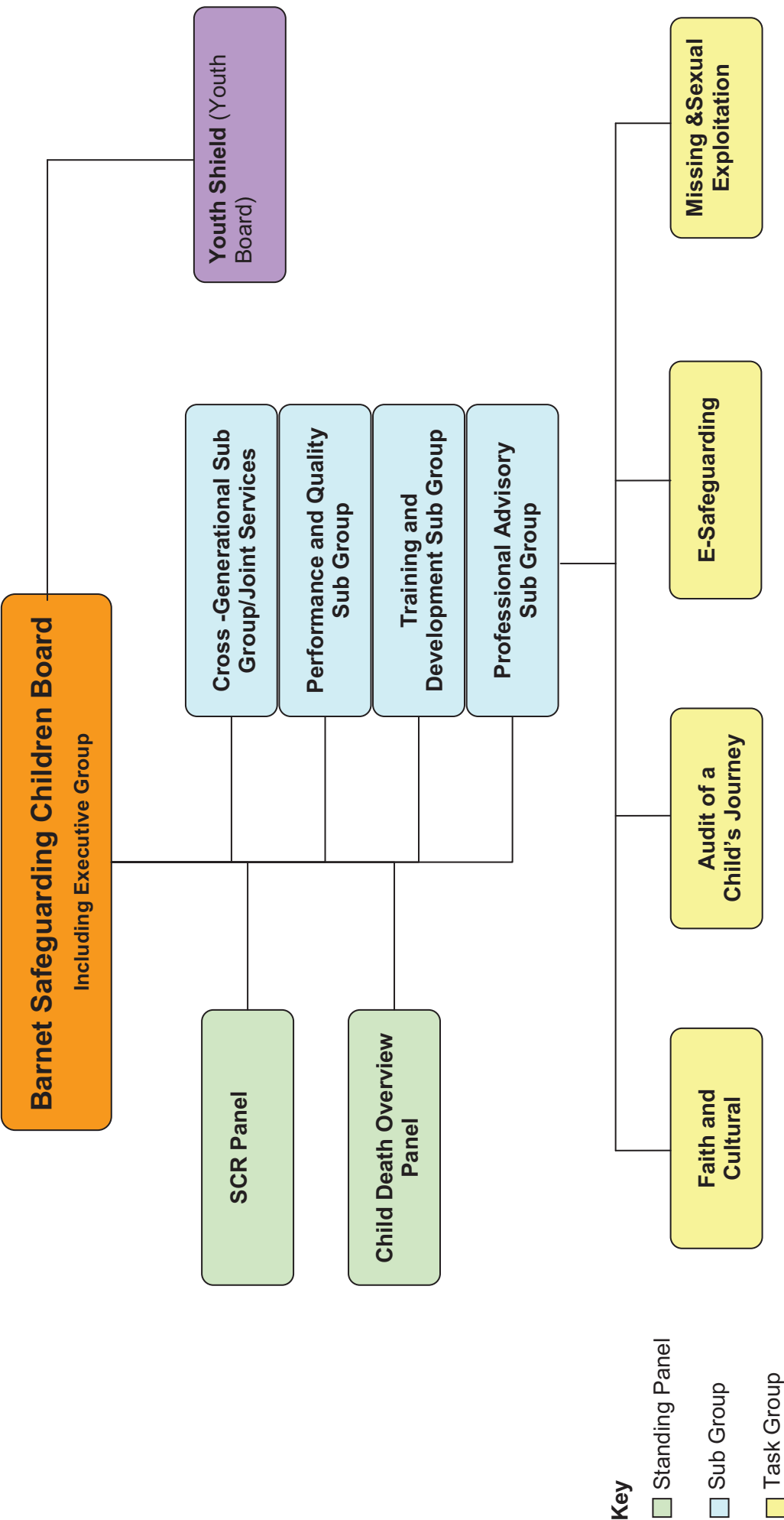
Chair's Name	Group	Email	Reporting Schedule
Tim Beach	Performance and Quality Sub-Group	<a href="mailto:tim.beach@barnet.gov.uk">tim.beach@barnet.gov.uk</a>	Quarterly
Teresa DeVito (interim)	Professional Advisory Group	<a href="mailto:Teresa.deVito@barnet.gov.uk">Teresa.deVito@barnet.gov.uk</a>	Quarterly
Delphine Garr	Training and Development Sub Group	<a href="mailto:Delphine.Garr@barnet.gov.uk">Delphine.Garr@barnet.gov.uk</a>	Quarterly
Laura Fabunmi	Child Death Overview Panel	<a href="mailto:Laura.Fabunmi@harrow.gov.uk">Laura.Fabunmi@harrow.gov.uk</a>	Quarterly
Ann Graham	Cross -generational Sub-Group	<a href="mailto:ann.graham@barnet.gov.uk">ann.graham@barnet.gov.uk</a>	Quarterly
Sally Trench	Serious Case Review Panel	<a href="mailto:swtrench@btinternet.com">swtrench@btinternet.com</a>	Quarterly
Adrian Usher	Faith and Cultural Sub-Group	<a href="mailto:Adrian.usher@met.police.uk">Adrian.usher@met.police.uk</a>	Quarterly

## Barnet Safeguarding Children Board Task and Finish Groups

Chair's Name	Task and Finish Group	Email
Sharon Harrison (interim)	E-Safeguarding	<a href="mailto:sharon.harrison.clt@gmail.com">sharon.harrison.clt@gmail.com</a>
Teresa DeVito (interim) & Mark Strugnell	Child Sexual Exploitation incorporating Missing	<a href="mailto:Teresa.deVito@barnet.gov.uk">Teresa.deVito@barnet.gov.uk</a> <a href="mailto:Mark.Strugnell@met.pnn.police.uk">Mark.Strugnell@met.pnn.police.uk</a>
Teresa DeVito (interim)	Audit of a Child's Journey	<a href="mailto:Teresa.deVito@barnet.gov.uk">Teresa.deVito@barnet.gov.uk</a>

Appendix 5:

Barnet Safeguarding Children Board Structure Chart



## Appendix 6: Barnet Safeguarding Children Board Budget and Expenditure

### Barnet Children's Safeguarding Board Budget Statement at 19/3/2013

	£	£	Balance Remaining/ Carried Forward
<b>Balance B/Fwd 2011/12</b>	35,520.00		
<b>Income / Contributions</b>			
London Borough of Barnet	97,840.00		
London SCB (Met Police)	5,000.00		
Probation	2,000.00		
CLCHT (Community Health)	12,500.00		
Chase Farm NHS Trust	12,500.00		
BEH MH Trust	12,500.00		
Royal Free Hospital Trust	12,500.00		
CAFCASS	550.00		
	<b>190,910.00</b>		
Grant Monies transferred (Munro/ Police Contribution )	<b>34,245.00</b>		
<b>Expenditure</b>			
Staffing Costs		78,956.00	
Independent Chair		24,400.00	
JKB Consulting		4,325.00	
Other Services		10,126.00	
Conferences		957.25	
Youth Shield		4,000.00	
Healthy Relationships (Youth Shield)		4,630.00	
Serious Case Review		2,360.00	
GMK Consulting (Case Review)		9,320.00	
Income written off from previous years (2008/09)		12,000.00	
		<b>151,074.25</b>	
<b>Commitments</b>			
Printing / Photocopying		1,729.00	
Catering		4,081.00	
Mobile phones		98.00	
Miscellaneous Expenses		668.75	
		<b>6,576.75</b>	
<b>Totals</b>	<b>225,155.00</b>	<b>157,651.00</b>	<b>(67,504.00)</b>