



**Haringey** Council

## **NOTICE OF MEETING**

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# **Children's Safeguarding Policy and Practice Advisory Committee**

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THURSDAY, 21ST MARCH, 2013 at 19:30 HRS - CIVIC CENTRE, HIGH ROAD, WOOD GREEN, LONDON N22 8LE.

**MEMBERS:** Councillors Adamou, Allison, Bull, Corrick, Scott and Stewart (Chair)

### **AGENDA**

#### **1. APOLOGIES FOR ABSENCE**

#### **2. URGENT BUSINESS**

The Chair will consider the admission of late items of urgent business. Late items will be considered under the agenda item they appear. New items will be dealt with at Items below 9&10.

#### **3. DECLARATIONS OF INTEREST**

A member with a disclosable pecuniary interest or a prejudicial interest in a matter who attends a meeting of the authority at which the matter is considered:

- (i) must disclose the interest at the start of the meeting or when the interest becomes apparent, and
- (ii) may not participate in any discussion or vote on the matter and must withdraw from the meeting room.

A member who discloses at a meeting a disclosable pecuniary interest which is not registered in the Register of Members' Interests or the subject of a pending notification must notify the Monitoring Officer of the interest within 28 days of the disclosure.

Disclosable pecuniary interests, personal interests and prejudicial interests are defined at Paragraphs 5-7 and Appendix A of the Members' Code of Conduct.

**4. MINUTES (PAGES 1 - 8)**

To consider the minutes of the meeting held on 28<sup>th</sup> January 2013.

**5. MATTERS ARISING (PAGES 9 - 10)**

To consider the Committee Work Plan.

**6. PERFORMANCE (PAGES 11 - 38)**

This report sets out performance data and trends for an agreed set of measures relating to: Children and Families - Contacts, referrals and assessments and Child Protection.

**7. MASH (MULTI AGENCY SAFEGUARDING HUB)PRESENTATION**

To consider a presentation on the operation of the MASH(Multi Agency Safeguarding Hub), one year after operation.

**This presentation has been withdrawn and verbal update will be provided by the Director of Children's services at the meeting.**

**8. WORK WITH FAMILIES WHO HAVE NO RECOURSE TO PUBLIC FUNDS (PAGES 39 - 58)**

The Committee will consider the support provided by the council to families who have no recourse to public funds.

**9. ANY OTHER BUSINESS**

To consider any new items of urgent business submitted at item 2.

**10. EXEMPT ITEMS OF URGENT BUSINESS**

To consider any exempt items of urgent business submitted at item 2.

**11. TO AGREE THE DATE OF THE NEXT MEETING**

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**MINUTES OF THE CHILDREN'S SAFEGUARDING POLICY AND PRACTICE ADVISORY COMMITTEE**

**MONDAY, 28 JANUARY 2013**

**Members:** James Stewart (Chair), Gina Adamou, Gideon Bull, Hilary Corrick, Nigel Scott

**In**

**Attendance:** Marion Wheeler, Libby Blake, Phil Di Leo, Vikki Monk, Ros Cooke, Shubhi Raymond, Chrissy Austin, Lisa Blundell.

<b>MINUTE NO.</b>	<b>SUBJECT/DECISION</b>	<b>ACTION BY</b>
CSPAPC110	<b>APOLOGIES</b> Apologies for absence were submitted from Cllr Allison and apologies for lateness noted for Cllr Adamou.	Clerk
CSPAPC111	<b>URGENT BUSINESS</b> There were no items of urgent business submitted.	
CSPAPC112	<b>DECLARATIONS OF INTEREST</b> There were no declarations of interest put forward.	
CSPAPC113	<b>MINUTES</b> The minutes of the meeting held on the 22 November were agreed as an accurate record of the meeting.	
CSPAPC114	<b>MATTERS ARISING</b> None	
CSPAPC115	<b>PRESENTATION FROM THE EARLY YEARS SERVICE ON THEIR SAFEGUARDING SUPPORT</b>  The Committee considered an overview of the provision for children's centres in Haringey. They noted that Childcare was available in 8 children's centres. The service was working on underdeveloped places and continuing work to find new places that were funded and provide a reasonable payment rate. This was to attract parents to take up these places. The Committee noted that, in order to meet government targets for 2014, the number of places will need to double in number. From September 2013 the criteria used for free school meals will replace existing criteria to allow a wider number of children to access places. With a wider eligibility for places, the Early Years' service did recognise the need to protect places for Children that are on "in need" plans or on protection plans.  The Committee asked about how the service ensured that vulnerable	

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children got the right places so they were supported and monitored appropriately. The Committee learnt that vulnerable children, as all other children, access integrated provision and they will receive a regular progress review. Alongside this, there will be two weekly standing meetings at the children's centres, to examine the specific needs of children that are on : children in need plans, protection plans or have obtained a place as a result of a CAF. Managers and staff will consider how the needs are addressed and monitor how they are managed.

The reason for looking at the role of children's centres in safeguarding vulnerable children was following a past Committee member's positive experience of the difference being made, in other boroughs, by children's centres ensuring vulnerable children were prioritised for a place. The Chair was advised that there was a good working relationship between First Response and Early Years service to ensure that referrals were passed onto children's centres. There was already a contact person for the screening team in each of the children's centres cluster. To expand further the focus on vulnerable children, the two services were discussing ensuring places were available for vulnerable children at the cluster level.

Alongside accessing children's centre places, parents were offered a wide range of development and skill programmes to attend whilst their child was at the centre. Enquiry was made about the take up of parents on the programmes and any experience there was of peer support from parents. The feedback received from children centres was positive and indicated that the parent programmes had been successful. As part of the review of children's centres the service were looking at expanding the sessions and considering the amount of outreach work provided. Good positive friendships were developed as part of parents accessing children's centres.

The Committee were informed that the Children's Centre's review will analyse the impact of the restructure completed in 2011 and if any improvements need to be made. There was a good relationship with the children's centres and the associated schools. The review will check that there has been good and appropriate expenditure given the lower budget being worked to than in previous years. Members noted it is crucial that the budget available is appropriately spent. The review will initially be considered by the Director for Children's services and the Cabinet Member for Children. The Committee registered their interest in considering the recommendations of the review, if there were implications for safeguarding.

LB

Members were assured that when Children's Centres put forward their concerns, they were listened too and they will work closely with the Early Year's services to improve services to vulnerable children. There are safeguarding forums run, in term time, with children's centres to raise issue and it was by having meetings that the service ensure practice across children's centres, in relation to vulnerable children, is consistent.

In considering the high numbers of children on children in need plans and on child protection plans, understanding was sought on whether this reflected

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that more children were moving into the borough or was there a particular group of parents increasing i.e. young mums that needed to be worked more closely with. Although the borough had one of the highest number of teenage mums, no significant increase had been seen in the last couple of years and the council did work closely with Health services on sexual health education and advice. Previously, when the Committee had looked at the statistics for the number of families moving to the borough with child protection plans, they had seen roughly an equal number move in as out of the borough. However, the borough had been chosen by government to implement the Housing benefit cap 6 months earlier than other boroughs in the country. So the Director for Children's service would be monitoring the impact of the benefit cap on family's circumstances.

It was clarified that Health workers work closely with children's centres and they do make contact with the Children's services about any children they are concerned about when making their regular home visits.

In terms of communicating with mothers, where English was not the first language, there were a range of community languages spoken by staff that worked in children's centres and in Early Years and they could be called upon to help with communications as well as interpreters that worked for the council. There were also outreach workers that spoke common community languages that worked from children centres that were able to visit mums where English was not the first language. Language help would be part of the issues looked at in the review of children's centres.

**CSPAPC116**

**CHILD PROTECTION VISITS COMPLETED BY THE DISABLED CHILDREN'S TEAM**

At the previous meeting the Committee had considered the findings of an audit into the quality of recordings of child protection visits which had covered all teams that were responsible for child protection visits. This had included the disabled children's team. The Committee had requested further information on the number of visits completed by the Disabled Children's team, the frequency of visits, and if the visit included the assessment of a sibling group. They further requested an update on the measures to be taken to improve the timescales for visiting families.

The report put forward, by the Head of the Disabilities Team, indicated that there were 11 children subject to child protection plans and ten of the cases were subject to fortnightly visits and one to weekly visits. The Committee had previously asked whether any were part of a sibling group and it was noted that there were seven children with disabilities and three of these children have siblings, totalling five children.

The Committee received information about the frequency of visits made over a 6 month period and an analysis of the child protection recording for January showed that this was appropriate.

Although the Disabilities Team were only responsible for a small number of children subject to child protection plans, assurance was given that all social

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workers in the team were fully aware of the importance of seeing children within timescales . Collectively, as a team, they made sure that there was cover for these visits if, for any reason, a social worker was unable to make a visit. All staff had been made aware that when visiting a sibling group there needed to be a separate case note for each child. A recent supervision meeting had highlighted the need to induct new or temporary members of staff working in the Disabled Children's team on completing the template for CP visits and this would be taken forward.

In response to Committee questions about managers ensuring visits were undertaken, it was noted that managers were able to view diaries of all their staff to ensure visits were being completed.

The Committee remarked on the small proportion of disabled children subject to CP plans in proportion to the number of children on plans. Members would receive a later presentation about the work to ensure that the Health service and partners were picking up on children that were known to social care and ensuring that their needs were assessed.

In terms of recording of visits, a wider question was put forward to the Director of Children's services about whether there was the right proportion of administrative staff in place to support social workers to ensure they were not spending valuable time on completing paper work instead of meeting with families. It would also be important for the Director of Children's service to point out to Members, when they are asked to make any budget reductions, any knock on effects in the reduction of staff so that they are clear on the merits and drawback to what they were approving. The Director would be making an assessment in the coming year about the proportion of administrative staff working in the service.

**CSPAPC117**

**SAFEGUARDING CHILDREN AND YOUNG PEOPLE WITH DISABILITIES**

The Committee had heard in September that the Disabled Children's Policy and Practice Review Group would examine children with special educational needs which are met at school action or School Action Plus. As the local authority did not hold this information, it was agreed to identify children and young people that are known to social care but not subject to Child Protection Plans. This group may have an additional need such as Speech and language therapy and are known to the First Response service.

Vikki Monk, the borough lead for therapies and specialist nursing in Haringey Whittington Health provided the Committee with a presentation of the key findings of the review.

The Committee were provided information on the therapy audit tool used in the analysis, the number of children chosen and understood that the audit had concerned the Health service records (RIO).

The file audit had concerned contact with the child, assessment, review, inter agency involvement, examined the decision making at meetings, therapy assessments and interventions and information sharing.



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	<p>The Committee were advised about areas of good practice seen and where improvements were needed. They learnt about how the language used in recording cases, sharing of information by therapist in the Health service was crucial in understanding whether issues were long running and needed more immediate attention and referral to safeguarding. Also, where there could be more proactive communication to quicken the pace of the decision making.</p> <p>Training was suggested on how therapists in the health service could describe risks as this was important in gaining an understanding of a wider problem.</p> <p>The Safeguarding Policy Review Group, a sub group of the LSCB consisting of 6 agencies, would conduct a specific case review by examining their files in the same environment and discussing any required learning points on the care provided to the child. They would be looking at the health case recordings, and assessments to choose one case which would be subject to this collective examination of their work. The Independent member suggested that this review could include the parent of the child. The results would be reported back to the LSCB (Local Children's Safeguarding Board).</p> <p>A Committee Member queried how easily health information could be passed from agency to agency, borough to borough, or region to region when a family moved given that the RIO system was not a commonly used data base and does not easily communicate with other systems. It was noted that, when a child moved to another borough, there was an active transfer of data and it was a requirement to go and visit the child. It was vital to ensure that any required context about the case was added to the file so that there was a good understanding of the child's health and safeguarding situation.</p> <p>The audit had demonstrated the willingness of the council and Health services to work together to ensure a child's needs are picked up in the assessment process and that there is good information on both the RIO and Framework I systems.</p> <p>Following the audit an action plan had been devised which would be monitored by LSCB and there would be focus on the areas such as making sure that therapists contact and speak with social workers about cases.</p>	VM/PL
<p><b>CSPAPC 118</b></p>	<p><b>DRAFT COUNCIL REPORT FROM THE COMMITTEE</b></p> <p>The Committee agreed to note the report and send any comments to Ayshe Simsek before Monday 04<sup>th</sup> February.</p>	All to note
<p><b>CSPAC119</b></p>	<p><b>NEW ITEMS OF URGENT BUSINESS</b></p> <p>No items of new business were put forward.</p>	
<p><b>CSPAPC120</b></p>	<p><b>EXCLUSION OF THE PRESS AND PUBLIC</b></p> <p><b>RESOLVED</b></p>	

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	<p>The press and public were excluded from the meeting for consideration of the following items as they contained exempt information as defined in section 100a of the local government act 1972(as amended by section 12A of the local government act 1985) paragraphs 1&amp;2 namely information relating to an individual and information likely to reveal the identity of an individual.</p>	
<p><b>CSPAPC121</b></p>	<p><b>AUDIT ON NEW REFERRALS</b></p> <p>The Independent member had examined a particular week in December 2012 where there had been a higher than average number of referrals. A sample of 25 cases had been audited using the Framework I system. The Independent Member explained to the Committee that she was withdrawing her comment on the “culture of close working” as this was included as a result of looking at the number of visits made. However, there was a section on the Framework I system which displayed this but was not accessed by the Independent Member at the time of the audit.</p> <p>Initial observations were as follows:</p> <ul style="list-style-type: none"> <li>• There seemed to be more resources to signpost children to services from the ages of 0-5 in comparison to resources available for 5-9 year olds. In response to this, it was expected that once the 54000 programme was embedded, there would be an increase in resources available through the Early Help strategy.</li> <li>• In terms of the source of referral, a high proportion came from health, and the Police. A good indicator, next year, on how the help strategy was progressing, was to see if there were increased referrals from other sources such as neighbours and community organisations.</li> </ul> <p>There was discussion about whether the service was treating contacts as referrals too often as in this sample of cases looked at there was a case for more referrals to be treated as contacts. To explore this further, there was a need to consider, when assessing contacts, if they are subject to a higher threshold when this was not needed. This could lead to a higher level of assessments when this was not needed. This was a complex area to investigate as you would need to take account of the thresholds that partners were following and consider the behaviour of the service which was understandably risk averse. In terms of holding risk this was mostly done by the First Response Team who had responsibility for finding and completing early information on a contact before passing this onto a social worker.</p> <p>There was a good level of recording seen on cases looked by the Independent member. It could be worthwhile for the Committee to gain a further understanding of how the screening team work. A report was due at the next meeting on the operation of the MASH, a year after establishment, and the Committee could discuss at this meeting the scope for an audit to test the work of the screening team and look further at the thresholds being</p>	<p>HC</p>

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	<p>applied.</p> <p>The Deputy Service Head for First Response provided some further context to the period in which the audit was undertaken. It was important to note that the rate of referrals for December 2012 was considerably lower than compared to December 2011.</p> <p>The Chair asked the Independent Member whether there were any circumstances seen where cases were allowed to 'drift'. The Committee were assured that all urgent cases were addressed in good time but the service could not be complacent on this issue. The Assistant Director advised that the service were continuing to look at the 'Front door' to the service as currently there were possibly too many cases through the social work pathway, which is a high threshold intervention and there were opportunities to offer help to families at an earlier stage which the Children's Service as a whole would be involved in making decisions alongside partner agencies.</p>	
<b>CSPAPC122</b>	<p><b>NUMBERS OF CHILD PROTECTION INVESTIGATIONS COMPLETED BY THE BOROUGH IN COMPARISON TO STATISTICAL NEIGHBOURING BOROUGH</b></p> <p>At the previous meeting the Committee had asked the number of section 47's (child protection investigations) completed in comparison to statistical neighbouring boroughs. This was now enclosed and showed that there were no real significant differences, between boroughs, and the number completed. The Committee queried why this information was exempt. It was explained that the data had been collated locally (by the council) from other local authority contacts as this data is not available from public performance reports. When providing this data, the other local authorities were not under the impression that the data would be published in an open report and therefore had not given their permission for the figures to be publically available. Therefore, this would make the information exempt, under paragraph 3, as the information is relating to the business affairs of another local authority. The Independent Member and Director for Children's service were not certain if this information was generally publicly available. It was agreed that the Head of Performance looks into this. The information could be made open, after the meeting, if it was publicly available.</p>	MG
<b>CSPAPC123</b>	<p><b>ANY OTHER BUSINESS</b></p> <p>None.</p>	

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Date of the meeting	Reports and background information	Officer / Member leading on the report
<b>21 March 2013 7.30pm CR2</b>	<ol style="list-style-type: none"> <li>1. Performance data for Safeguarding – standing item (Independent Member view and scrutiny of performance into Contacts, Referrals, Assessments and Child Protection has been important to committee understanding the data and deciding if there are any underlying safeguarding issues that need to be explored.)</li> <li>2. A report on the work with families who have no recourse to public funds,</li> <li>3. Report back on the operation of the MASH.</li> </ol>	<p>Margaret Gallagher</p> <p>Chrissy Austin</p> <p>Chrissy Austin</p>
<b>New date proposed 30 April 7.30pm CR2</b>	<ol style="list-style-type: none"> <li>1. Performance</li> <li>2. The Committee agreed to monitor the MOSAIC programme implementation in 2013 so that the required change process did not impact unduly on the performance of the safeguarding service and its social care of children and young people</li> <li>3. Report back on cases that were subject to planning where the parent has substance misuse issues. This was to be covered in an audit by LSCB and Adult services have since added three questions to audits. These are: <ul style="list-style-type: none"> <li>• Does X have contact with children or young people?</li> <li>• Are there any concerns related to the welfare of children or young people, for example substance misuse or disability issues including mental health?</li> <li>• Has contact been made with CYPS?</li> </ul> </li> </ol> <p>Updates from the LSCB audit, which will include the difference made by these three questions, are due to be considered by the LSCB on the 27<sup>th</sup> March as part of the wider report back on the progress audit.</p>	<p>Margaret Gallagher</p> <p>Marion Wheeler</p> <p>MW/Adult Services</p>

## Children's Safeguarding Policy and Practice Agenda Planning 2012/13

Date of the meeting	Reports and background information	Officer / Member leading on the report
	<p>Exploring the interface between Mental Health services and Safeguarding services in cases which are subject to child protection planning (TBC) Results from above audit will be considered before taking this additional audit forward.</p> <p><b>Ayshe to publish Agenda on 01 May 2013 Marion Wheeler to receive reports by 26<sup>th</sup> April 2013</b></p>	HC
<p><b>16 May 2013 7.30pm Council Chamber</b></p>	<p><b>Joint meeting with Corporate Parenting</b></p> <p>1.Update on MST Programme</p> <p><b>Agenda to be published on 09 May 2013</b></p> <p><b>Marion Wheeler to receive reports by 02 May 2013</b></p>	

Suggestions for committee members to get more of an understanding how different areas of safeguarding services work by visiting teams and watching them in action.

Looking at how lessons can be learnt from Serious Case Reviews in particular looking at "looking at lessons learnt" a key section from the SCR on baby Peter and how we can show that the lessons have been integrated into the work of the service (Item to be added)

Short analysis of re-referrals (agreed 17.09.2012) Hilary Corrick, to be added.



**Haringey** Council

<b>Report for:</b>	<b>Children's Safeguarding Policy and Practice Committee 18 March 2013</b>	<b>Item Number:</b>	
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<b>Title:</b>	<b>Performance Assessment – Year to January 2013</b>
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<b>Report Authorised by:</b>	<b>Marion Wheeler/ Eve Pelekanos</b>
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<b>Lead Officer:</b>	<b>Margaret Gallagher / Richard Hutton</b>
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<b>Ward(s) affected:</b> All	<b>Report for Key/Non Key Decision:</b> NA
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## 1. Introduction

This report sets out performance data and trends for an agreed set of measures relating to:

- Children and Families - Contacts, referrals and assessments and Child Protection

Appendix 1 provides further detail in the form of tables and graphs for each of the agreed measures, grouped by topic, showing monthly data, performance against target, long term trends and benchmarking where applicable. It also contains performance and service comments for each area to provide context.

## 2. Performance Highlights/ Key Messages

- The rate of **children in care** continues to decrease, 533 children on the last day of January or 93 per 10,000 population, which remains higher than the level in similar boroughs but a significant reduction on this point last year (rate 104).
- The number of **children subject to a child protection plan** increased by 61 since the end of March 2012 (345 in total) and the rate has increased and stands at 60 per 10,000 population compared to a rate of 40 for statistical neighbours.
- 8.3% of **child protection plans last 2 years or more** higher than the London position of 5.5%
- 98% of **child protection visits** completed to timescale
- There have been 10 **adoptions** in the year to January, on track to meet the target of 15, and 25 **special guardianship orders**.
- In the year to date, **children waited an average of 711 days from becoming looked after to being placed for adoption**. This is higher than the 639 day national threshold but an improvement over Haringey's three year average for 2009/12 (749).
- In the year to date, **children waited an average of 455 days from entering care to moving in with adoptive parents** (including foster parents who subsequently adopt), compared to 647 days in 2009/12.
- The proportion of **children placed in Haringey** is 26% and 74% are placed outside Haringey. 81% were placed within 20 miles of Haringey.
- 19 children were **missing from care** during the month of January, including 10 who were missing for more than 24 hours and 5 who remained missing at the end of the month including 3 whereabouts known.

### 2.1. Contacts, Referrals and Assessments and Child Protection

- The **number of contacts** received continued at the lower level seen since December at 464 in January. The yearend figure is projected to be close to last year's outturn (an annual projection of 6,755 contacts compared with 6,722 in 2011/12) but the number of contacts remain significantly lower than 2009/10 and 2010/11. 28% of contacts in the year to date proceeded to referral compared with 34.3% in 2011/12.
- An analysis of presenting need at point of contact in October and November 2012 compared with the same period in 2011 showed an increase in contacts in the following areas.

Presenting Need	Oct/ Nov 2011	Oct/Nov 2012	change
Domestic Violence	20%	22%	+2%
Housing	7.2%	8.3%	+1.1%
Neglect	6.3%	8.1%	+1.8%
Physical Abuse	6.4%	8.7%	+2.3%

- And a corresponding decrease in these areas:

Presenting Need	Oct/ Nov 2011	Oct/Nov 2012	change
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Need for Family Support	10.4%	1.9%	-8.5%
Universal Services	4%	0.6%	-3.4%
Child has a disability	3.75%	1%	-2.75%
Child Mental Health Issues	2%	0.8%	-1.2%

- **Referrals** have decreased steadily over recent years and are on track to do so again with the end of year number projected to be around 57% of that in 2009/10 and around 75% of referrals in 2011/12. Haringey's rate (per 10,000 population) of referrals is historically below that of statistical neighbours. In 2011/12 Haringey's annual rate of referrals was 436 per 10,000 population compared with 541 for our statistical neighbours. In Haringey the MASH process determines the nature of the intervention as at the contact stage it is identified whether no further action is required therefore contacts are only progressed to referral when the threshold criteria for statutory intervention has been met.
- Haringey's current proportion of **referrals going on to initial assessment** at 97% is high comparatively. The high conversion reflects the robust screening described above. The First Response Team is piloting the Single Assessment model (this does not delineate between Initial and Core assessments).
- There is a considerable amount of work around early help analysis underway which should enable us to evidence whether the reduction in contacts and referrals is as a result of us meeting need earlier either through CAFs or provision of universal services.

To this end one of the areas being examined, compared and analysed is presenting need at referral and at assessment. The Children's Safeguarding Performance Information Framework has provided a list of potential child and parent risk factors identified at assessment. The framework for Assessment of Children in Need and their Families sets out the principles that underpin all work with children in need and in particular the three domains of the conceptual framework: child's development needs; parenting capacity; family and environmental factors. Recording against these risk factors will commence from March 2013. The factors have been defined by the DFE and will become statutory reporting requirements from April 2013. A list of the factors at assessment is attached at Appendix 2.
- Haringey's rate of **re-referrals within 12 months** of the previous referral at 16% is in line with our statistical neighbours and at a similar level to that reported in 2011/12. In January this relates to 15 re-referrals out of 124 children.
- Performance on **initial assessments** carried out in 10 days declined to 73% in December, short of the 80% target and 73% in the year to date. Although performance in this area has improved overtime it remains below that of our statistical neighbours.
- The **distribution of working days taken to complete an initial assessment** for December shows that in addition to the 73% completed within 10 days, 13% were completed within 5 days of the 10 days expectation. Analysis of CIN published data showed that Haringey had the 3<sup>rd</sup> highest percentage of initial assessments completed in 21 days plus, 18% compared with a statistical

neighbour position of 9% and 10% in England. In January 12% of initial assessments were completed in 21 days plus. Haringey is likely to implement single assessment from April 2013. It will replace the Initial Assessment, CP Core and Core assessment but the approach to monitoring and reporting timescales locally is still to be agreed.

- There was also a decline in performance in January with 69% of **Core assessments** completed in timescale (35 working days), below the 85% target. Analysis of 2011/12 Children in Need published data found that Haringey had the 4<sup>th</sup> highest ranking in London for core assessments taking 61 days plus with 14% of cores taking more than 61 days to complete compared to a statistical neighbour average of 5% and 9% for England. In January 14% of cores closed took more than 61 days to complete.
- The rate of **children subject to a child protection plan** has increased over the last year at 60 per 10,000 population. This equates to 67 additional children on a plan than at this time last year (345 children in total) and remains considerably higher than comparator authorities. There has been a considerable increase in the number of children becoming subject to a plan this year (28 became subject to plan in January and 328 in the year to date, a net increase of 61 in the year to January). A linear projection suggests an increase to around 400 children becoming subject to a plan in 2012/13 and 330 ceasing which would result in a net increase of 70 children becoming subject to a plan compared with a net increase of just 2 in 2011/12. Some analysis around chairs of CP conferences and individual thresholds is being undertaken alongside some examination of cases before they come to conference by First Response and challenges around workloads where children may be taking longer to work through the system. The top two recorded presenting needs for children who became subject to a children protection plan were for domestic violence (141 children [75%]) and for drugs (60 children [43%]).
- The primary factors that are considered likely to contribute to the high numbers of children on a CP plan in Haringey are, thresholds for cases being taken to initial conference, thresholds once a CP plan has been made in relation to subsequently removing a child from a child protection plan service provision once a CP plan is in place impacting on duration of CP plan. A recent audit of CP cases highlighted all the above issues as being in need of attention, and feedback from the peer challenge also highlighted issues in respect of thresholds. In Quarter 3 87.6% (120 out of 137) of children who had an initial CP conference became subject to a CP plan.
- Audit of CP cases held within Safeguarding and Support is now complete – This audit identifies issues of thresholds and effectiveness of CP plans. Themes identified provide learning and possible direction for S and S social workers and CPAs. Safeguarding and Support management team is actively considering this audit information with a view to addressing the practice issues raised.
- Cases currently transfer from First Response to Safeguarding and Support following Initial Child Protection Conference (ICPC) – the timing of this transfer is variable – Audit clearly identifies that this transfer point/system is not effective. It

is planned that from April 1st that Safeguarding and Support attend all ICPCs and take case responsibility from that point. This should allow for CP plans to be progressed. HofS from First Response and Safeguarding and Support have met together and with the CPAs to ensure plans are moving towards this change becoming implemented on April 1st.

- In terms of **children becoming subject to a child protection plan** First Response Service and the CPA group have now begun to consider/audit all cases where the social work plan is to take a case to Initial Child Protection Conference (ICPC). Issues of threshold and consistency need more consideration but the auditing and introduction of management and CPA oversight at a crucial point in assessment prior to the case being taken to conference should help identify themes and issues and will allow re-consideration of support/early help that may, if provided, avoid the need for a Child Protection plan.
- 8.3% of **child protection plans last 2 years or more** (22 out of 265 children) in the year to January and slightly higher than statistical neighbours. Individual cases with child protection plans lasting longer than 14 months are routinely considered by senior managers in Safeguarding and Support and the child protection advisor. There have been a number of cases involving large sibling groups but further work is required to look at this alongside the number of children on plans and to gain more understanding of risk both around individual cases but also to identify possible themes in relation to children thought to need extended child protection planning. 4.6% or 15 out of 327 **children have become the subject of a Child Protection Plan for a second or subsequent time** this year which is lower than the 12.7% reported by our statistical neighbours in 2011/12. This may relate to children being on plans rather longer than in other boroughs.
- 96% of **child protection cases** were reviewed within timescales in the year to January. There were 9 children for whom reviews were out of timescale. In Haringey we apply a higher standard and performance would be closer to 100% if we consider that reviews do not have to be held after 3 months (as if following an ICPC) for children who had been placed on a Haringey CP plan following a transfer in CP conference. Some authorities might consider that those children who transfer in are already into the review cycle – and should therefore be reviewed after 6 months.
- 98% of **Child Protection visits** completed to timescale in the month of January, the highest performance level in the year and exceeding target for the 2<sup>nd</sup> month running. **Children in Need visits** improved slightly to 89% in January, which although below target is well above levels achieved in 2011/12.

### 3. Appendices

- **Appendix 1: Performance Analysis and Benchmarking** for:
  - Contact, Referrals & Assessments and Child Protection
  
- **Appendix 2: Parental and Child Factors at Assessment**

## Performance Analysis and Benchmarking - Contact, Referrals & Assessments and Child Protection

### Contents

#### Contacts, Referrals and Assessments

- Op504 The number of child contacts received
- Op410 The number of referrals to children's social care
- Op410a The rate of referrals to children's social care per 10,000 pop
- Op368 Percentage of referrals to children's social care going on to initial assessment
- Op383 Re-referrals within 12 months of the previous referral
- HY59 Percentage of initial assessments for children's social care carried out within 10 working days of referral
- Op60 Percentage of core assessments for children's social care that were carried out within 35 working days

#### Child Protection

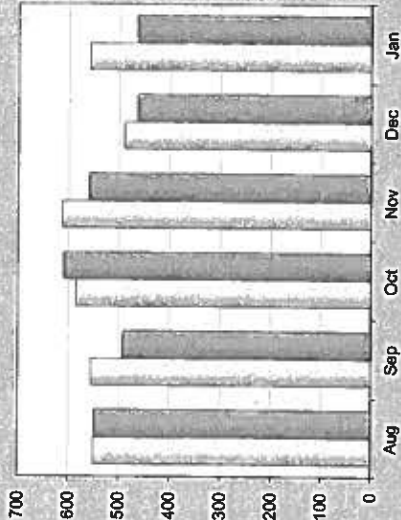
- Op388 Children subject to a child protection plan
- OP 411 Children Becoming Subject to a CP plan in the period
- OP 413 Children Ceasing Subject to a CP plan in the period
- Op421 Children moving to Haringey on a CP Plan
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- HY64 Child Protection Plans lasting 2 years or more
- Op 365 Percentage of children becoming the subject of Child Protection Plan for a second or subsequent time
- Op380 Child Protection Visits
- Op381 Children in Need Visits

Where available, benchmarking is provided for England, London and/or Haringey's Statistical Neighbours. Haringey's Statistical Neighbours group is defined by Ofsted based on socio-demographic information relating specifically to Children's Services and comprises Croydon, Greenwich, Hackney, Hammersmith and Fulham, Islington, Lambeth, Lewisham, Southwark, Waltham Forest and Wandsworth. The averages provided for benchmarking in this report are simple means.

Children and Families - Contact, Referrals and Assessments

Op504. The number of child contacts received

Recent trend (last 6 months)	Key	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-12	Traffic Light
Haringey		548	491	608	559	463	464	Data Only
Previous Year	Key	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	
Haringey (previous year)		550	555	585	612	489	558	



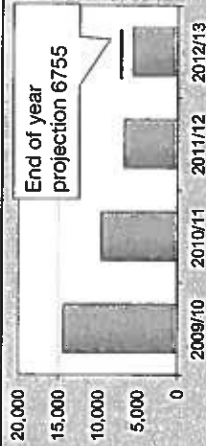
Performance Comment

December's low level continued into January, with the year end figure projected to be close to last years outturn.

Service Comment

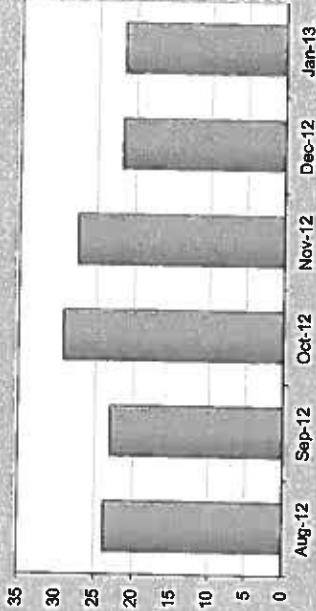
Contacts have reached a plateau over the last 2 months, we attribute this partly to the effectiveness of the MASH; partners are more aware of it's purpose and understand how it operates threshold decisions and so only refer what they know is likely to progress.

Long term trend (last 6 years)	Key	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	Traffic Light
Haringey		-	-	14,355	9,556	6,722	5,629	Data Only



Op410 The number of referrals to children's social care  
 OP410a The rate of referrals to children's social care per 10,000 pop

Recent trend (last 6 months)	Key	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Traffic Light
Haringey Number	137	133	168	158	125	124	22	Data Only
Haringey Rate	24	23	29	27	22	22	22	



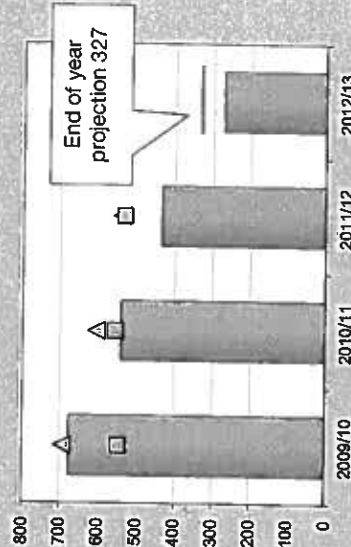
**Performance Comment**

- The January year to date total is 1,571 down from 1,927 last year.
- The number and rate of referrals has reduced steadily over recent years and is on track to do so again with the end of year number projected to be around 57% of that in 2009/10.

**Service Comment**

The MASH process enables partners to think together about content of referrals in terms of CIN thresholds and this enables there to be more proportionate decisions made about contacts. MASH enables the shared understanding of roles and responsibilities across agencies, therefore making sure that the right contacts progress to referrals.

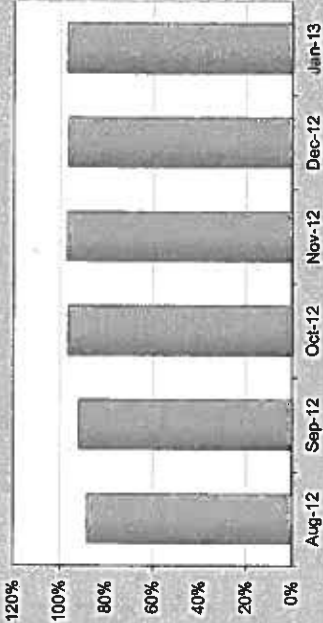
Long term trend (last 6 years)	Key	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	Traffic Light
Haringey Number		-	-	3324	2658	2509	1571	Data Only
Haringey Rate		-	-	677	541	436	273	
Statistical Neighbours Rate	Δ	723	647	694	607	541	-	
England Rate	□	490	497	548	557	534	-	



**Op368 Percentage of referrals to children's social care going on to initial assessment**

The calculation is based on the number of children who had initial assessments completed divided by the number of referrals received in the year to date.

Recent trend (last 6 months)	Key	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Traffic Light
Haringey		88%	92%	96%	97%	96%	97%	Data Only



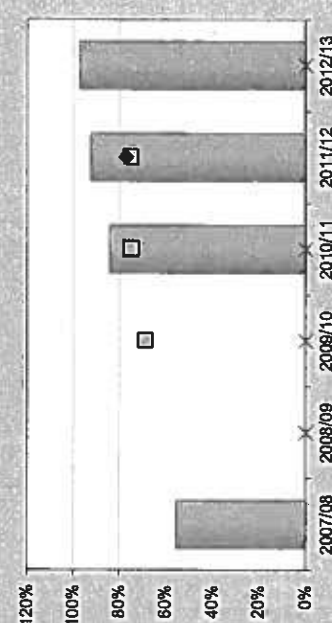
**Performance Comment**

This indicator has been restated to show the monthly year to date position in order to smooth the monthly fluctuations. The rate is higher than last year.

**Service Comment**

Rigorous screening enables the FR team to react quickly to need and complete a high proportion of IA's and then either close and or signpost accordingly. We think that with further development of the early help offer it is likely that some of these families needs could be met by services in the community i.e. local CC and or Family Action.

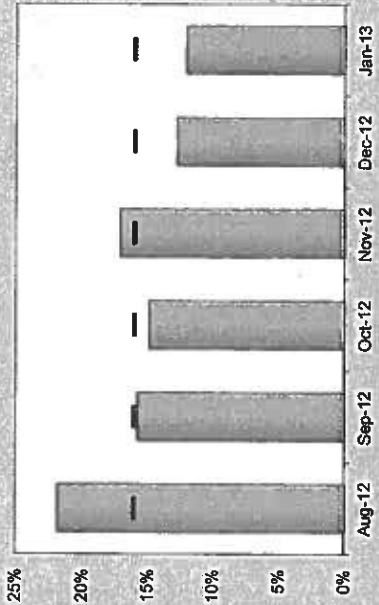
Long term trend (last 6 years)	Key	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	Traffic Light
Haringey		55%	-	-	84%	92%	97%	Data Only
Statistical Neighbours	△	-	-	-	-	-	-	
London	◆	-	-	-	-	77%	-	
England	□	-	-	69%	75%	75%	-	





Op383 Re-referrals within 12 months of the previous referral

Recent trend (last 6 months)	Key	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Traffic Light
Haringey		22%	16%	15%	17%	13%	12%	Green
Haringey Target	-	16%	16%	16%	16%	16%	16%	●



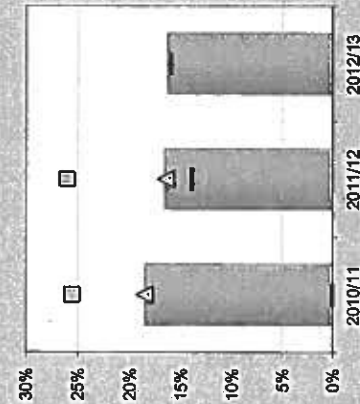
Performance Comment

- Levels are similar to those reported last year and by our statistical neighbours but lower than those reported nationally in 2011/12.  
 - Percentage relate to 15 re-referrals out of 124 referrals in January

Service Comment

This low number reflects good decision making in the majority of cases being assessed. We undertake routine sample auditing of re-referrals in the service to assure the quality and appropriateness of decision making.

Long term trend (last 6 years)	Key	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	Traffic Light
Haringey		-	-	-	19%	17%	16%	Green
Haringey Target	-	-	-	-	-	14%	16%	●
Statistical Neighbours	△	15%	17%	-	19%	17%	-	
England	□	24%	23%	-	26%	26%	-	



**HY59 Percentage of initial assessments for children's social care carried out within 10 working days of referral**

Recent trend (last 6 months)	Key	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Traffic Light
Haringey		65%	63%	70%	89%	78%	73%	Red
Haringey Target	-	80%	80%	80%	80%	80%	80%	●

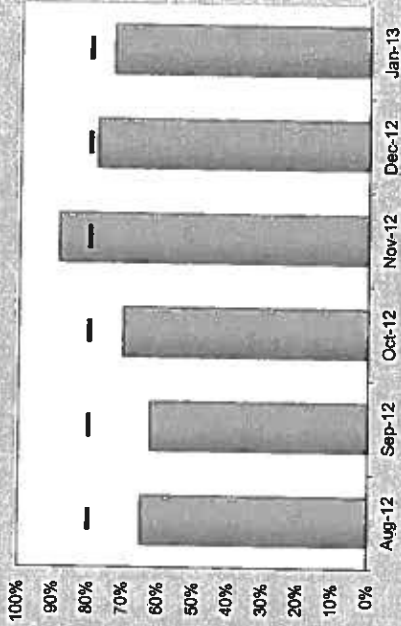
Distribution of days			
Jan-13	1-5	5-10	10-15
9%	9%	55%	13%
12%	2%	21+	2%

**Performance Comment**

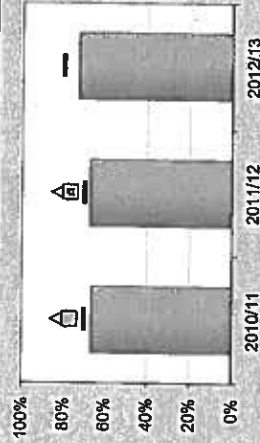
Although improved over years in particular in recent months YTD performance remains below our statistical neighbours (82% in 2011/12). Below target for the 2nd consecutive month.

**Service Comment**

The FR management team are addressing this by holding regular performance meetings in order to track out of date IA's. The actions from the meetings have been discussed with the TMs and will need final sign off by the HOS.  
DCT: 5 Initial Assessments were opened and completed within timescale in Jan 13. None outstanding.



Long term trend (last 6 years)	Key	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	Traffic Light
Haringey		-	-	-	66%	67%	73%	Red
Haringey Target	-	-	-	70%	70%	70%	80%	●
Statistical Neighbours	▲	-	-	82%	83%	82%	-	
England	■	-	-	76%	77%	77%	-	



**Op60 Percentage of core assessments for children's social care that were carried out within 35 working days**

Recent trend (last 6 months)	Key	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Traffic Light
Haringey		67%	58%	73%	76%	72%	69%	Red
Haringey Target	-	85%	85%	85%	85%	85%	85%	●

Distribution of days		<10	11-20	21-30	30-35	35-40	41-50	51-60	61+
Jan-13	3%	3%	7%	56%	4%	9%	4%	14%	

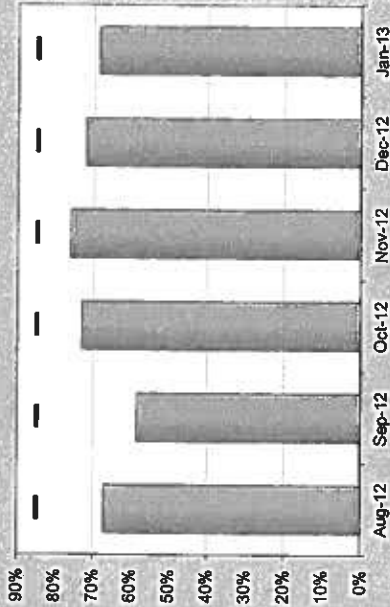
**Performance Comment**

-YTD performance improved at 70%, monthly performance near at 69%  
 -Performance on core assessments completed in timescale is below that of our statistical neighbours and below target .  
 - 115 Core Assessments completed in the month, 120 average each month

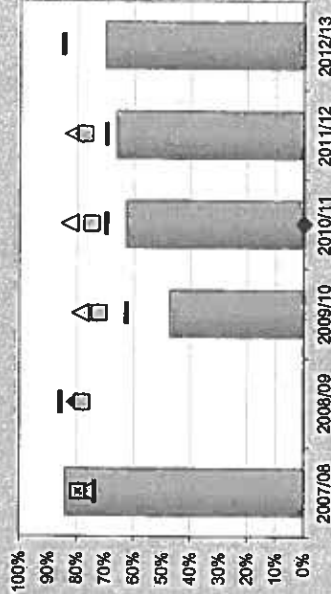
**Service Comment**

Please see previous comments

DCT: Three were completed within timescales. None outstanding for Jan13



Long term trend (last 6 years)	Key	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	Traffic Light
Haringey		84%	-	47%	63%	66%	70%	Red
Haringey Target	-	74%	86%	63%	70%	70%	85%	●
Statistical Neighbours	△	77%	81%	79%	83%	82%	-	
London	◆	79%	80%	73%	-	78%	-	
England	□	80%	78%	72%	75%	77%	-	

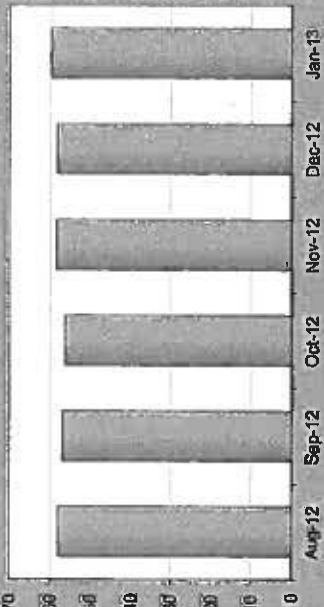


Children and Families - Child Protection

Op388 Children subject to a child protection plan

OP388a The rate of children subject to a child protection plan per 10,000 pop

Recent trend (last 6 months)	Key	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Traffic Light
Haringey Number		335	328	325	337	336	345	Red
Haringey Rate per 10,000		58	57	56	59	58	60	<input checked="" type="radio"/>



Performance Comment

Although the rate per 10,000 population was higher in 2010/11 the actual number of children subject to plan is higher now. The aim of 300 children on a cp plan looks unlikely to be met with a recent steady increase leading to a linear projection of over 350 by March 2013.

Service Comment

The numbers of children subject to CP plans is contributed to by a number of factors. The primary factors are thresholds for cases being taken to conference, thresholds once a CP plan has been made in relation to subsequently removing plan and in service provision once a CP plan is in place, all impacting on duration of CP plan.

The numbers of children on CP plans in Haringey are disproportionately high and it is required that all these factors are considered.

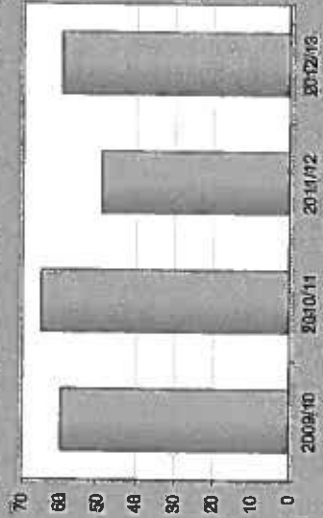
Work has progressed in relation to the need to consider/audit all new cases where social work plan is to take to ICPC. This will ensure thresholds for taking a case to conference are consistent and will allow re-consideration of support/early help that may, if provided, avoid the need for a CP plan. This work has commenced – all new cases are now considered by either the First Response HofS or DHofS and a CPA. To date this has involved auditing 7 family cases – 6 have progressed to ICPC – one was thought not to meet thresholds

Audit of CP cases held within Safeguarding and Support is now complete – This audit identifies issues of thresholds and effectiveness of CP plans. Themes identified provide learning and direction for S and S social workers and CPAs. Safeguarding and Support management team is actively considering this audit information and addressing the practice issues raised. Practice development partners are reviewing all cases with extended CP plans to consider progressing cases and learning regarding obstacles to progress.

Cases currently transfer from FR to S and S following ICPC – the timing of this transfer is variable – Audit clearly identifies that this transfer point/system is not effective and results in loss of impetu. This in turn impacts on duration of CP plans. It is planned that from April 1st S and S attend all ICPCs and take case responsibility from that point. This should allow for CP plans to be progressed more quickly, particularly during the first 3 month review period. HofS from First Response and Safeguarding and Support have met together and with the CPAs to ensure plans are moving towards this change becoming implemented on April 1st.

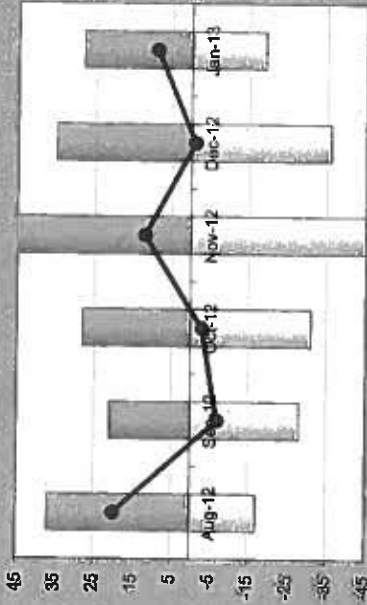
DCT There are 12 children known to the Disabled Children's Team with CP plans

Long term trend (last 6 years)	Key	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	Trend
Haringey Number		232	179	294	320	284	345	Red
Statistical Neighbours Number		188	212	241	228	229	-	
Haringey Rate per 10,000		-	-	60	65	49	60	
Statistical Neighbours Rate per	Δ	38	42	47	43	40		



OP 411 Children Becoming Subject to a child protection plan in the period  
 OP 413 Children Ceasing Subject to a child protection plan in the period

Recent trend (last 6 months)	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Trend
Haringey (becoming)	37	21	28	57	35	28	Data
Haringey (ceasing)	-17	-28	-31	-45	-36	-19	Only
Haringey Net Increase	20	-7	-3	12	-1	9	

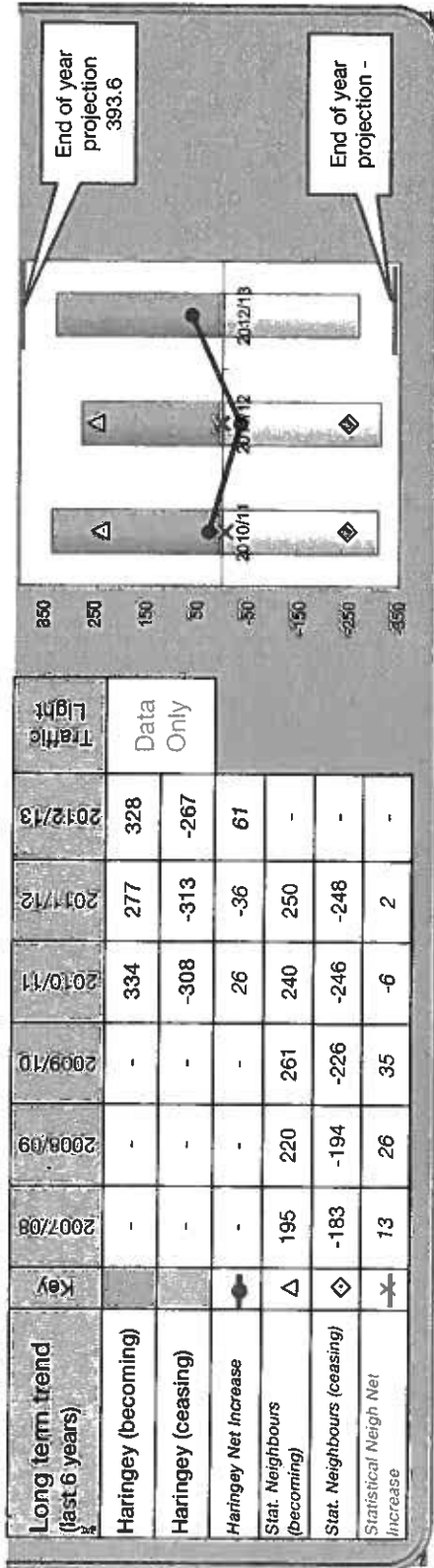


**Performance Comment**

A linear projection suggests an increase to around 400 children becoming subject to a plan in 2012/13 and a decrease to around 330 ceasing.

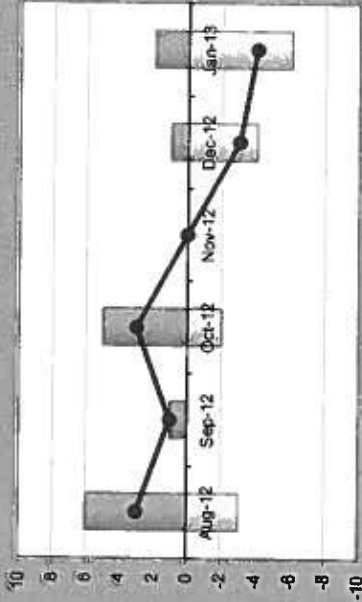
**Service Comment**

The management team in FR continue to oversee CP plan requests in order to ensure that they meet threshold and the CP plan going forward is SMART.  
 To establish whether there are differences in thresholds between newer and longer serving CP chairs, the individual chairs conversion rate from ICPC to plan will be calculated, reviewed and acted on if variations noted. Further the length of time on plans will be considered by chair.  
 DCT: one child became subject to CP plan in period  
 It is concerning that the numbers of children becoming subject to a CP are increasing. CPAs are undertaking audit work in relation to children becoming subject to plans to identify themes and issues and opportunities for lower intervention responses to families.



**Op421 Children moving to Haringey on a child protection plan**  
**Op422 Children moved out of Haringey on a child protection plan**

Recent trend (last 6 months)	Key	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Traffic Light
Haringey (moving in)		6	1	5	0	1	2	Data Only
Haringey (moving out)		-3	0	-2	0	-4	-6	Data Only
Haringey Net Increase	●	3	1	3	0	-3	-4	



**Performance Comment**

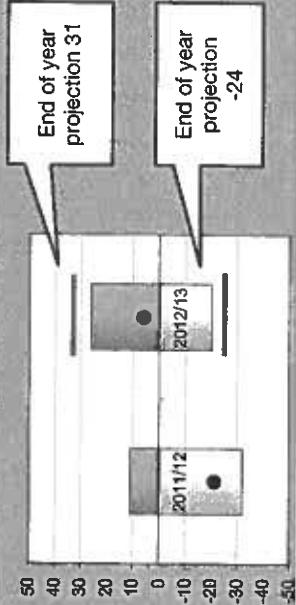
The year date position shows a more than doubling of the numbers transferring in - which may end up as nearly 3 times as high by the year end, this is magnified by a fall in the number transferring out.

**Service Comment**

Although last month reversed the flow, the trend last year has seen more children moving into Haringey with a CP plan than moving out. Whilst the numbers of children are not high over a 12 month period the net increase is significant. All cases transferred in to Haringey are considered by the Hoss, S and S; Pan London procedures are clear regarding such transfers. Issues of thresholds are not consistent. A number of cases have come into Haringey where questions in relation to the appropriateness of the CP plan (i.e. questioning whether the children should have been removed from parents care) have been raised. These cases are always highlighted, where there are recurring examples a meeting is requested with transferring borough.

This indicator is impacted on by housing availability and affordability. It is predicted that changes will be seen following the impact of benefit changes in April.  
 DCT none in this category

Long term trend (last 6 years)	Key	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	Traffic Light
Haringey (moving in)		-	-	-	-	11	26	Data Only
Haringey (moving out)		-	-	-	-	-32	-20	Data Only
Haringey Net Increase	●	-	-	-	-	-21	6	



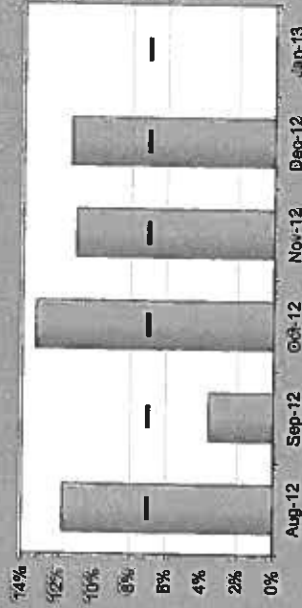






**HY64 Child Protection Plans lasting 2 years or more**

Recent trend (last 6 months)	Key	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Traffic Light
Haringey	11.8%	3.6%	13.3%	11.1%	11.4%	-	-	Red
Haringey Target	7.0%	7.0%	7.0%	7.0%	7.0%	7.0%	7.0%	●



**Performance Comment**

- the January figure relates to 0 out of 19 children. 22 out of 265 in the year to date.

**Service Comment**

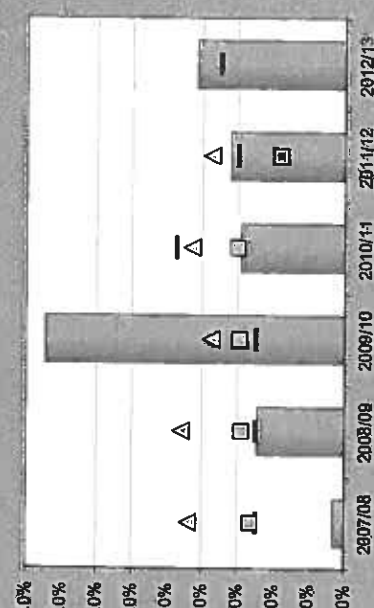
Seven of the longest standing cases have been reviewed and confirmed that this is the most appropriate way of continuing to manage the risk. The 15 cases which have just passed the 2 year mark are being reviewed by the Child Protection Chairs and Safeguarding Managers to determine whether continuation of the plans is appropriate and proportionate. A system to routinely scrutinise cases which have gone over 18 months will then be established.

DCT: None

Audit of CP cases held within Safeguarding and Support is now complete – This audit identifies issues of thresholds and effectiveness of CP plans.

Individual cases with CP plans lasting longer than 2 years are routinely considered by senior managers in S and S and the CPA. More work will be undertaken in order to gain more understanding of both individual cases but to identify possible themes in relation to children thought to need extended CP planning.

Long term trend (last 6 years)	Key	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	Traffic Light
Haringey	0.6%	4.9%	16.9%	5.8%	6.4%	8.3%	7.0%	Amber
Haringey Target	5.0%	5.0%	5.0%	9.5%	6.0%	7.5%	-	●
Statistical Neighbours	8.8%	9.2%	7.5%	8.6%	7.5%	5.5%	-	△
London	6.7%	7.5%	-	-	5.5%	3.6%	-	◆
England	5.3%	5.8%	5.9%	6.0%	6.0%	3.6%	-	□



Op 365 Percentage of children becoming the subject of Child Protection Plan for a second or subsequent time

Recent trend (last 6 months)	Key	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Traffic Light
Haringey		5.4%	0.0%	10.7%	3.5%	0.0%	0.0%	Red
Haringey Target	—	10%	10%	10%	10%	10%	10%	●



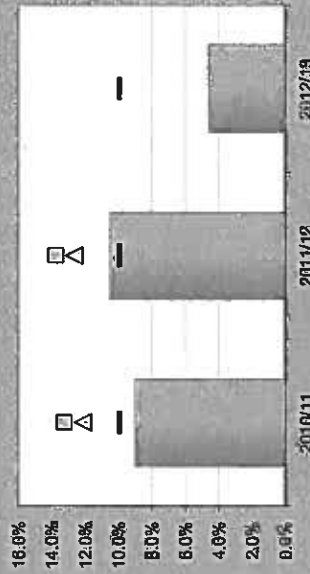
Performance Comment

The 4.6% YTD figure is low by comparison with London, SN, National and previous years figures. Haringey ranked 16th out of 28 authorities on the 2011/12 outturn of 10.5% children subject to a plan for a second or subsequent time.

Service Comment

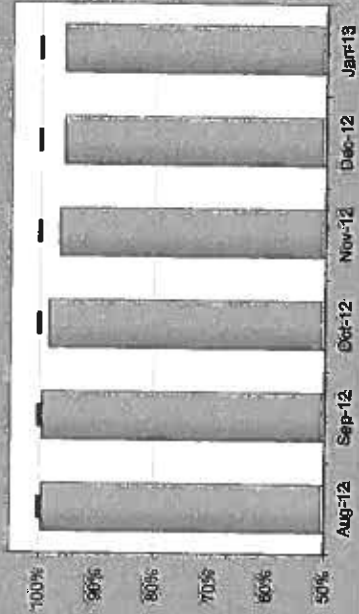
The low figure suggests that there are cases that should be brought back to ICPC and be subject to CP plans but are not. This is an area that needs to be understood. It is unclear whether Haringey is quicker to make a decision not to return to conference but progress using other routes (e.g. court) than other boroughs. Service heads and legal to consider data re court applications and numbers of children taken into court proceedings who have been on plan but are not at time court application is made. DCT There is one child who is subject to CP plan for the second time in the category of neglect re the complexity of his health needs.

Long term trend (last 6 years)	Key	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	Traffic Light
Haringey		-	-	-	9.0%	10.5%	4.6%	Red
Haringey Target	—	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	●
Statistical Neighbours	△	13.7%	12.1%	13.5%	12.2%	12.7%	-	
London	◆	12.2%	11.5%	-	-	11.4%	-	
England	□	13.2%	12.8%	13.4%	13.3%	13.8%	-	



**Op367 Percentage of child protection cases which were reviewed within required timescales**

Recent trend (last 6 months)	Key	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Traffic Light
Haringey		100%	100%	98%	97%	96%	96%	Red
Haringey Target	-	100%	100%	100%	100%	100%	100%	<input checked="" type="radio"/>



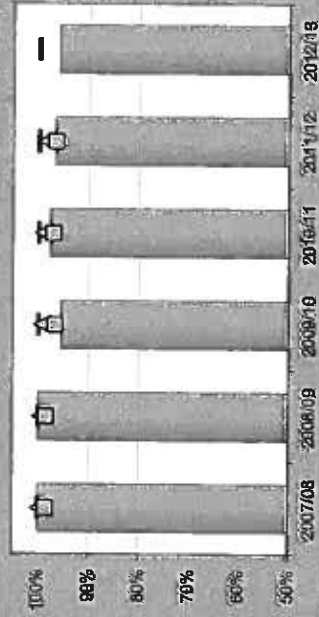
**Performance Comment**

There 9 children for whom reviews were out of timescale . Four of these did have a review in December or January.

**Service Comment**

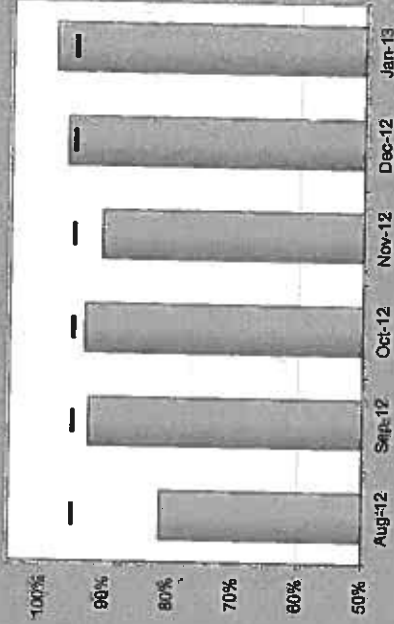
All Looked After Children have an IRO allocated to them at the point of referral to the service, they are responsible for scheduling reviews according to the timescales laid down in the legislation. All of the 102 cases where the Review was reported as being held late at some point in the year have been looked at and can be confirmed as the review has now taken place. In some of these cases there is dispute about the accuracy of the report and these are being scrutinised individually. Twenty three of the cases became out of time scale in the early part of the year due to sickness of the IRO, the need to maintain consistency in the reviewing arrangements was deemed paramount.

Long term trend (last 6 years)	Key	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	Traffic Light
Haringey		100%	100%	96%	98%	97%	96%	Red
Haringey Target	-	100%	100%	100%	100%	100%	100%	<input checked="" type="radio"/>
Statistical	△	100%	100%	99%	99%	99%	-	
London	◆	99%	100%	-	-	98%	-	
England	□	99%	99%	97%	97%	97%	-	



Op380 Child Protection Visits

Recent trend (last 6 months)	Key	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Traffic Light
Haringey		81%	93%	93%	91%	96%	98%	Green
Haringey Target	-	95%	95%	95%	95%	95%	95%	<input checked="" type="radio"/>



Performance Comment

January's figure was the highest of the year (and last year) And achieved the target for the second month running.

Service Comment

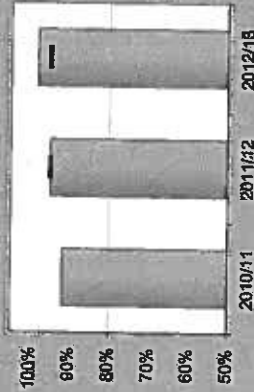
Regular conversations with TM and PM about the importance of this has led to this being prioritised in FR 100% visits made and recorded within timescales.

The expectation is that all children subject to plans should be seen at a very minimum of monthly. This performance indicator is the focus of work within the S and S team with systems now in place for managers to check both occurrence of visits, the timely writing up of visits and the quality of both social work and recording. It was agreed that cases held within other teams will also be monitored by Service managers in S and S from January.

Visiting frequency is improved and the challenge is to maintain this performance.

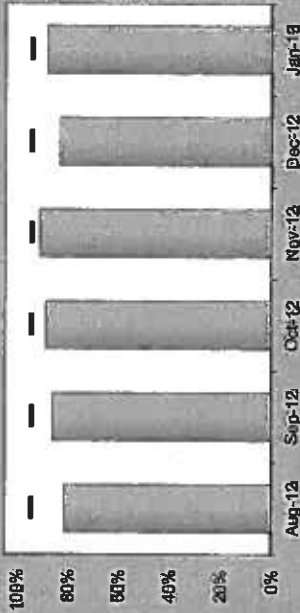
DCT  
The

Long term trend (last 6 years)	Key	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	Traffic Light
Haringey		-	-	-	92%	95%	98%	Green
Haringey Target	-	-	-	-	-	95%	95%	<input checked="" type="radio"/>



Op381 Children in Need Visits

Recent trend (last 6 months)	Key	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Traffic Light
Haringey		82%	87%	89%	92%	84%	89%	Red
Haringey Target	-	95%	95%	95%	95%	95%	95%	<input type="radio"/>



Performance Comment

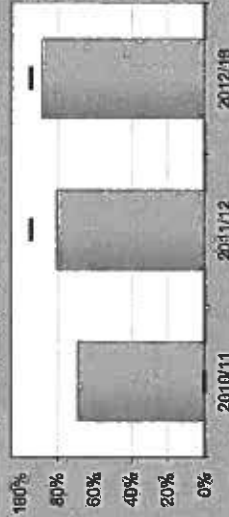
- Performance again in the high 80 percentages  
 - Although the year to date position below target, performance in 2011/12 was 81% and it has been well above this level in recent months.

Service Comment

The expectation is that all children considered in need and at a threshold requiring social work allocation should be visited at a minimum of once a month. A review of CIN cases is being undertaken to consider whether all open cases require social work allocation and indeed whether children's needs would be best met by case responsibility being held elsewhere. It is probable that a number of cases should be moved and held within family support teams - these are the less worrying cases with no requirement for social work input.

Target for the service is to bring this visiting frequency in line with CP visits.

Long term trend (last 6 years)	Key	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	Traffic Light
Haringey		-	-	-	69%	81%	89%	Red
Haringey Target	-	-	-	-	-	95%	95%	<input type="radio"/>



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## Appendix 2

<sup>1</sup> The potential child and parent risk factors identified at assessment identified in the CIN census are as follows in the table below (multiple factors can be selected):

### Parental/child factors at assessment

Parental/child factors will be identified through assessment. Each local area will have a framework for assessment developed with reference to *Managing Individual Cases: the Framework for the Assessment of Children in Need and their Families*. This sets out the principles that underpin all work with children in need and in particular the three domains of the conceptual framework: child's development needs; parenting capacity; family and environmental factors.

Parental/child factors at assessment		
Child welfare concerns	1	
Child development	2	
Suspected abuse or neglect	3	
Concerns about disability or illness	4A	Child
	4B	Parent/Carer
	4C	Other
Alcohol misuse	5A	Child
	5B	Parent/Carer
	5C	Other
Drug misuse	6A	Child
	6B	Parent/Carer
	6C	Other
Mental health concerns	7A	Child
	7B	Parent/Carer
	7C	Other
Criminal behaviour	8A	Child
	8B	Parent/Carer
	8C	Other
Socially unacceptable behaviour	9A	Child

	<b>9B</b>	Parent/Carer
	<b>9C</b>	Other
<b>Self harm</b>	<b>10A</b>	Child
	<b>10B</b>	Parent/Carer
	<b>10C</b>	Other
<b>Domestic violence</b>	<b>11A</b>	Child
	<b>11B</b>	Parent/Carer
	<b>11C</b>	Other
<b>Child missing</b>	<b>12</b>	
<b>Accommodation concerns</b>	<b>13</b>	
<b>Trafficking</b>	<b>14</b>	
<b>Low income</b>	<b>15</b>	
<b>Not stated</b>	<b>16</b>	
<b>Other</b>	<b>17</b>	

<b>Report for:</b>	<b>Children's Safeguarding Policy and Performance Advisory Committee</b>
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<b>Title:</b>	<b>Work with families who have No Recourse to Public Funds</b>
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<b>Lead Officer</b>	<b>Chrissy Austin (Acting Head of Service First Response)</b>
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<b>Report Authorised by:</b>	<b>Marion Wheeler</b>
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<b>Date</b>	<b>14.01.13</b>
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The No Recourse to Public Funds Team is based within the First Response Team. It comprises of a manager, 2.7 social workers and an Immigration/Human Rights Advisor.

The team undertake assessments of all contacts received regarding families who may or may not have a pending immigration application with the Home Office. The team only offers ongoing support to those families who have a pending immigration application. It offers advice to those that do not and signposts elsewhere.

The support can include a combination of housing and or subsistence. The amounts of subsistence are clearly defined, as is the type of housing available at the time.

The majority of families who meet the criteria for support originate from Ghana or Jamaica.

The team work closely with the UKBA in attempting to progress the immigration applications to solution – whether this be the granting of indefinite leave to remain or refusal. Whilst the immigration applications are pending, Haringey retains responsibility for housing and subsistence costs. The ongoing work with the UKBA is key, as they are responsible for the progression and outcomes of claims and appeals.

**See presentation attached for more detail.**

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# Presentation for Members March 2013

## What is 'NRPF Families'

No Recourse to Public Funds (NRPF) applies to persons subject to immigration control, who do not have the right to Work, have no entitlement to welfare benefits, public housing or NASS (National Asylum Support Service) support from the UKBA.

In these cases, Local Authorities may have a duty to support under the scope of the Children Act 1989; Human Rights Act 1998 or National Assistance legislation.

## Legislative Legislation

There are three main streams of Legislation (Immigration, Human Rights and The Children Act 1989)

### **Immigration Legislation:**

#### **The Asylum and Immigration Act 1999:**

Established the National Asylum Support Service (NASS) to take over the provision of asylum support.

#### **Nationality, Immigration and Asylum Act 2002:**

Withholding and withdrawal of support by a LA unless there is a breach of Human Rights.

# Legislative Framework

## **Immigration, Asylum and Nationality Act 2006:**

Makes a criminal offence to employ a person knowing that they are not legally entitled to work in the UK (from February 2009)

## **New Legislation since 2010:**

- 7 year rule, 10 year rule 14 year rule – abolished and incorporated in Art 8 policy
- Since Oct 2012, an over stayer will need to be in the country for 20 years to be able to submit an application/claim he/she been resident in the UK for 20 years to the UKBA
- Legal Aid for Immigration will be cut in from 1<sup>st</sup> April 2013, currently most applications attract a Home Office fee but the work covered by a Legal Aid Solicitor. From April 2013 any FLR (o), Art 3 or Art 8 will be on a fee paying basis (like a private solicitor, unless client has been to a voluntary organisation – only a few left and often over subscribed!)
- If status is granted for post 9.7.12 applications it will be '**without recourse to public funds**'





# Legislative Framework

## **Human Rights Act 1998:**

The relevant Articles when considering Human Rights Act 1998 for the purpose of duties for LA are:

- a) Article 8 – Right to Family Life (Everyone has the right to respect for his private and family life, his home and his correspondence).
- b) Article 3 – Prohibition of Torture (no one shall be subjected to torture or to inhuman or degrading treatment or punishment). Destitution +

## **Children Act 1989 & 2004:**

The Exclusions under Schedule 3 do not apply to children, therefore duties under the CA'89 remain (especially under Section 17 & 20)

## **Community Care Act for Adults and National Assistance Act 1948**

# Current Team

The current NRPF Families Team is located within the CYPs, First Response Service.

The team is responsible for referrals first hand as well as maintaining case allocation of the families. The team also joint works with families subject to immigration control known to other teams with the view of monitoring cost, provide consistency of services across the board and support with immigration issues.

The team comprises 1 Team Manager, 2.7 x Social Workers; 1 Immigration Advisor/Human Rights and Housing Specialist

# Eligibility Criteria

In order to establish a family's eligibility for services, the LA carry out very robust assessment taking into account the following:

- 1) Establish whether there is a local connection – “territorially responsible”
- 2) Establish that the family is destitute and the children in need as stipulated under Section 17 of the Children Act 1989
- 3) Carry out an immigration check to establish eligibility under immigration legislation and to establish if there are any barriers to the family's removal and weighing up different pieces of legislation
- 4) Assessing content of Home Office application
- 5) assessing family's support network
- 6) Check whether the LA is excluded from supporting the family under section 54 Schedule 3 of NIAA 2002



# Assessment

Robust assessments are in place in order to establish eligibility criteria and needs of the children and the family as a whole:

- 1) Weighting up different pieces of legislation
- 2) Checking with the Home Office –UKBA in order to ascertain family’s immigration status
- 3) Assessing content of Home Office application
- 4) Assessing the level of destitution and impact on children (needs Vs wants)
- 5) Information from schools, health departments and other relevant agencies to take place
- 6) Assessing family’s support network

# Haringey Family Profile

- Haringey is home to a culturally and ethnically diverse population with Black African and Black Caribbean communities accounting for one fifth of the population.
- Haringey's cultural diversity has historically been a pull factor for refugees and those seeking asylum as well as migrants.
- The client profile reflects the community make up of Haringey, with a majority of our clients coming from Jamaica and Ghana (this client group reflects those communities which would not normally come through the route of asylum).

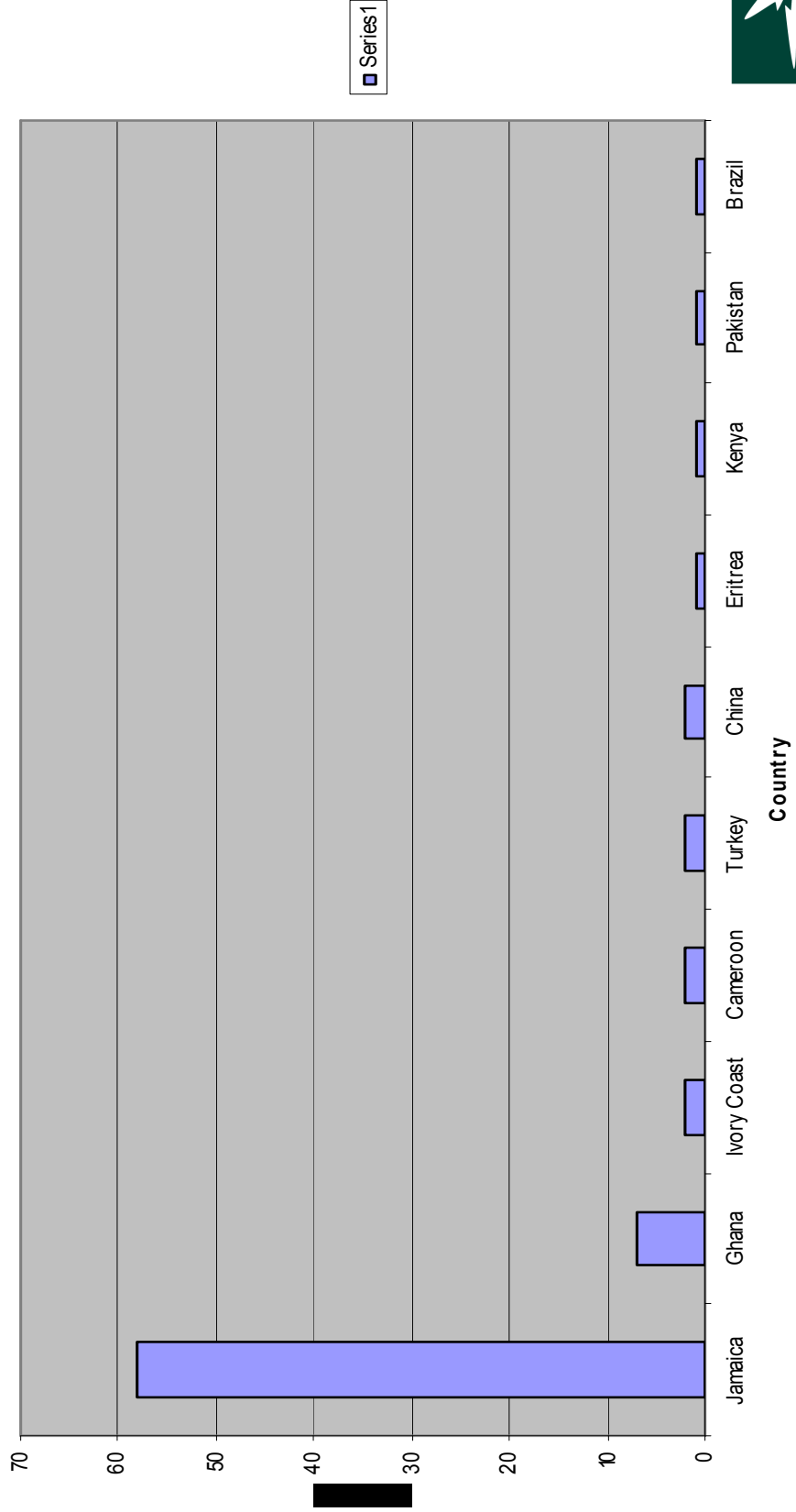
## Haringey Profile Continued:

There are issues present that work with the families subject to immigration control, in addition to destitution, such as:

- Mental health illnesses, such as depression due to uncertainty of future
- Prostitution
- Crime: mothers coming out from prison and being involved in crime,
- High mobility and uprooting of children, abandonment of fathers
- Breakdown of support networks
- Domestic Violence . At present, we have 18 families who came to our attention as a result of experiencing or fleeing DV, that is **23% of the total cases**

# Client Profile Continued:

Clients: Country of Origin Statistics



# Referrals

- We are currently supporting 92 families (one of the highest number across London and the UK)
- This relates to approximately 6 to 10 referrals per month
- This figure does not account for the 300 per year or so enquiries for support that are screened out, as they do not meet the criteria.



## Support Provided

Following an assessment the family will be provided with:

- Accommodation and/or subsistence funded by the local authority – shared facilities in London and single occupancy in Wolverhampton
- Support with immigration issues and solicitors as well as follow up with UKBA
- Linking with relevant services and community
- Ongoing assessment of needs
- Ongoing reviews of eligibility for support
- Subsistence : to provide 1st Child with £51.37 in line with NASS and subsequent children with £13.40 in line with Child Benefit.

# Challenges

- There has been a sharp increase for support for families subject to immigration in the past few years, due to ongoing changes in Immigration Legislation
- There is significant delay in the UKBA making decisions on submitted applications, which in turn impacts on LA budgets as a result of families needing support for longer
- New groups of families are presenting requesting support due to changes in legislation (E.g. Families granted with Discretionary Leave to remain BUT with No Recourse to Public Funds)

## Wider Context

- As a result of this increase in demand for support, Local Authorities are have set up NRPF teams within their services in order to account for the number of referrals and to monitor cost implications, as well as to put a more robust and consistent service in place.
- In 2006 there was a NRPF network established, hosted in the LB Islington, with the intention of providing guidance and support to LA s with this emerging issue of provision and duties of support towards NRPF clients.
- In 2012 the NRPF network has develop a system to store information about families supported by Local Authorities which is shared by all Local Authorities and the UKBA – NRPF Connect.



## Financial Implications

- In 2011-12 – the budget was set at £1,000,000 – outturn was £1,045,228 (only £45k over)
- In 2012-13 – the budget was set at £900,000 – end of year projection is £1,285,000 (over 385k over)
- In 2013-14 – the budget will be £700,000 (increased overspend forecast)

# What are we Doing?

- Monthly meetings with the UKBA
- Continuing request for UKBA representative within First response to progress cases
- Emphasis on robust assessments and screening
- Working with our colleagues across boroughs to discuss impact of new legislation
- Joint working with our colleagues regarding housing stock availability

Presented by:

Arantza Faiges, Team Manager  
First Response Service

Chrissy Austin, Acting Head of Service  
First Response Service