
Haringey Safeguarding Children Board

Annual Report
2014 – 2015



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1 Introduction

- 1.1 This annual report is for the period 1st April 2014 to 31st March 2015 and is produced as **part of the Board's statutory duty under section 14A of *The Children Act 2004*** and Chapter 3 of *Working Together to Safeguard Children 2015*. The Chair of the Board is required to publish an annual report in relation to the preceding financial year, on the effectiveness of child safeguarding and promoting the welfare of children in the local area.
- 1.2 The report will be submitted to the Chief Executive, Leader of the Council, the local police and crime commissioner¹ and the Health and Wellbeing Board. The report provides an overview of LSCB activities and achievements during 2014 – 2015; it summarises the effectiveness of safeguarding activity in Haringey; provides an overview of how well children in Haringey are protected, **and fulfils the Board's statutory duty to:**
- provide an assessment of the performance and effectiveness of local services
 - identify areas of weakness, the causes of those weaknesses and action being taken to address them as well as other proposals for action
 - include lessons from reviews undertaken within the reporting period
 - include assessment of **Board partners' responses to child sexual exploitation**
 - include information on children missing from care, and how the LSCB is addressing the issue
 - include contributions made to the LSCB by partner agencies and details of what the LSCB has spent, including on Child Death Reviews, Serious Case Reviews and other specific expenditure such as learning events or training
- 1.3 More information about the statutory role and function of the LSCB can be found at *Appendix A*.

¹ In London this is the Mayor's Office for Policing and Crime

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2 Foreword by the Chair

- 2.1 I am proud to **present the annual report for Haringey's Safeguarding Children Board for 2014-15**. I assumed the role of Chair in May 2014, and am most grateful for the support and engagement of partner agencies throughout the year. There is a strong collective commitment to working purposefully together in the task of keeping children and young people safe within Haringey, and this year has been one of real progress in many areas.
- 2.2 We are very conscious of the challenges that face all agencies working with children and young people. Budget pressures are real and increasing; all agencies have been required to reduce their budgets, whilst the demand for services has continued to rise in many areas. The world of child protection can be an unforgiving one, so it requires real maturity for agencies to find the necessary balance of strong support and strong challenge. I am proud of the way in which Haringey agencies have felt able to confront those areas where we know we need to improve, whilst seeking to identify examples of good practice that we see daily from staff on the front line.
- 2.3 The year began with an inspection visit from Ofsted, published in July (which I **summarised in last year's report**). The Board **achieved a rating of "Requires Improvement"**, with Ofsted noting only four areas for improvement (see Section 2 below); **we were encouraged that we nearly warranted a rating of "Good"**, and we are confident that should they return any time soon we would achieve that rating. Ofsted confirmed that we were compliant with the new Working Together arrangements, our governance was effective, we had effective business planning, and we paid attention to the voice of the child. They said that we demonstrated challenge to partners, and supported partners in holding each other to account. Our range of audit activity was noted, with support for our Learning and Improvement Framework and our approach to Serious Case Reviews. Our training programme, our policies, and our website, were all commended.
- 2.4 Early in the year we said goodbye to our Board Manager, Angela Bent. It took some time to replace her, but I was delighted recently to welcome Patricia Durr to the post. Patricia has brought vision, enthusiasm and great commitment to our work.
- 2.5 As the report indicates, all our subgroups have been active. We report here on two Serious Case Reviews (SCRs); we have continued work on a third, and we have just commenced a fourth one. We are now implementing our strategy for tackling Child Sexual Exploitation (CSE), and our Board has discussed some aspect of this issue at every meeting. We are looking more carefully at work across the borough to tackle **Missing Children**. **We have contributed to the development of the Council's Early Help Strategy**, and agreed our role in monitoring its delivery. We have increased our level of engagement with schools, and conducted a review of practice in the handling of cases of historic abuse.
- 2.6 We were pleased to host a major conference on Female Genital Mutilation, with previous Home Office Minister Lynne Featherstone, with over 150 delegates from across North London. Some pioneering work is taking place on this issue within some Haringey schools, and this is a great example of where young people themselves have helped to set the agenda and lead much of the campaigning.

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- 2.7 The year ended with us receiving news of an Innovation Grant award from the Department for Education to support us in improving our collaboration with the neighbouring borough of Enfield in supporting vulnerable young people. In the years ahead we will need more such collaborations across geographical boundaries, so I am glad of the national recognition of our work.
- 2.8 In the coming year we intend to revisit our long-term strategy. We believe that every child should grow up in a loving and secure environment which is free from abuse, neglect and crime, enabling them to be safe and healthy and to enjoy life and fulfil their social and educational potential. I hope our new strategy will spell out the practical contribution that our Board can make to achieving this vision.
- 2.9 Safeguarding arrangements within Haringey are broadly robust and effective, and the partnership has demonstrated its willingness to confront and respond to issues which arise. Resources available to all agencies are under severe pressure, and the years ahead require continued commitment from all agencies to maintain and further develop the safeguarding and other partnerships. We need to improve our sharing of data, so that we can become better at identifying any changes and emerging threats to the safety of children within Haringey. We need to improve our engagement of children and young people in our work. And we need to think radically about how the services provided by all agencies can work more effectively and efficiently together in the years ahead.

3 Progress on priorities, issues and challenges

3.1 The *LSCB Business Plan 2014 – 2016 (Appendix B)* provides the framework of priorities for our work whilst allowing us to be responsive to emerging themes and challenges: it enables us to monitor and track progress on identified actions. The current Business Plan also takes into account areas of improvement as identified in the May 2014 Ofsted review of the LSCB, which have all been completed.

3.2 We review our priorities annually, and in last **year's annual report** we outlined 5 priorities within a two year business plan to the end of March 2016. Progress was achieved against each of these priorities, as set out below:

3.3. **PRIORITY ONE Gangs**

Strengthening the connections between work around a) missing children, CSE and gangs, b) supporting and monitoring the development of a multi-agency response, and c) assessing the effectiveness of early intervention in reducing gang membership

3.3.1 This was also a particular focus for Ofsted recommendations, which we have responded to.

3.3.2 Ofsted recommended that we **review Haringey's Child Sexual Exploitation (CSE) multi-agency guidance and consider whether the involvement or association with gangs by young women should be included as a risk factor to strengthen arrangements to provide a co-ordinated response to this vulnerable group of young people.** They recommended that we *accelerate plans to formally agree the draft CSE strategy and ensure it is clearly linked to the gang action plan, make clear how the strategy will link to front-line practice, and set out what success criteria will be used to measure and evaluate progress*

3.3.3 Additionally Ofsted recommended that we *ensure that the Board receives an annual report on children missing from home, missing from care and missing from education, to assure itself that appropriate processes and practice are in place to safeguard this vulnerable group of children and young people.* We should also **strengthen the existing Board's annual report arrangements to include an evaluation of service responses for missing children, to support multi-agency actions and reduce risks posed to children.**

3.3.4 We have updated and re-issued the CSE guidance as suggested. We now know that the profile of CSE that emerges within Haringey is somewhat different to the high-profile cases in some English towns. Here much of CSE appears to be connected to gang activity within the borough, **so Ofsted's recommendation was appropriate.** We have begun implementing the strategy, and are bringing together all agencies on a regular basis to ensure we tackle and bear down upon the incidence of CSE. Our data processes now enable us to monitor changes in the occurrence of suspected CSE, and monitor rates of disruption and prosecution.

3.3.5 We have strengthened our reporting systems. We are currently undertaking a new review of how all agencies respond to missing children, in order to ensure that all

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children are properly interviewed on their return, and that we learn any necessary lessons.

- 3.3.6 The CSE Sub-group is now overseeing this work and has a clear governance and accountability structure and agreed strategy, which includes connections and routes into the Violence Against Women and Girls Board, Gang Action Group Strategy and oversight of our work on Missing Children & Young People. The workflow into Multi-Agency Sexual Exploitation (MASE) meetings and Multi-Agency Safeguarding Hub (MASH) is developing, and the quality of contributions are strengthening significantly and being monitored via the CSE Sub-Group and the MASH Board. There is a clear action plan, with agreed accountabilities and reporting into the Board.
- 3.3.7 A Task & Finish Group chaired by the Metropolitan Police Borough Commander was convened this year to undertake a thorough review of the multi-agency response to Missing Children & Young People, and developing our local protocol.
- 3.3.8 Our Section 11 Audit this year included five additional strategic priorities to help achieve a better understanding of how services were responding, including a focus on working with children and young people affected by gangs and CSE. More information about the audit and its findings can be found at *Section 6*.
- 3.3.9 **The Disabled Children's Sub-group** undertook a review with the Gang Action Group of the engagement of disabled children during the reporting period and reported to the Board in May 2015 with the findings to be fed into the Gang Action Group Strategy.
- 3.3.10 There is work ongoing to make our performance data in this area more robust and to consider the impact of the Early Help offer on gang engagement.

3.4 PRIORITY TWO - Early Help

Scrutinise the move towards strengthening the early help offer across Haringey, seeking assurance on the common understanding of definitions, on the impact on child protection services, and on appropriate multi-agency engagement.

- 3.4.1 This year the Board considered the Council's Early Help Strategy and we have established regular reporting to the Board on progress and impact. Questions about Early Help were also a feature of our Section 11 Audit this year. There is still work to be done to review our training and we will be looking at Early Help in our 2015-16 audit cycle. We are committed to the importance of **growing the borough's** Early Help offer, so we can be confident that children and families receive support as early as possible, and fewer children need to rise up the tiers of need to receive a child protection plan.

3.5 PRIORITY THREE – Neglect

Improving effectiveness of all agencies in recognising and responding to neglect

- 3.5.1 Neglect was a key focus of our Section 11 Audit this year to assess agencies safeguarding arrangements and more information about outcomes can be found at *Section 6*.

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3.5.2 The MASH Board is looking in particular at the use of chronologies across the partnership to strengthen responses to cases of neglect. In 2015-16 the MASH Board is operating as a sub-group of the Board with a clear governance structure

3.5.3 The Board is reviewing the development of a Neglect Strategy.

3.6 *PRIORITY FOUR - Promoting good practice*

Shift the overall balance of our activities more towards identifying and promoting elements of good practice.

3.6.1 Work began on developing a programme for disseminating examples of good practice in safeguarding through the partnership. Three examples of good practice went into the **Board's Jan/Feb 2015 newsletter**.

3.6.2 We developed our annual campaign programme this year and ran two highly successful campaigns including a very well received poster campaign focused on learning from SCRs. We also worked with the Council on a borough wide CSE Campaign towards the end of the year.

3.6.3 In 2015-16 we have ambitions to improve our communications and focus with a review of our training offer, branding, and development of our vision and 3-5 year strategy.

3.7 *PRIORITY FIVE - Engaging the voices of children and young people*

Identify an effective and proportionate way of tapping into the already available views of children and young people, to inform the work of the LSCB.

3.7.1 **The Board remains committed to ensuring that children's real and lived experiences are the heart of our work.** In 2014-15 we agreed a new annual audit cycle to include a multi-agency audit of how partners are considering the wishes and feelings of children in their direct work. Work also began on our engagement in the Office of **the Children's Commissioner Takeover Day for November 2015**. We have much more to do, though, in involving children in the work of the Board, and we aim to concentrate more on this in the coming year.

3.8 Working closer with Schools

Ofsted also recommended that we "Ensure that schools are more fully involved at Board level so that their representations are known, understood and considered and their contribution fully harnessed to influence the shape of services".

3.8.1 Our engagement with schools has improved considerably this year with established representation on our Board from both primary and secondary schools. The Chair has attended meetings with all head teachers to consider safeguarding priorities. During the summer of 2014 the Chair undertook a review of the procedures for handling cases of historical abuse within schools, following a high-profile case **dating back to the 1980's which resulted** in the conviction of the perpetrator for a 12 year sentence. The review identified examples of effective practice by the police, the school, the Local Authority Designated Officer (LADO) and the council, but also identified several learning points for all agencies. A small number of other allegations

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have surfaced relating to historical abuse within Haringey schools from up to forty years ago, and the new procedures are now being followed.

- 3.8.2 This review provided an opportunity for schools to revisit their existing child protection policies, in particular their policies relating to whistle-blowing, disclosure, and Sex and Relationship Education, and a programme of work has been initiated with all schools in the borough in order to revise, improve and update policies. The board also reviewed all the most recent Ofsted reports of schools, receiving assurance that Ofsted ratings of safeguarding practice were consistently high, and that where any issues had been identified, appropriate action had been taken.

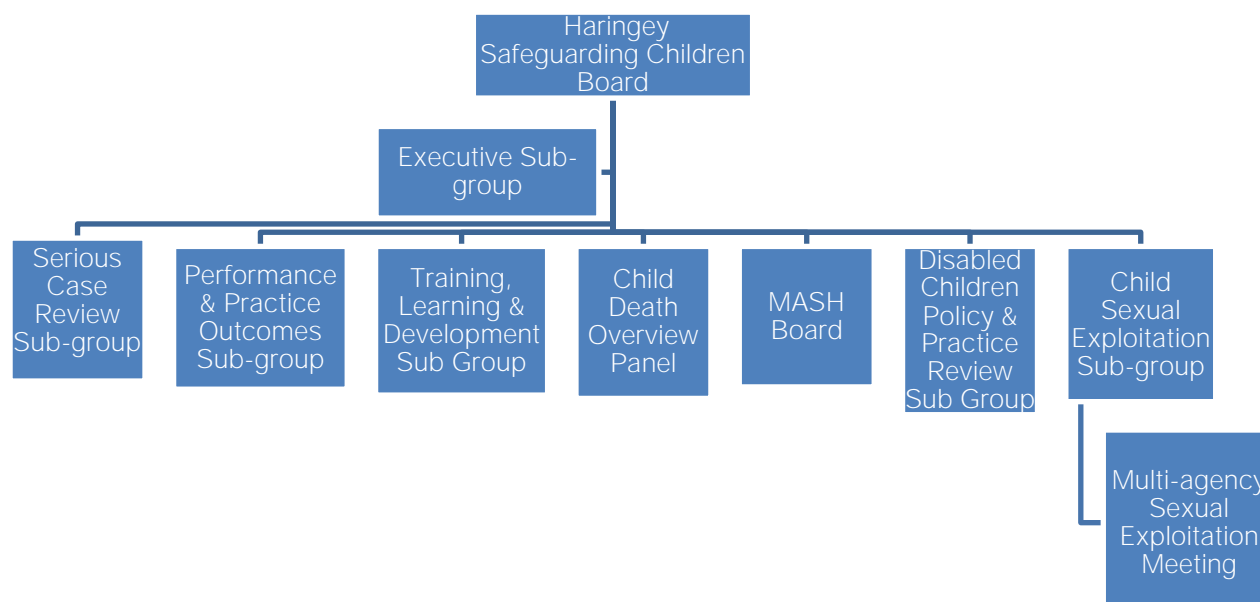
4 Local information and data

- 4.1 Haringey is an exceptionally diverse and fast-changing borough. We have a population of 267,451 according to the 2014 Office for National Statistics Mid Year Estimates. Almost two-thirds of our population, and over 70% of our young people, are from ethnic minority backgrounds, and over 100 languages are spoken in the borough. Our population is the fifth most ethnically diverse in the country.
- 4.2 The borough ranks as one of the most deprived in the country with pockets of extreme deprivation in the east. Haringey is the 13th most deprived borough in England and the 4th most deprived in London with the 4th highest level of child poverty in London. Haringey is the most unequal borough in London, with over half of its wards being either very rich or very poor. Northumberland Park, a ward in the East, is the most widely deprived ward in London.
- 4.5 Haringey has high unemployment (9%) and the 2nd highest proportion of people living in temporary accommodation, which includes children and families. While three wards were in the top 25% for wellbeing in England in 2012, nine wards – mostly in the east of the borough – were in the bottom 25%.
- 4.6 There are approximately 63,400 children and young people under 20 living in Haringey (approximately one third of the total population). The wards with the largest number of people aged under 20 in Haringey are: Seven Sisters, Northumberland Park, White Hart Lane and Tottenham Hale..
- 4.7 1 in 3 children live in poverty, 1 in 4 children live in household with no working adult (23% compared to 18% in London). Over 10, 000 households are with lone parents (34% compared to 28% in London). It is estimated that over 11, 000 children in Haringey live with some form of long-standing disability.
- 4.8 Over 9,000 children and young people have Special Educational Needs (SEN) in primary and secondary schools. Approximately 1,200 children have a Statement of SEN; of those, 35% had autism followed by moderate learning difficulties (21%) and emotional, behavioural and social difficulties (12%)

5 Governance and accountability

- 5.1 The LSCB has an independent chair and a number of subgroups chaired by a senior member from across the partner agencies. The Chair is accountable to the Chief Executive of the local authority in chairing the LSCB and overseeing its work programme. However, he is accountable only to the Board for the decisions he takes in that role. The role of Vice-Chair is undertaken by the Designated Nurse from the CCG.
- 5.2 The Board is attended by representatives from the partner agencies with a high level of engagement. Information about Board attendance can be found at *Appendix C*.
- 5.3 Governance continues to be strengthened with regular reporting from sub-groups through to the Executive and the Board; a range of task and finish group activity with clear reporting lines and the introduction of a member appraisal process this year.
- 5.4 During the year the structure of the Board changed to reflect priorities and efficiencies. We report on the business of each of the sub-groups operating during 2014-15 in this report and the structure below reflects the shape of the Board from April 2015.

Board Structure 2015/16



5.5 Relationship between the LSCB and other strategic boards

- 5.5.1 The Chair of the LSCB attends the Health and Well-Being Board and the Children's Trust. He meets regularly with the Chief Executive and Deputy Chief Executive, the

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Director of Children's Services, the lead member for children and the Council Leader. He meets annually with the Chief Executives of the key partner agencies. He meets annually with the Council's **Scrutiny Committee**. Several Board members sit on the Community Safety Partnership and this year greater links have been made with a number of other key strategic partnerships:

- The Violence Against Women & Girls Strategy Group which reports to the Community Safety Partnership
- The Preventing Radicalisation & Violent Extremism Strategy Group which reports to the Community Safety Partnership
- The Safeguarding Adults Board

5.6 Health

5.6.1 As the major commissioner of local health services across the borough Haringey Clinical Commissioning Group (CCG) is responsible for safeguarding quality assurance through contractual arrangements with all provider organisations. All health providers in Haringey are required to have effective arrangements in place to safeguard vulnerable children and to assure the CCG, as commissioners, that these were working. These arrangements included:

- safe recruitment;
- effective staff training;
- effective supervision arrangements;
- working in partnership with other agencies;
- all providers ensuring they have a Named Doctor and a Named Nurse for safeguarding Children (and a Named Midwife if the organisation provides maternity services);
- GP practices to have a lead for safeguarding, who should work closely with the Named GP and Designated Professionals.

5.6.2 The three main Provider Trusts are all also represented on the Board and hold internal bi-monthly safeguarding children committees attended by the Designated Doctor, Assistant Director Safeguarding / Designated Nurse Child Protection or Deputy Designated Nurse. The meetings provide an opportunity for information sharing and challenge regarding all aspects of safeguarding children. Any issues arising are discussed with the Executive Nurse/ Director of Quality and Integrated Governance and within the Haringey CCG Safeguarding Children Assurance meeting as appropriate. All Named Safeguarding Professionals in the Provider Trusts were up-to-date with safeguarding children training during 2014/15. More information is contained in the CCG Annual Safeguarding Report²

5.7 Financial arrangements

² Safeguarding Children Annual Report 2014/15, can be found on the [Haringey Clinical Commissioning Group website](#)

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The work of the Board is financed by contributions from partner agencies, of which currently over 80% comes from the council. In addition to financial contributions, partner agencies contribute significant amounts of staff time to support the delivery of the board's work programme, and to support training delivery. Full budget information is contained within *Appendix D*.

5.8 Reports from Sub-groups

5.8.1 Serious Case Review (SCR) Sub-group

Chair: Independent Board Chair

Remit: To consider when to undertake a review on the death of a child where abuse or neglect are factors, or where there are serious concerns regarding inter-agency working where a child suffers potentially life threatening concerns, serious impairment of health or development, and to monitor implementation of action plans.

- 5.8.2 During the year six sub-group meetings were held. Three cases were considered for possible initiation of a SCR. The first case concerned neglect of a severely disabled child, and a multi-agency review was commissioned. The second case concerned the non-accidental injury of a very young child known to agencies, and a single agency review was commissioned. The third concerned the death of a very young child, to be known as *Child R*, an SCR was commissioned in March 2015.
- 5.8.3 Five Panel meetings were held concerning the SCR for *Child O*. This complex case, involving the suicide of a 16 year old girl, involves many agencies, and is expected to report in the autumn of 2015.
- 5.8.4 One final Panel meeting was held in May 2014 for the SCR for *Child D*. Publication was then delayed pending court proceedings, in which the parents were found not guilty of harming their young child. The SCR was published in March 2015. Key areas of weakness identified through the SCR for *Child D* were the following:
- The quality of assessments of need of a mother, and a young child, by health visitors and social workers ;
 - The process of planning for a new placement for children in care, taking account of the needs of the whole family ;
 - The quality of post-natal checks in GP practice ;
 - The importance of taking careful family histories, and understanding better the long-term impact on families of regular exposure to violence ;
 - The need to improve the quality of supervision and management of staff who are dealing with challenging cases.
- 5.8.5 Action had been taken to address all these weaknesses by agencies following this case.
- 5.8.6 A further SCR, joint with the London Borough of Enfield regarding *Child CH*, also had delayed publication because of court proceedings. It was published in May 2015, after the end of the period covered by this report, and related mainly to practice from some years earlier. CH is a young man from a very violent background, who was found guilty of murdering another young man in a street fight. Key areas of weakness identified in this SCR are the following:

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- the failure of **Children's Social Care** at the time to respond to the requests by a social worker and others for intervention with CH and his family;
- the failure of **Children's Social Care** at the time to follow safeguarding procedures and to ensure the safety of CH's nephew, after he was found to have suffered a large number of non-accidental injuries;
- the need to ensure Social Work assessments are used effectively to inform decisive action;
- the apparent normalisation and toleration by agencies of high levels of violence in CH's household, and failure to act on opportunities to remove CH from the household some time prior to Mr Z's death;
- the weaknesses in the processes of transferring case responsibility between the neighbouring boroughs.

5.8.7 Action had been taken to address all these weaknesses.

5.8.8 The group monitors action arising from SCR recommendations and ensures that **learning from SCRs is embedded in the Board's multi-agency training offer**. The sub-group oversaw a major dissemination programme reflecting on the learning from these SCRs, and others, through a well-regarded poster campaign involving all partner agencies and the addition of biannual SCR learning events.

5.8.9 The sub-group also considered the learning from a *Domestic Homicide Review*, and monitored the engagement with an SCR led by another London borough.

5.9 QA & Best Practice Sub-group – *now Practice and Performance Outcomes Sub-group*

Chair: LB Haringey Assistant Director, Quality Assurance, Early Help & Prevention

Remit: To monitor the effectiveness of multi-agency child protection and safeguarding work through data analysis and audit processes. To monitor and scrutinise the effectiveness of local arrangements to safeguard children and, through this, to ensure a demonstrable impact on services.

5.10 The Quality Assurance Subgroup and Best Practice Subgroups merged in January 2015 to form the Practice and Performance Outcomes (PPO) Sub Group, to reflect the broader remit. In 2014-15 both groups had a bimonthly cycle of six meetings per year. In 2015-16 the PPO Subgroup will meet on a quarterly cycle to enable partners to invest time in a meaningful audit process, leading to service improvement on a multi-agency basis.

5.11 Audits

During 2014/15 the group looked at both single agency auditing and a series of themed small scale multi-agency audits. Also during the period the statutory Section 11 audit was overseen by the sub group and included schools for the first time. The findings were presented to the LSCB in March 2015. More detailed information on this can be found in *Section 6*.

5.11.1 Some of the issues considered by the group through auditing were:

- **Supervision** – this is a key feature of a number of Serious Case Reviews and the exercise emphasised the importance of reflective supervision, action, timescales and follow up. CYPS looked at 30 cases over a 12 month period

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and as a consequence reviewed and relaunched its supervision policy which is monitored through the monthly audit process.

- **Supervision Orders** – the review indicated that care plans were not always **visible on children's files**, **internal policies** were not consistently compliant with court orders, and supervision orders had not consistently had multi-agency input. This led to a review of policy, procedures and practice.
- **Family Group Conferencing** - the review led to a CYPS review and consideration of its use as part of the Early Help offer to promote family resilience and self-help.
- **Section 47 & Strategy discussions** – this highlighted concern about a lack of consistency with regard to multi-agency strategy discussions and timescales and the development of the use of conference calling, which the Board continues to pursue.
- **Child Protection Case Conferences – Chairs' summaries** were comprehensive, but lacked some evidence-based analysis that could be incorporated; the voice of the child was sometimes lacking in records; lack of parental input; risk assessments did not sufficiently evidence professional challenge.
- **Female Genital Mutilation** – audit following a challenge raised via Enfield LSCB on number of FGM referrals, leading to the development of and practice at North Middlesex Hospital

5.11.2 During the year, work to develop and agree an integrated multi-agency performance dataset for the Board began with all agencies agreeing to test out and populate a model dataset, with end of year figures for 2014/15 to be used as a baseline. This is being developed and refined into 2015-16 and includes indicators to underpin and monitor the CSE Strategy.

5.11.3 A Task and Finish Group was established reporting into this subgroup and to the CSE Subgroup, chaired by the Borough Commander and focused on Children and Young People Missing from Home, Care and Education. The remit of the group is to **review and understand how partners respond to children 'missing'** and to agree a joint protocol to recommend to the Board. This continues to be a focused priority in 2015-16.

5.11.4 The group is keen to ensure a strong iterative process between performance and practice across the partnership and will be developing and setting out a clear **Performance Framework embedded in the Board's planning cycle**. The group has agreed four priority areas to establish a genuine multi-agency approach to audits in 2015/2016, with a clear process including audit tools and moderation arrangements, to collectively identify issues and learning for all partners. The agreed audit themes for 2015/16 are:

- Quarter 1 Young Peoples Voice
- Quarter 2 Neglect
- Quarter 3 Child Sexual Exploitation
- Quarter 4 **Child's Journey including referrals, MASH & Early Help**

5.12 **Child Death Overview Panel (CDOP)**
Chair: AD Public Health

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***Remit:** To provide a review of all deaths of children who are under 18 and resident in the borough. and use the information gathered to develop interventions and recommendations to improve the health and safety of children in order to prevent future deaths*

- 5.12.1 The Child Death Overview Panel met on three occasions. During this period there were 18 child deaths and seven rapid response meetings (or strategy meetings that encompassed the functions of a rapid response meeting). Three of these meetings related to the same case. Bearing in mind the relatively small numbers involved, any observations must be tentative. The provisional main causes of death during the year broadly mirrored those of previous years with 12 out of 18 deaths being due to congenital anomalies or perinatal events, including prematurity. In one case, a child was hanged and the coroner gave a verdict of accidental death. One six month old child suffered severe head trauma and is the subject of a Serious Case Review. Another case involving the murder of a 10 month old was not felt to qualify for an SCR. Only six of the deaths in 2014-5 have been considered by the panel and closed, so no further conclusions can be drawn.
- 5.12.2 The panel closed a total of 20 cases over this period, of which only six were deaths in 2014-15. The delay was due to waiting for other statutory processes, such as inquests and police investigations, to be completed or to difficulties in obtaining post mortem reports or information from providers, such as discharge reports or Serious Incident reports. The pattern of deaths closed was similar to previous years with 13/20 deaths being due to congenital anomalies or perinatal events, including prematurity. There was also one death by fire and a death by drowning in the bath. Lessons from these had been disseminated to the relevant professionals, before the cases had been formally closed.
- 5.12.3 Over the next year it is planned to review “The Report of the Morecombe Bay Investigation” by Dr Bill Kirkup to see if there are any lessons for CDOP. We also hope to have a discussion with the London Ambulance Service and a presentation from one of the local providers on the Situation Awareness for Everyone (S.A.F.E) programme, a new £500k two year programme to trial care techniques to reduce preventable deaths and errors in England's paediatric departments (www.rcpch.ac.uk/safe).

5.13 Child Sexual Exploitation Sub-group

***Chair:** Designated Nurse, CCG*

***Remit:** To monitor and evaluate the effectiveness of the multi-agency approach to the identification and response to Child Sexual Exploitation in Haringey.*

- 5.13.1 The Child Sexual Exploitation (CSE) Task Group (set up in 2013/14 to review Haringey's guidance on CSE) became the LSCB Vulnerable Children sub-group in April 2014 and reviewed partnership processes in place across a range of areas, including female genital mutilation (FGM), domestic and gender based violence, and missing children.

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- 5.13.2 Between November 2014 and January 2015 a partnership Task and Finish group chaired by the Deputy CEO of the Council oversaw the creation of Haringey's Child Sexual Exploitation strategy and this was ratified by the LSCB in January 2015.
- 5.13.3 The Vulnerable Children subgroup narrowed its remit in December 2014 to focus on Child Sexual Exploitation, including risks to missing/trafficked children and risks of CSE within gangs. The sub-group changed its name to the CSE sub-group to reflect this.
- 5.13.4 Oversight of the partnership response to some other aspects of the Vulnerable **Children's sub-group** - for example FGM and Honour-Based Violence - were transferred to the Violence Against Women and Girls strategic group.
- 5.13.5 The CSE sub-group then developed the action plan of the CSE strategy which will ensure the implementation of the strategy. This action plan was finally ratified by the LSCB in March 2015.
- 5.13.5 The creation of the strategy and action plan has resulted in more clarity regarding roles and responsibilities of partner agencies in prevention of and response to CSE. A decision was taken in February 2015 to use the London CSE Operating Protocol to identify and address CSE, providing a consistent response across the agencies. **Subsequently Haringey's Multi Agency Sexual Exploitation (MASE) and Multi Agency Professionals (MAP) meetings** have been reviewed and revised to develop strategic intelligence and case specific response respectively. Work will continue in 2015/16 to oversee the implementation of the CSE strategy, reporting progress regularly to **Haringey's LSCB**.
- 5.14 Disabled Children Policy & Practice Review Sub-group**
Chair: LA Deputy Head of Service, Special Educational Needs & Disabilities
Remit: To consider the Board's priorities in relation to how disabled children are safeguarded, and consider the specific vulnerabilities of this group of children in different circumstances
- 5.14.1 This group was established in response to previous Government Practice Guidance for Disabled Children, which recommended that the LSCB consider the specific safeguarding needs of disabled children in a multi-agency group. The Board approved the disabled children's **threshold document** in January 2014.
- 5.14.2 **Disabled children's data:** There is a disabled children's data set which is being re-aligned to the new LSCB data set template, to identify trends, gaps and the impact on safeguarding Disabled children.
- 5.14.3 **Review engagement of Disabled children with gangs:** The Integrated Gang Unit (IGU) Manager presented the work of the Unit to the group and work was progressed on considering the prevalence of known gang-associated young people who have statements of SEN and Additional needs.
- 5.14.4 **Disabled children and neglect:** The Rosie 2 neglect programme was presented to the **Disabled Children's group**, providing a multi-agency look at the neglect of Disabled children. Rosie 2 is an e-learning interactive resource that allows

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practitioners to consider and discuss a range of issues related to neglect, including joint working, disguised compliance, aggression, mentalisation and 'invisible' men.

- 5.14.5 **Over-Medication:** The Consultant Psychiatrist outlined an analysis of errors related to CAMHS-LD medication dispensation in the community over the last 3 months. The reason for the presentation was due to the unusual increase in issues not previously seen in 7 years. 5 cases were presented. Guidance for families has been drafted and is currently being written into a more accessible format.
- 5.14.6 **Review of child deaths and learning from legal issues relating to Disabled children nationally:** The group considered the Judgement and the learning from the case of Child AK, who was removed from the hospital in the UK against medical advice and sought medical intervention of Proton B treatment in Spain.
- 5.14.7 **Promoting good practice:** The group has discussed the qualitative impact of the use of multi-disciplinary teams in Special schools in de-escalating issues and to agreeing threshold for referral to social care has been met.
- 5.14.8 **Engaging the voices of Disabled children and Young People:** a joint Special Schools Council has been formed to support young people to present their issues and participate as citizens in their communities. Young Disabled people are now being supported to contribute their issues to the Disabled children's policy and practice review group via the special schools council and children's stories shall be presented to the group. The joint special school council is involved in the LSCB takeover day planned for November 2015.
- 5.14.9 **Curriculum Examples of Safeguarding Disabled Children:** Examples of materials and evidence of good practice regarding curriculum work on safeguarding disabled children was shared at the group from Haringey's Special schools. This material is now available electronically as a library of safeguarding disabled children school resources and is being updated as necessary.
- 5.14.10 **Case Presentation:** The group had a number of multi-agency case presentations regarding the following issues from which lessons were shared:
- CSE and young people with learning difficulties
 - Home educated disabled child
 - Autistic young people who are victims of crime – discussed police process, use of Police Intermediary and ABE process.
 - Deprivation of Liberty – consideration of the recent court judgement for disabled young people.
- 5.14.11 **Disability Hate crime:** The group received an update on the campaign which looks at the recognition and reporting of disability hate crime. There is a concern that incidents are not being reported.

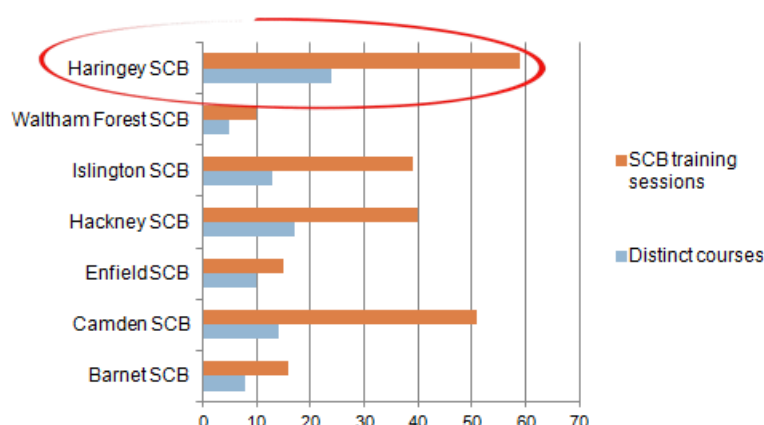
5.15 Training, Learning & Development Sub-group

- 5.15.1 **Haringey SCB's training subgroup is tasked with** addressing the training needs of the partnership and is generally well-attended by most members, who are motivated and reflective partners and are deemed at the appropriate level of responsibility

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within their organisations to make the decisions required by the subgroup. New members invited were representatives from Early Help and Public Health.

5.15.2 **Haringey's** large and complex population and level of need is reflected in the breadth of the Haringey SCB Training Programme. Compared to our six neighbouring boroughs, Haringey SCB delivered a broader and more plentiful training offer in 2014-15. Our offer is increasing whilst at the same time value for money is increasing as the cost of each session decreases.



5.15.3 In 2014-15, the LSCB multi-agency training team delivered 19 distinct training courses over 35 sessions, and 787 training places were offered to workers across the agencies, a similar number to the year before. Mean attendance figures have improved in the past couple of years, making courses increasingly better value for money.

5.15.4 The largest group attending was CYPS (176), followed closely by early years settings (161) and schools (149). We have seen a drop in other agencies' attendance over previous years.

5.15.5 Three 'bite-sized' learning lunches were also offered over the course of the year – open to all.

5.15.6 The LSCB ran an SCR Poster campaign in early 2015. Each poster represents a key lesson from serious case reviews across the country, and was accompanied by an information sheet. The issues covered were:

- Anti-social behaviour
- Mobile families
- Disabled children
- Neglect
- Domestic abuse
- Professional parents
- Information sharing
- English as an additional language
- Voice of the child
- Young people's mental health

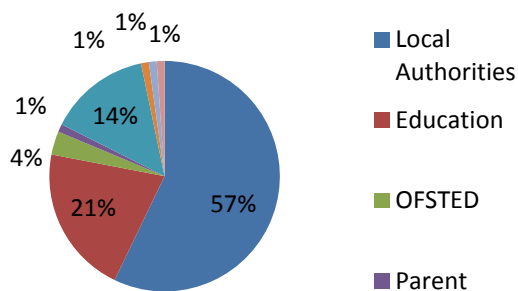
5.16 Local Authority Designated Officer (LADO) Report

5.16.1 The LADO is responsible for the management and oversight of individual cases where allegations and concerns about the abuse and maltreatment of children have been made in respect of individuals working with children in an employed or voluntary capacity within the borough.

5.16.2 In 2014-15 there were 90 referrals to the LADO of which 63 resulted in strategy meetings, meeting the threshold for significant harm.

5.16.3 The LADO referrals for 2014 – 2015 originated from a broad range of partners with the majority coming from the education sector (schools and colleges). This is a trend that is consistent across other local authorities. Education is the biggest employment sector working with children and young people and generally speaking schools and colleges are familiar with the LADO role and function and use the service well. LADO referrals from police and health about their staff are relatively low, although this has increased from last year where there were no referrals about staff from either sector.

Referrals to LADO



5.16.3 Awareness raising continues to be a challenge across the safeguarding partnership, also identified in the **Council's** Ofsted inspection (2014) as an area for improvement. In 2015/16 part of the awareness raising work will aim to increase identification, and improve and streamline the referral pathway, making it easier for partners to know when and how to contact the LADO.

5.16.4 Over half of all strategy meetings were convened to consider allegations of physical abuse by staff. Allegations of sexual abuse and neglect were next frequent. The number of substantiated referrals is significantly lower (6%) than in the previous reporting period where 56% of allegations were substantiated. A qualitative audit of the outcomes from 2014 – 15 has been scheduled to examine the evidence and identify any learning.

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5.16.5 The successful recruitment of a new and experienced permanent LADO and the necessary ground work that was completed in the 2014 – 2015 year means that the resulting 2015 – 2016 LADO programme includes increased activity to raise awareness and promote the visibility of the LADO role and function within all employment sectors.

6 Board effectiveness and challenge

- 6.1 The Board has introduced a new system of annual appraisal of Board members. This provides a mechanism for monitoring the contribution of individuals, and allows for constructive feedback on the way in which the board is operating. Board members consider that it operates effectively overall, and demonstrates improvements in the efficiency and effectiveness of its reports, its meetings and its follow-up on decisions. Some suggestions are being considered for streamlining the work of some groups. We are exploring the potential for combining some of the work of the LSCB with the Safeguarding Adults Board, in order to improve the integration of our safeguarding work across the age ranges, and to increase the effectiveness of our work. We are also seeking to strengthen the quality and range of joint working across borough boundaries.
- 6.2 Board members also report positively upon the impact of the work of the Board on the practice and policies within their own agencies, citing numerous examples within the appraisal process of where policies have been changed and improves as a result of Board discussions. Feedback on the quality and range of the training offered by the Board continues to remain high.
- 6.3 The Chair provides regular challenge to individual agencies: such challenges are often made in accordance with the **Board's agreed approach of identifying and praising positive practice and seeking to avoid publicly "naming and shaming" failures in practice.** Examples of such challenge, include discussions with key partners regarding high levels of interim or temporary staff; discussions with one hospital trust regarding their A&E policy regarding young people; and discussions with some schools regarding the quality of their policies on SRE. On the Health and Well-Being Board, the Chair has played an active role in supporting the Board in challenging NHS England regarding the chronic shortages of primary care access in the poorest part of the Borough. The Chair has also actively engaged in the development of the Health and Well-Being Strategy.
- 6.4 Overall, the Board considers itself to be broadly effective, providing challenge and scrutiny across partners, and actively encouraging partnership working. The Board has more to do to engage the voices of children and young people effectively within its work. It has more to do to improve the collation and analysis of performance data across partners.

7 Quality and Performance

7.1 Our Performance and Practice Outcomes Sub-group takes the lead on our performance, audit and quality assurance work to monitor and scrutinise the effectiveness of multi-agency child protection and safeguarding work across the borough. Our Training, Learning and Development Sub-group works to support practice development and improvement.

7.2 Section 11 Audit

Section 11 (4) of the Children Act 2004 requires each person or body to which the duties apply to have regard to any guidance given to them by the Secretary of State, and places a statutory requirement on organisations and individuals to ensure they have arrangements in place to safeguard and promote the welfare of children.

7.2.1 One way in which the Board discharges this function is by carrying out a Section 11 Audit on a biennial basis. The audit enables the Board to identify gaps, strengths and weaknesses in safeguarding practice as well as identifying areas for improvement.

7.2.2 The audit was sent to a total of 42 agencies /schools across the borough and resulted in 31 returns within the original or revised time-scales. These included 9 (of 9) statutory services, 6 (of 12) secondary schools, 13 (of 15) primary schools, 3 (of 3) special schools and 0 (of 3) **Children's Centres**.

7.2.3 In addition to the 8 standards set out in the statutory guidance and the Safe Network Core Standards produced by the NSPCC, the Board included 5 other strategic priorities in the audit to help it achieve a better understanding of how services were responding. These were:

Working with children and young people affected by gangs

- Child Sexual Exploitation
- Female Genital Mutilation
- Domestic Violence
- Prevention of extremism/radicalisation

7.2.4 The audit provided assurance to the Board that agencies had policies and practices in place in order to keep children and young people safe. Some of the issues identified through the audit:

- Organisational change and budgetary pressures are affecting nearly all statutory agencies and the LSCB needs to be vigilant in seeking assurances from all partner agencies about the robustness of the processes they are putting in place to keep children safe.
- Recruitment and retention of staff remains a challenge in some areas
- Incorporating the views of children and young people into service planning and development needs to be strengthened

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- Access to multi-agency training needs to be simplified
- Schools are confident that they are aware of and discharging their safeguarding duties
- Nearly all schools identified neglect, physical and emotional, as the most pervasive and challenging issue they faced and in light of SCR findings schools are acutely aware of not letting their tolerance levels in relation to neglect drop
- All schools have in place robust systems for monitoring children considered vulnerable/in need and to enable them to spot patterns across the school population.
- Domestic Violence remains a prevalent issue.
- All schools are working hard and creatively to respond to the rapidly changing challenges of social media.
- All secondary and primary schools have developed a range of in house provision - to manage a wide range of issues themselves before requiring additional support.
- A recurring theme was the need to cascade information or training to all staff
- Gang membership/influence was the most prevalent issue already affecting schools either directly or through its impact on younger siblings and families.
- Some schools have had direct experience of CSE and have developed strategies and services to identify and support those who may be vulnerable. All were extremely positive about the increased profile being given to CSE in the borough and saw themselves as playing a key role in the newly adopted LSCB CSE strategy.
- FGM was the issue to which responses by both schools and agencies was most underdeveloped.

7.3 The Board is committed to securing sustained improvement in multi-agency safeguarding performance: it has a key role to play in scrutinising and challenging the performance of all partner agencies in keeping children safe. There is a commitment from across the partnership to fully understand the needs of children in Haringey and to plan in order to meet these needs. During this year the Board started work through a Task & Finish Group of the Quality Assurance Sub-group on developing an integrated multi-agency performance dashboard. The work to refine and finalise the dashboard will continue in 2015-16, building on the learning. The data we can provide for 2014-15 establishes a good baseline and moving forward it is important to the Board to ensure that we are able to make year on year comparisons of safeguarding in Haringey, and aligning with our priorities.

7.4 Haringey Council has focused its [corporate strategy](#) on three overarching outcomes which it works with partners across the borough to achieve. Under Outcome 1 Outstanding for All there are six objectives related directly to the lives of children and young people across the borough including:
All children will be safeguarded from abuse

7.5 Over the period there has been significant transformational work underway and a number of areas reported as performing well across the outcome:

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- 86% of primary and 100% of secondary schools are judged as Good or Outstanding.
- **Attainment at level 3 (A level) continues to rise with 63% of Haringey's 19 year olds achieving a qualification, a 4 percentage point increase from 2013, now in line with the average for London.**
- 665 (78%) of families in phase one of **Haringey's Families First Programme** achieved an improvement in one or more outcome area (crime/anti-social behaviour, education, employment). Haringey has been put forward as early adopters of the expanded programme with 551 families eligible for phase 2 of the programme.
- There were 54 adoptions and special guardianship orders (SGO) in 2014/15 with an increase in special guardianship orders in Quarter 4 bringing the total to 32 for the year. The target was exceeded and permanency was secured for 22% of children that ceased to be looked after.

7.6 Targeted improvement work is underway in the following areas:

- The level of young people who are Not in Education, Employment or Training (NEETs), and young people whose status is Not Known, has been above the London average since the 2014 seasonal summer peak and at 4.5% the proportion of NEETs is higher than our statistical neighbours. **A Young People's Strategy and a set of delivery options is being developed which will address delivery challenges in this area.**
- A programme of work around permanency is underway including the development of a "fostering to adopt" scheme and concurrent planning with family finding methods deployed for children with more challenging needs. **Haringey's current average of 589 days taken for looked after children to be placed for adoption for those children adopted in the period is 102 days above the national threshold of 487 days for 2012/15 but an improvement on the 778 days in 2013/14 and compares favourably with England's three year rolling average of 628 days.**

7.7 *Children in Need of Safeguarding and Support*

Through the year Children's Social Care report an increased pressure across the service with contacts increasing by 21% compared with the previous year, and a significant increase in the number of referrals at 2,262 and consequently assessments at 2,410.

- 7.7.1 Consistent with the picture nationally, the Police were the main source of referrals to CSC in 2014-15, followed by schools and health services respectively. See *Table 1 at Appendix E* for referral sources.
- 7.7.2 Of the 2,410 Child and Family Assessments completed last year, 82% were completed within 45 working days³ against a target of 85%, although an

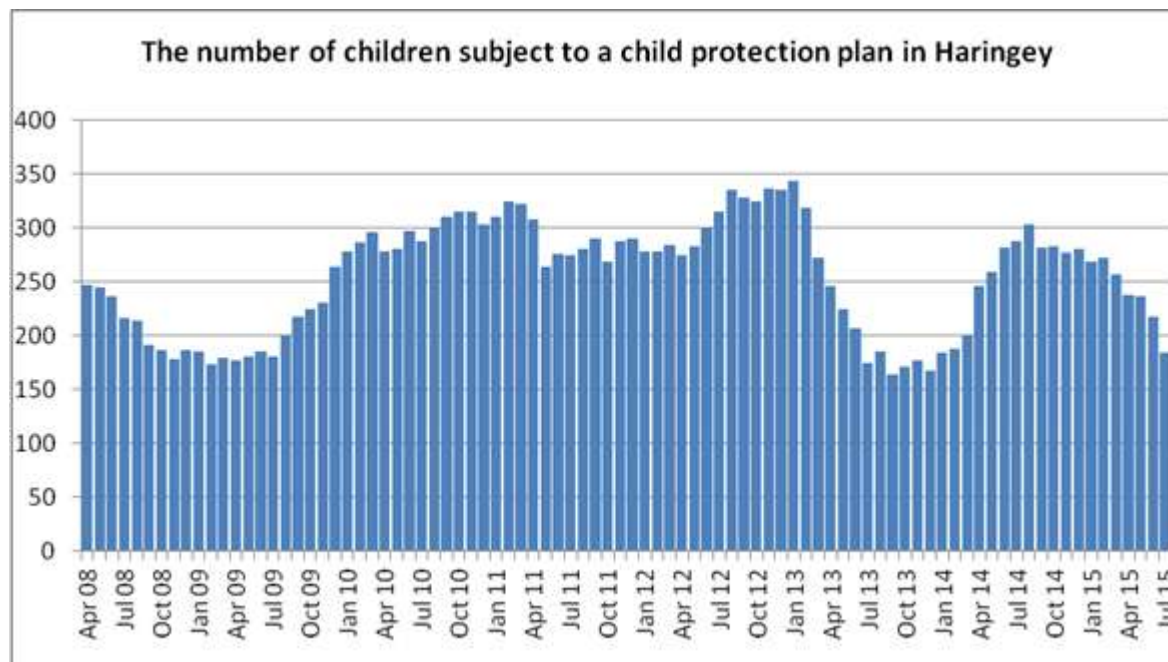
³ Statutory guidance 'Working Together to Safeguard Children' was revised in 2013 giving local authorities more flexibility when assessing children. Previously, local authorities carried out an initial assessment within 10 working days and (where needed) a more in-depth core assessment within 35

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improvement from the 76% achieved last year. Daily reporting to service managers and weekly performance meetings continue to play a role in tracking the timely completion of assessments. The factors identified through assessments are varied in Haringey, the most common being domestic violence, identified in just over a third of cases; the second most common is parental mental health, which was identified in one in ten cases. Abuse or neglect was identified in one in four assessed cases with physical abuse being the most common factor. See Table 2 at *Appendix E* for more information.

- 7.7.3** There were 2,385 Children in Need (CiN) – a significant increase on last year's end of year figure of 1280.
- 7.7.4** The number of children subject to a child protection plan (CPP) in Haringey in March 2015 was 257. This represents a 28% increase in the number of children subject to a child protection plan since March 2014, a rate of 44 per 10,000 children aged 0-17. This is higher than we reported last year (201 or 35 per 10,000) but is now more aligned with our statistical neighbours (257 or 42 per 10,000 in March 2014). In 2014/15 **2%** of all children subject to CPPs (**248**) were children with disabilities. Since 2009 the national trend for CPPs has been upwards but the picture in Haringey has been more variable (*Chart 1*),

Chart 1



- 7.7.5** The reason for some significant increase in the numbers of contacts, referrals, assessments, CP plans and Children in Need is not clear but it does concur with a

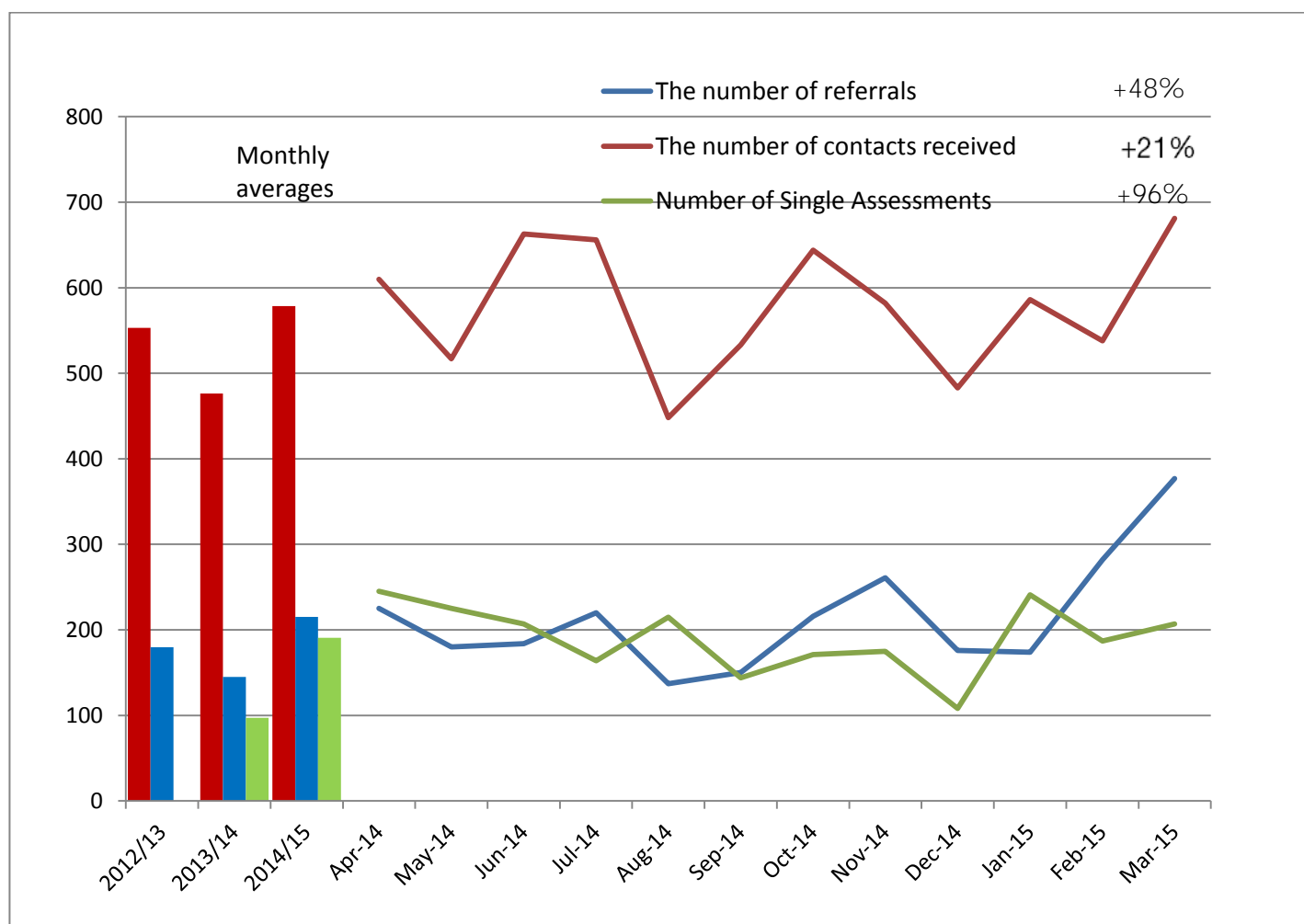
working days. Local authorities now have the flexibility to carry out a single continuous assessment within 45 working days.

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broader national upward trend as reported by the Department for Education⁴. Anecdotally we are aware that an increase in media attention on child protection such as we have seen over this period, can lead to increased referrals. A range of other factors also have an impact, including the quality of referrals, screening and assessment processes and the quality of decisions. One useful measure is that the number of children starting a protection plan as a proportion of referrals has remained around 8% or 9% for the last four years. Through 2015/16 arrangements for single point of contact, referrals, screening and assessment are being strengthened and re-launched, including the Multi-Agency Safeguarding Hub (MASH); and its governance through the Board.

Table 2

Change in contacts, referrals and assessments in Children's Social Care since 2013/14



⁴ <https://www.gov.uk/government/statistics/characteristics-of-children-in-need-2013-to-2014>

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- 7.7.6 Haringey has set a minimum requirement of home visits to children subject to child protection plans of every four weeks⁵. In 2014/15 84% of children were visited within this timeframe, down on the reported 95% last year. This is a matter of concern as it suggests that children at risk are not being seen in a timely way. Weekly monitoring highlights children with outstanding visits and there is a focus on proper recording. Visits to Children in Need at 73% are also below levels achieved in 2013/14 (93%)
- 7.7.7 21.5% (84) of children were subject to a child protection plan for a second or subsequent time, an increase from the 12.5% in 2013/14 and above target and statistical neighbour average of 14%. High levels of subsequent plans may suggest **that the professionals responsible for the child's welfare are not intervening effectively either to bring about the required changes in the child's family situation, or to make alternative plans for the child's long term care.** A quality assurance review of all cases which have ceased to be subject to plan was scheduled for early May and will report on the impact and outcome for these children.

7.8 *Looked After Children*

451 children were in care on the last day of March 2015 or 77 per 10,000 population, including 29 unaccompanied asylum seeker children. This equates to a 10.6% reduction since March 2014, and although this closes the gap with our statistical neighbour rate (70), Haringey remains above the national average rate of 60 per 10,000 population.

- 7.8.1 Indicators around stability of placements for looked after children remain in line with statistical neighbours and targets. In 2014/15 7.5% of children had three or more placement moves; 77 children or 18% were placed 20 miles or more from Haringey at the end of March 2015, slightly more than the 16% target but on an improving trajectory.
- 7.8.2 In 2014/15, 92% (326 out of 355 children) of LAC children had an up to date health assessment, an improvement from the 88% reported last year, now in line with the 2013/14 London average and above the England position of 88%.
- 7.8.2 91% of LAC children had an up to date dental visit as at 31 March 2015, a significant improvement from the 71% achieved the previous year and exceeding the 2013/14 London average of 88% and national position of 84%.
- 7.8.3 78% of Children in Care visits were recorded as completed in the relevant timescales in this period, May. Performance in this area has dipped from levels of 95% achieved in previous years however it is reported that this is predominantly a system recording issue and that visits are happening in a timely way.

⁵ The London Child Protection Procedures target for minimum standards on home visiting of children with a Child Protection Plan is 6 weekly

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- 7.8.4 Performance on care leavers in suitable accommodation and in education, employment and training is below levels achieved last year albeit that the variation between Haringey and published national performance levels for 2013/14 in these areas is not significant. However benchmarking data around care leavers in **education, employment and training shows that Haringey's position of 40% is below average for London in 2014/15 (57%).**
- 7.8.5 **Haringey's performance for care leavers aged 19-21** in higher education (16%) compares very favourably with the national position of 6%. An action plan to prioritise completion of Personal Education Plans (PEPs) is being implemented in 2015/16 and early signs are that this is improving results.
- 7.8.6 Up to date Care Planning remains a challenge with staffing pressures having an impact on both the consistency and timely completion of plans.
- 7.8.7 The average care proceedings duration in 2014/15 was 34 weeks (including cases commenced in 2013/14) significantly longer than the statutory 26 weeks time allowance for and higher than the latest national comparator data which shows an average case duration of 30 weeks.
- 7.8.7 8.4% of looked after children (aged 10 and over) were convicted or subject to a final warning during the year 2014/15, a small increase on our 2013/14 figure and higher than the latest published England average rate of 5.6%.
- 7.8.8 The proportion of looked after children placed 20 miles or more from Haringey reduced to 77 children or 18% in Quarter 4. Some of this improvement is attributable to an increase in carers in the borough and the introduction of an Edge of Care panel to review all placements for children coming into care but some will be as a result of the overall reduction in the number of looked after children.
- 7.8.9 CSC report that a review of Looked After Children is underway to reshape the current approach to placements, sufficiency and to look at current policy and how this might be improved to better meet the needs of our young people.
- 7.9 Private Fostering**
During 2014-15 there were 13 new referrals to social care for potential private fostering arrangements. This is slightly above the England average of 12 (2011-12). 12 cases have closed since April 2014
- 7.9.1 As at the end of March 2015, there are 14 children and young people open to the private fostering team.
- 7.9.2 A private fostering arrangement is one that is made privately for the care of a child under the age of 16 (or under 18 if disabled) by someone other than a parent or close relative with the intention that it should last for 28 days or more. Private foster carers may be from the extended family, such as a cousin or great aunt; a friend of the family, the parent of a friend of the child, or someone previously unknown to the **child's family who is willing to privately foster a child.**

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- 7.9.3 There are an estimated 10,000 children living in private fostering arrangements in England and Wales, but last year only just over 3,250 were reported as being cared for and accommodated in private fostering arrangements to local authorities⁶. While most of these children will be safe, others may be at risk of abuse and neglect at the hands of their private foster carers. (www.privatefostering.org.uk).

7.10 Missing Children and Young People

In 2014/15 Children's Social Care reported 47 looked after children going missing (95 episodes), an increase from 36 children reported the previous year. The cases of any missing children in care, or absent without authority, are reviewed on a weekly basis by the lead member.

- 7.10.1 During 2014-15, police data reports 582 episodes of children reported missing from home.
- 7.10.2 A key indicator for safeguarding is school attendance and the LSCB seeks to have oversight of the degree of absenteeism and missing from school referrals. Absence data is owned by schools, and school data is received via 3 yearly census returns. Full year attendance data is available in late autumn. We reported last year that average attendance at **Haringey's schools compared** well with the national average; **persistent absence in Haringey's primary schools** was higher (3.2%, compared with the national average of 2.7%); whilst in **Haringey's secondary schools** it was lower (5.2% compared with the national average of 6.5%). There were 512 missing from school referrals in 2014/15 including: 151 recorded missing from school; 150 poor school attendance referrals and 212 with no identified school place
- 7.10.3 There remain some issues around reconciling data between CSC and the police which are being looked at. A task and finish group is working on bringing together multi-agency datasets on children missing from home, care and education for matching and learning so that analysis and activity can be reported to the LSCB. A Haringey Runaway & Missing from Home & Care Protocol is being agreed by all agencies and this will strengthen our approach to supporting children who run away or go missing in the area.
- ### 7.11 Child Sexual Exploitation
- In 2014-15 a total of 72 CSE referrals had been received **by Children's Social Care**; of these, 36 young people had been considered at MASE Meetings throughout the year. One was considered to be Category 3 – habitually subject to sexual exploitation, and 9 were considered to be in category 2 – being targeted for CSE. As noted previously, the profile of these young people suggests the activity has been

⁶ <https://www.gov.uk/government/statistics/notifications-of-private-fostering-arrangements-in-england-2015>

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largely gang-related, with the victims and the alleged perpetrators coming from mixed backgrounds.

7.12 Female Genital Mutilation (FGM)

Within Haringey, it is estimated that 2,772 girls have been born to women from countries where FGM is habitual between 2005 and 2013; of these, it is estimated that 1,187 were born to women with FGM, a rate of 6% of all girl births. Haringey is one of the boroughs with the highest perceived risk of FGM being administered to girls.

7.13 Gangs

Within the 11 active gangs operating within Haringey, there are an estimated 116 gang members; the very large majority of these are aged over 17

8 How safe are children & young people here?

What can be said in summary about how safe children and young people are in Haringey?

- 8.1 It is never possible to say categorically that all children are safe. External inspections suggest that our services across Haringey are at least as good as in most areas, not insignificant considering the very high rates of deprivation in parts of Haringey. Haringey is a complex urban authority, facing reductions in budgets in all its public services, and enduring much higher than average effects of the cuts in welfare benefits. The population within Haringey is under severe pressure.
- 8.2 We can be reassured that the quality of schools and education in Haringey is largely very high, and this provides a significant source of protection to children and young people. Some public health indicators – such as the comparatively low number of children attending hospital following accidents, give further assurance, though the data for obesity and teenage pregnancy continue to give concern.
- 8.3 The last year has seen a significant increase in the number of referrals to Children's Social Care, increases in the numbers of Children in Need, and increases in the number of children on Child Protection Plans (CPPs). Some of these rises are in line with national data, but we need to be vigilant to see whether services can respond effectively to this increase in demand. We have seen a reduction in the number of children on CPPs who receive the required regular visits, for example. Outcomes for children in care continue to be broadly satisfactory, though we have seen a reduction in some positive indicators.
- 8.4 We have improved the way in which we collectively tackle some of the biggest risks to children and young people, such as Child Sexual Exploitation and Gang membership and established the necessary focus on Children who Run Away or Go Missing from Home, Care and Education.
- 8.5 The Council and partners have invested in expanding Early Help services, to seek to meet the needs of children and families earlier. So far this process appears to be working well, though it will be vital that partners remain alert to services continue to respond more intensely where required.
- 8.6 **2015-16 heralds many changes in safeguarding regarding Haringey's approach and response to safeguarding concerns: changes to the Early Help offer, the new Thresholds will be embedded in practice, MASH is being reviewed, the new 'front door' to children's social care will be launched, 'Signs of Safety' will be adopted by children's social care, impacting assessment and conferencing, and this will need to be understood by the partnership's frontline services**
- 8.7 Our partnership is strong, but the challenges ahead require us to shift up another gear in our partnership working in the years ahead.

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Appendix A : Role, scope and function of the LSCB

The LSCB is the statutory body for agreeing how the relevant organisations will co-operate to safeguard and promote the welfare of children in the London Borough of Haringey.

The objectives of the Board 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;
- to ensure the effectiveness of what is done by each such person or body for that purpose.

Scope

The scope of the LSCB role falls into three categories:

1. to engage in activities that safeguard all children, aim to identify and prevent abuse, and ensure that children grow up in circumstances consistent with safe care;
2. to lead and co-ordinate pro-active work that aims to target particular groups;
3. to lead and co-ordinate responsive work to protect children who are suffering or likely to suffer significant harm.

Function

Regulation 5 of the Local Safeguarding Children Boards Regulations 2006 sets out the functions of the LSCB:

1(a) developing policies and procedures for safeguarding and promoting the welfare of children in the area of the authority, including policies and procedures in relation to:

- the action to be taken where there are concerns about a child's safety or welfare, including thresholds for intervention;
- training of persons who work with children or in services affecting the safety and welfare of children;
- recruitment and supervision of persons who work with children;
- investigation of allegations concerning persons who work with children;
- safety and welfare of children who are privately fostered;
- cooperation with neighbouring children's services authorities and their Board partners;
- communicating to persons and bodies in the area of the authority the need to safeguard and promote the welfare of children, raising their awareness of how this can best be done and encouraging them to do so;
- monitoring and evaluating the effectiveness of what is done by the authority and their Board partners individually and collectively to safeguard and promote the welfare of children and advising them on ways to improve;
- participating in the planning of services for children in the area of the authority; and
- undertaking reviews of serious cases and advising the authority and their Board partners on lessons to be learned

Appendix B: *Haringey Local Safeguarding Children Board Priorities and Business Plan 2014– 2016*

This business plan outlines the agreed priorities and actions to be undertaken by the Board and its partners to deliver this **year's** safeguarding priorities. The actions also take into account areas of improvement as identified in the May 2014 Ofsted review of the LSCB.

Priority High (H) Medium (M) Low (L)

Red (R)Action not started or behind schedule; Amber (A) Action in hand; Green (G) Action completed

❖		❖ PRIORITY ONE Gangs ❖ a) Strengthening the connections between work around missing children, CSE and gangs, b) supporting and monitoring the development of a multi-agency response, and c) assessing the effectiveness of early intervention in reducing gang membership					
P1	Action	Lead group/person	By When	Evidence required	Progress/last updated	priority	RAG
1	Review the current range of multi-agency groups working with highly vulnerable groups of young people (gangs, CSE, missing children, violence against women & girls, etc) & recommend (if appropriate) more functional & proportionate systems	CSE sub group	March 2015	Work plans of existing groups Statistical information from multi-agency partners Risk assessments	The CSE Sub-group is now overseeing this work and has a clear governance and accountability structure and agreed strategy, which includes connections and routes into the VAWG, Gang Action Group Strategy and oversight of our work on Missing Children & Young People. The workflow into MASE and MASH is developing. There is a clear action plan and agreed	H	Green

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	<p>OFSTED 2 - Review Haringey's CSE multi-agency guidance and consider whether the involvement or association with gangs by young women should be included as a risk factor to strengthen arrangements to provide a coordinated response to this vulnerable group of young people.</p>		Sep 14		<p>accountabilities and reporting into the Board.</p> <p>Completed.</p>		
2	<p>Complete Missing Children strategy, emphasising the links to gangs</p>	Vulnerable Children's Group	<p>March 2015</p> <p>Date revised to July 2015</p>	All agency local strategies to inform the multi-agency oversight by the LSCB	<p>Missing Children Task & Finish Group is reporting in July 2015 and work is still to be done to develop the statutory Protocol.</p>	H	Amber
	<p>OFSTED 4 - Ensure that the Board receives an annual report on children missing from home, missing from care and missing from</p>		Nov 2014		<p>Narrative included in LSCB Annual Report published Dec 2014. Work is underway with the T&F Group around reporting and</p>		

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	education to assure itself that appropriate processes and practice are in place to safeguard this vulnerable group of children and young people. Strengthen the existing Board's annual report arrangements to include an evaluation of service responses for missing children, to support multi-agency actions and reduce risks posed to children				data and it is hoped that this will be available for the Annual Report 2014/15		
3	Complete and implement CSE strategy OFSTED 3 - Accelerate plans to formally agree the draft CSE strategy and ensure it is clearly linked to the gang action plan. Make clear how the strategy will link to front-line practice, and what success criteria will be used to measure and evaluate progress.	CSE Sub Group	December 2014	Clear evidence of multi-agency systems	Strategy approved and being implemented via the CSE Sub-group	H	Green
4	Review engagement of disabled children with gangs	Disabled children policy and review group	March 2015	The LSCB will have the findings of the review presented to the LSCB board and the Chair or representative will discuss	The Disabled Children's Sub-group undertook the review with the Gang Action Group and reported to	M	Green

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				findings with appropriate strategic leads to assure that the needs of disabled children affected by gangs is appropriate responded to.	the Board in May - the findings to be fed into the Gang Action Group Strategy in June. Five key areas were requested to be looked at in more detail for a further report to the Board in autumn 2015 <i>Check progress</i>		
5	Review relevant performance data and information-sharing systems	Quality Assurance Sub group	March 2015	The LSCB performance management report. This will incorporate the findings of this review.	Model dataset is still being worked on with a need to iron out some particular issues for individual agencies. The end of year data will be included in the Annual Report 14/15	M	Amber
6	Review the impact of the Early Help offer on future gangs engagement	Vulnerable Children's group / Best practice group	March 2015 <i>Date revised to November 2015</i>	The findings will be presented to the LSCB and included in the annual report 14/15.	This action is being looked at within the process of monitoring the Early Help Strategy and the Board manager is discussing with GaG lead about the best way to take forward and will report back in November	M	Amber

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					2015		
7	Make this a feature of our Section 11 review	Quality Assurance group	December 2014	The S11 audit will have gangs as a themed area to assess agency's safeguarding arrangements.	S11 Audit was completed and presented to the Board in March 2015 with questions regarding this priority summarised in the report. This will be ongoing moving forward		Green
❖	❖ PRIORITY TWO - Early Help ❖ Scrutinise the move towards strengthening early help offer across Haringey, seeking assurance on the common understanding of definitions, on the impact on child protection services, and on appropriate multi-agency engagement. ❖ The role of the LSCB in relation to the Early Help offer is to seek assurance that the introduction of the Early Help Offer does not inadvertently introduce new safeguarding risks.						
P2	Action	Lead group/person	By When	Evidence required	Progress/last updated		RAG
1	Consider the draft Early Help Strategy with particular focus on the safeguarding aspects of the strategy	LSCB Chair	November board meeting	The draft report	Happened at Board in November 2014 and is coming back to Board in July 2015	M	GREEN
2	Request reports to the full Board initially every 6 months from the Early	LSCB Chair	First report to our May 2015 Board.	report	On track. First monitoring report due to board in July 2015.	L	Amber

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	Help Partnership Board, specifically seeking to answer the question as to whether the processes of step up and down are being undertaken safely and appropriately				Specific issue relating to step down processes included within audit programme.		
3	Review the training the LSCB currently undertakes, in order to consider whether any adjustments are required in the light of the changes.	LSCB Training Officer	May 15 following first report		New Head of Early Help, Gareth Morgan is now a member of Training, Learning & Development Sub-group and the work is being progressed to ensure our courses reflect the EH offer. Meeting in June considered working together on a series of events.	L	Amber
4	Make this a feature of our Section 11 review	Quality Assurance Group	December 2014	The S11 audit will have early help as a themed area to assess agencies safeguarding arrangements.	S11 Audit was completed and presented to the Board in March 2015 with questions regarding this priority summarised in the report. This will be ongoing moving	M	Amber

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					forward		
❖	❖ PRIORITY THREE – Neglect ❖ Improving effectiveness of all agencies in recognising and responding to neglect						
P3	Action	Lead group/person	By When	Evidence			
1	Sign off Neglect Strategy	Performance & Best Practice Sub-group	July 2014	The development and monitoring of the neglect strategy will be included in the work plan of the Performance and Practice Outcomes Sub-group.	This action was amended; the key element of the strategy was agreed to be the revised process of compiling chronologies which has now moved through to the MASH Board. Reference to strategy needs to be reviewed fully by the Board		Green
2	Finalise delivery of the strategy	Performance & Best Practice Sub-group	November		Neglect issue on agenda for September 2015 LSCB and agreed use of chronologies	M	Amber
3	Oversee delivery of Neglect Strategy	Performance & Best Practice Sub-group	March 2016		Check in March 2016	L	Amber
4	Make this a feature of our Section 11 review	Quality Assurance Group	December 2014	The S11 audit will have neglect as a themed	S11 Audit was completed and presented to the	M	Amber

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				area to assess agencies safeguarding arrangements.	Board in March 2015 with questions regarding this priority summarised in the report. This will be ongoing moving forward		
❖	❖ PRIORITY FOUR - Promoting good practice ❖ Shift the overall balance of our activities more towards identifying and promoting elements of good practice.						
P4	Action	Lead group/person	By When	Evidence			
1	Create an annual Good practice in Safeguarding Award – perhaps as part of a wider Haringey Awards scheme; invite nominations for examples of effective multi-agency practice, create positive publicity around the awards	Chair/Board Manager	October 2015	The LSCB will include the details of the award winners in their 2015/16 annual report.	Issues reviewed at the September 2014 best practice sub group and some criteria discussed. BM is pursuing funding options	L	Amber
2	Develop a programme for disseminating examples of good practice in safeguarding through existing agency newsletters. Have regular slots in agency e-bulletins (for example, HAVCO's e-bulletin,	Chair/Training Officer	November 2014	Local and national safeguarding news will be available to all partners via the LSCB and their internal communications.	Three examples of good practice went into the Jan/Feb 2015 newsletter and next steps are to interview teams/individuals and include in the next newsletter. As of 18 March three responses	L	Amber

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	CCG newsletter etc).				have been received for nominations but Training Officer feels that the approach needs to be reviewed		
3	Design and deliver at least one specific campaign, in partnership with local agencies. These will include SCR learning, FGM in schools and the community, promoting positive parenting and involving children and young people.	Chair/Board Manager/Training Officer	July 2015	The LSCB will have agreed a one year campaign programme – first to run Jan/April 15 on learning from SCRs.	SCR poster campaign was welcomed across the partnership. CSE Safeguarding Campaign throughout March and beyond including learning lunches. Full programme not yet agreed but should include the views and ideas of children and young people.	L	Amber
4	Review and update branding of LSCB.	Chair/Board Manager	March 2015	The LSCB will re-launch its vision for safeguarding children in Haringey.	Work started on this with website refresh but needs development.	L	Amber
5	Develop a new vision for LSCB and 3-5 year	Chair/Board	July 2015	Partners and the public will be	This is an ambitious action and will be	L	Amber

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	strategy			clear of the LSCB's ambitions for ensuring safeguarding arrangements in the borough	considered in light of the Board Development Day		
6	Explore potential for "Community Champions" – a proposal from the voluntary sector to actively engage local people in specific safeguarding activities.	Chair/Board Manager	September 2015	The children and adults safeguarding boards with the third sector will discuss the viability of this proposal.	Increased synergy between the boards in the process of being formalised and will address this point in due course. A new SAB Chair is coming in to role in July	L	Amber
7	OFSTED 1- Ensure that schools are fully involved at Board level so that their representations are known, understood and considered and their contribution fully harnessed to influence the shape of services.	Chair/Board Manager	March 2015	The board will be able to evidence clear dialogue and influence from schools on the safeguarding agenda which will be outlined in the annual report.	Primary and Secondary HT now members of the Board and attending. PE has addressed Primary and Secondary HT meetings. Key is how to formalise the wider engagement and also how to account for school contribution to the LSCB budget including private providers	M	Amber

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❖ PRIORITY FIVE - Engaging the voices of children and young people ❖ Identify an effective and proportionate way of tapping into the already available views of children and young people, to inform the work of the LSCB							
P5	Action	Lead group/person	By When	Evidence			
1	Explore potential for focus groups of young people to discuss particular issues based around our priorities	Chair/Board Manager	March 2015	Engagement of young people and participation team	Work is now in place to develop this priority and increased focus will be given to this by the Business Manager to make the existing activity more meaningful. There is progress in relation to the Special School Council communication through the Disabled Children's Sub-group which could provide a good model	H	Amber
2	Explore possible ways of engaging with "Takeover Day" in November.	Chair/Board Manager	November 2014	The LSCB will have engaged young people in new creative ways.	Delayed due to staffing issues but now being picked up by the Training sub group with a delivery date scheduled for November 2015	M	Amber

Appendix C: Haringey LSCB Members attendance 2014-15

- representative attended on behalf of the member
- * post name changed

Organisation	Job Title	Date of Meetings						No: of meetings member attended/was represented
		28 May 14	16 July 14	30 Sept 14	Nov 14	28 Jan 15	25 March 15	
Independent	Chair	✓	✓	✓	✓	✓	✓	6 / 6
Independent	Lay Member	✓	✓	-	✓	✓	-	5/6
CAFCASS	Senior Service Manager	-	✓	-	-	-	✓	2/6
Local Authority	Deputy CEO	✓	-	✓	-	✓	✓	4/6
	Director of Children's Services, Safeguarding	✓	✓	•	✓	✓	✓	6/6
	*Assistant Director, QA & Safeguarding	✓	-	✓	✓	✓	-	5/6
	Deputy Head of Service, Special Educational Needs and Disabilities	✓	✓	✓	✓	✓	✓	6/6
	Executive Nurse & Director of Quality and integrated governance (NHS Haringey CCG)	•	-	-	-	✓	-	2/6
Health	Assistant Director for Safeguarding & Designated Nurse for CP (NHS Haringey CCG)	•	✓	-	✓	✓	✓	5/6
	Consultant Paediatrician, Designated Doctor (Haringey CCG)	✓	✓	•	•	✓	✓	6/6
	Named GP NHS England London	✓	✓	-	✓	✓	✓	5/6
	Director of Nursing NHS England London)	✓	✓	-	-	-	-	2/6
	Deputy Director of Nursing (NMUH)	•	•	-	✓	-	-	3/6
	*Assistant Director, Universal and Safeguarding Children's Services (Whittington)		-	✓	✓	✓	✓	4/6
	Director of Nursing & Exec Lead for Safeguarding Children (CAMHS- BEH-MHS))	•	•	✓	-	-	•	4/6
	Named Doctor for Child Protection (BEH-MHS)	-	-	✓	-	-	•	2/6
Local Authority	Drug and Alcohol Partnership Manager							
Public Health	Assistant Director	-	✓	✓	•	-	✓	4/6



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Housing	Head of Housing Support and Options	✓	✓	-	✓	✓	-	4/6
Legal Services	Assistant Head of Legal Services: Social Care)	✓	✓	✓	✓	✓	✓	6/6
Police	Borough Commander	✓	✓	-	✓	✓	●	6/6
	DI, CAIT	●	✓	✓	✓	✓	✓	6/6
	DCI, CAIT	✓	✓	✓	●	✓	●	6/6
Probation	ACO (Haringey Probation Service)	-	✓	✓	-	✓	●	4/6
	ACO (Probation Community Rehabilitation Company)	-	✓	✓	●	-	✓	4/6
Voluntary	HAVCO					✓	✓	2/2
Lead Member	Councillor	✓	✓	✓	✓	✓	-	5/6
Primary School	Head Teacher	-	✓	-	✓	✓	✓	4/6
Secondary School	Head Teacher	-	-	-	✓	-	-	1/6
London Ambulance Service	Ambulance Operations Manager	✓	●	-	✓	-	-	3/6
Adults Safeguarding	*Strategic Lead, Governance & Business Improvement Servs	-	✓	●	✓	✓	-	4/6
YOS	YOS Interim Head of Service	✓	✓	✓	-	✓	-	4/6
LSCB	LSCB Business Manager	✓	✓	✓	✓	✓	✓	6/6

Appendix D: Haringey Safeguarding Children Board Budget 2014-15

HARINGEY LSCB POOLED BUDGET 2014 - 15	
Contributing Agency	Amount
Metropolitan Police	£5,000.00
Haringey Council, CYPS	£151,100.00
Cafcass	£550.00
Probation	£2,000.00
Tottenham Hotspur FC	£2,000.00
North Middlesex Hospital	£5,000.00
Whittington Health	£5,000.00
Barnet, Enfield & Haringey MHT	£5,000.00
Haringey CCG	£5,000.00
Sub Total	£180,650.00
Budget carry forward 2013 – 14	£37,000.00
Enfield LSCB (SCR CH)	£11,785.15
Grand Total	£229,435.15

2.2 The budget commitments for 2014 – 15 are outlined below:

Item	Budget allocation	Variance
Salaries	£172,200	£14,350
Training	£11,300	£942
Hire of premises	£8,600	£717
Travel	£1,400	£117
Catering	£2,200	£183
Stationery	£9,200	£767
Consultant fees	£39,900	£3,325
Project management	£20,800	£1,733
Staff subsistence	£800	£67
Total	£227,100	£18,925

Appendix E: Referrals to Children's Social Care

Table 1

Source of Referral to Children's Social Care	Number of Referrals
Individual – family member/relative/carer	40
Individual – acquaintance	17
Individual – self	76
Individual – other	9
Schools	385
Education services	0
Health services - GP	50
Health services – health visitor	56
Health services – school nurse	6
Health services – other primary health services	234
Health services – A&E	53
Health services – other	0
Housing	20
LA services – social care	13
LA services – other internal	130
LA services – external	172
Police	735
Other legal agency	60
Other	140
Anonymous	21
Unknown	45
Total number of referrals	2262

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Table 2

Factors Identified at the end of Children's Social Care Assessment	Number of Completed Assessments
Alcohol misuse: child	0
Alcohol misuse: parent/carer	23
Alcohol misuse: another person	14
Drug misuse: child	12
Drug misuse: parent/carer	42
Drug misuse: another person	10
Domestic violence: child subject	81
Domestic violence: parent/carer subject	457
Domestic violence: another person subject	126
Mental health: child	36
Mental health: parent/carer	239
Mental health: another person	39
Learning disability: child	71
Learning disability: parent/carer	24
Learning disability: another person	6
Physical disability or illness: child	49
Physical disability or illness: parent/carer	48
Physical disability or illness: another person	10
Young carer	14
Privately fostered	13
Unaccompanied Asylum Seeking Child	16
Missing	44
Child Sexual Exploitation	18
Trafficking	5
Gangs	17
Socially unacceptable behaviour	41
Self-harm	10
Abuse or neglect - neglect	133
Abuse or neglect - emotional abuse	108
Abuse or neglect - physical abuse	273
Abuse or neglect - sexual abuse	66
Other	289
No factors identified	88
Total number of completed assessments	2410