

2017-19

Annual Report of the Effectiveness of Safeguarding Children in Southend



September 2017 to March 2019

Annual Report on the Effectiveness of Safeguarding Children in Southend

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Section 1: Introduction

1.1 Foreword by Independent Chair, Liz Chidgey

I'm pleased to introduce the 18/19 LSCB and SAB annual reports. Safeguarding Children and Young People (CYP) and Vulnerable adults remains a key priority for all the agencies across Southend with a gradual focus on moving from a process driven approach to identifying, with the people of Southend, the safeguarding outcomes we all want to achieve.

The 2050 visioning led by Southend Borough Council in 2018, involved a comprehensive engagement exercise with a wide diverse group of the population. What the people of Southend said they wanted under the heading 'Safe and Well' was for everyone to feel safe at all times of the day. In terms of active participation 'Active and Involved ' the said that, when people speak they wanted to be heard and taken seriously, they also want to be involved in developments from the beginning so that together everyone who wants to be can be involved to make the future happen. People also saw the need to be connected and SMART with technology and digital developments ensuring connectivity and inclusion.

These desired outcomes provide a basis for future partnership working regarding Safeguarding. The requirement to put in place new arrangements for a multi-agency safeguarding approach in 19/20 gives an opportunity to review and revise both the Children's (LSCB) and Adult's (SAB) Safeguarding Boards, building on the developments we have put in place 2018/9.

This year saw the delivery of a Joint Targetted Area Inspection that highlighted a number areas of strength and improvement; an action plan was produced to meet all the areas identified as requiring improvement and delivery is progressing as planned. We have also agreed a shared outcome on Violence and Vulnerability across Boards, Community Safety Partnership and Health and Well-being Boards. The Chairs of all the Boards meet on a quarterly basis to monitor progress and discuss next steps.

The safeguarding partners approach to design and production of new arrangements must have the participation and voice of Children and Young People and vulnerable Adults at the core as well as the key organisations. This will facilitate authentic partnership arrangements that have aligned road maps and outcomes instead of strategic plans and business plans that sit in splendid isolation.

The challenge for 19/20 is to make these changes happen.

2018/19 has seen the partnerships for both LSCB and SAB remain strong and engaged. It has also been a year of change for the resources available to progress the work of both Boards. For the first time since my appointment in 2017, we now have two experienced Boards managers in post. Since their commencement in September 2018 they have positively impacted on the capability and capacity of both Boards to deliver against the agreed strategy and plans.

I remain excited by the challenges ahead of both Boards as I do believe, with the right focus, we have an opportunity to contribute to ensuring better outcomes on Safeguarding for the population of Southend

1.2 Introduction

This annual report is for the period 30th September 2017 to 31st March 2019 and is produced as part of the Board's statutory duty of Local Safeguarding Children Boards under the Children Act 2004. The report covers more than a calendar year in order that the timing of the report better fits the reporting mechanisms of partners. It is one of the three core statutory duties of the Chair of the Board to publish an Annual Report in relation to the preceding financial year, on the effectiveness of safeguarding in the local area.

This Annual Report gives details of progress on our priorities and Strategic Plan 2016-2019; and provides an overview of LSCB activities and achievements during 2017–2019 summarising the effectiveness of safeguarding activity in Southend including the work of member agencies.

The report will be submitted to the Local Authority Chief Executive, Leader of the Council, Essex Police, the Chair of Southend Health and Wellbeing Board and Southend Health watch.

More information about the statutory role and function of the Safeguarding Children Board can be found at https://www.safeguardingsouthend.co.uk/Children/

1.3 Role of the Southend Safeguarding Children Board

The Southend Safeguarding Children Board is a statutory body created under the Children Act 2004. Section 14 of the Children Act 2004 which sets out to:

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

Vision

The Safeguarding Children Board (LSCB) aims to ensure its members work together effectively to:

- Keep children safe from maltreatment, neglect, violence and sexual exploitation
- Ensure they are secure, stable and cared for
- Help reduce the likelihood of them suffering from accidental death and injury, bullying and discrimination, crime, and anti-social behaviour

Statutory Duties

Regulation 5 of the Local Safeguarding Children Boards Regulations 2006 sets out that the functions of the LSCB, in relation to the above objectives are as follows:

- 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;

- ii. training of persons who work with children or in services affecting the safety and welfare of children:
- iii. recruitment and supervision of persons who work with children;
- iv. (iv) Investigation of allegations concerning persons who work with children;
- v. safety and welfare of children who are privately fostered;
- vi. (vi) Cooperation with neighboring 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;
- c. 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;
- d. Participating in the planning of services for children in the area of the authority; and
- e. Undertaking reviews of serious cases and advising the authority and their Board partners on lessons to be learned.

An LSCB may also engage in any other activity that facilitates, or is conducive to, the achievement of its objectives.

In order to fulfil its statutory functions an LSCB should:

- assess the effectiveness of the help being provided to children and families, including early help;
- assess whether LSCB partners are fulfilling their statutory obligations
- quality assure practice, including through joint audits of case files involving practitioners and identifying lessons to be learned; and
- Monitor and evaluate the effectiveness of training, including multi-agency training, to safeguard and promote the welfare of children.

More information about the statutory role and function of the Safeguarding Children Board can be found at www.safeguardingsouthend.co.uk

The Safeguarding Principles

Effective arrangements for safeguarding children should be underpinned by two key principles:

- Safeguarding is everyone's responsibility: for services to be effective each professional and organization should play their full part
- A child-centered approach: for services to be effective they should be based on a clear understanding of the needs and views of children.

Strategic Plan 2016 - 2019

The Strategic Plan 2016-2019 is being reviewed at the time of writing this report. A strategic plan will be the new Multi-Agency Safeguarding Arrangements with Partners. The Local Authority, Clinical Commissioning Group and the Police. Throughout the coming year there will be a phased approach of implementation and evaluation. The new arrangements will be published and implemented by the end of September 2019.

Governance

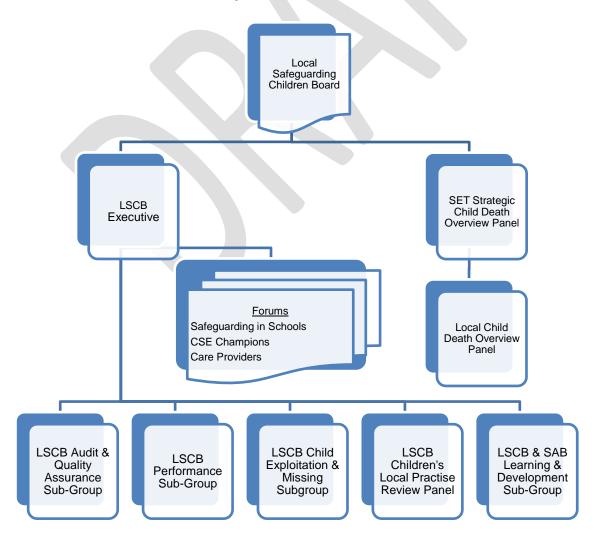
Southend Safeguarding Children Board is chaired by its Independent Chair, Elizabeth Chidgey and meets four times a year bringing partners together from: Southend Council, Essex Police, Essex Fire and Rescue Services, Southend Clinical Commissioning Group, NHS Health Trusts, Probation Services, the Voluntary Sector, and lay members, representing health, care and support providers and the people who use those services across Southend.

The Chair is accountable to the Chief Executive of the local authority in chairing the LSCB and overseeing its work programme. However, she is accountable only to the Board for the decisions she takes in that role. The role of Vice-Chair is undertaken by Southend Borough Council's Deputy Chief Executive for People.

The Board is attended by representatives from the partner agencies with a high level of engagement. Information about Board attendance can be found in Section 6.

The LSCB has an Executive, five subgroups, and three forums chaired by senior members from across the partner agencies. We report on the business of each of the sub-groups operating during 2017-19 in this report and the structure below reflects the shape of the Board.

LSCB - Board and Sub-Group Structure



Strategic Links to other Boards and Partnerships

The Chair of the LSCB is a member of the Health and Well-Being Board and presents the LSCB Annual Report to the Board; The Chair meets regularly with the Chief Executive, the Corporate Director for People, the Lead Member for Children's safeguarding, and the Leader of the Council, lead Health Commissioner, Police and is also the Chair of the Safeguarding Adult Board. The Chair also meets regularly with the Council's Scrutiny Committee. Links are also maintained through representation on key strategic partnerships:

- Community Safety Partnership
- The Health and Wellbeing Board
- The Local Safeguarding Children Board
- Essex Safeguarding Adults Board
- Thurrock Safeguarding Adults Board

Southend Essex and Thurrock (SET) work in partnership to provide a common approach to safeguarding across the county. The SET Safeguarding Children Guidelines set out the system and process all organisations should use to raise safeguarding concerns. This includes a framework for confidentiality and information sharing across agencies.

Funding

The work of the Board is financed by contributions from partner agencies. 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.

A review of governance for Safeguarding in Southend led to uplift in the budget midyear. This uplift covered the costs of:

- An extensive review of the governance (including the production of terms of reference for all Boards, Executives and Sub-Groups.)
- Support for the management of the safeguarding during the period of review
- Support to manage the change in structure and delivery models

Next year's proposed budget 2019/20 (presented at February Board Meetings) includes costs for the new structure. The new budget also (for the first time) recognises the significant 'on-costs' (+34%) of employment.

Full budget information is contained within Section 7, Appendix 2.

Section 2: Priorities 2017-19

In the 2016-2017 Annual Report and the 2016-19 Strategic Plan the Board identified the following key areas for development:

 Conclude and implement the Strategic review of the LSCB and its sub-group priorities and activities and ensure that engagement with the service user is improved and their voices captured to inform future board activity

- This has been completed. Under the New Working Together arrangements 2018 a phased approach is underway with Partners as to the structure and scrutiny of the new arrangements for September 2019
- Implement a new performance and risk framework to support the Board in delivering its statutory responsibilities – Including understanding the impact of local resource commitment to safeguarding and funding plans
 - The Dashboard has been introduced and this is currently under review.
 Partners have identified that it does not provide all the information that they would like and in the format that they would find most useful.
 - The new Risk Register forms a regular agenda item on the Board and Executive and is reviewed at each meeting.
- Understanding and assessing the impact on safeguarding system changes and commissioning plans and key transformation programmes.
 - The STP, JTAI report and the New Working Together arrangements at both a local and SET level are standing agenda items at Board level. The Chair and the Business Manger have regular meetings with appropriate leads to ensure that the improvement processes continue to offer assurance in regards to the organisations management of safeguarding.
 - A SET summit in June 2018 agreed increased collaboration and the October meeting reviewed Set Working Together Strategy.
 - Southend Working Together arrangements are in development with a phased approach ready for implementation for September 2019
- Develop a revised audit programme to be overseen by the LSCB
 - The new Audit and Quality Assurance Group has a work plan that is agreed by the Independent Chair and that reports to the Executive. The work plan has prioritised work around multi-agency Section 11 audits and Serious Case Review activity.
- Ensure that cross cutting system improvements are in place and that partners work collaboratively in three priority areas around, casework practice, quality of referrals and appropriate interventions
- Respond to emerging National Priorities of neglect, child sexual exploitation and modern slavery
 - Child sexual exploitation, modern slavery and domestic abuse are part of a multi-agency strategic group. The action plan is focused around four key areas: Understanding the problem, Community Engagement/Training, Prevent, Protection and Pursue.

Section 3: Achievements from September 2017/18 – March 2019 Highlights

This year the LSCB undertook significant work to ensure that it fulfilled its statutory responsibilities and welcomed a new Structure and Business Manager in September 2018.

3.1 Safeguarding Children Board

- The governance of the LSCB (and SAB) was reviewed and the outcome was a change in the meeting structure, their terms of reference, work plans and membership.
 - o This has led to an increase in engagement and attendance.
 - Strategic Plans with key priorities have been delivered, alongside key objectives.
 - Action Plans for the Board and Executive Meetings now form part of the minutes and there are work plans for the Performance, Audit Quality Assurance and Child Exploitation and missing sub-groups.
- The Risk Register has been reviewed; and is now a standing item on agendas.
- Training provision was reviewed and it was found that the costs in time and resources have led to other significant work not being delivered. It was also found that the boards were accrediting training without an appropriate mechanism for doing so. It was noted that a number of national lead organisations provide safeguarding training at an equitable cost, free training, bespoke training for themes and roles. A significant factor in the change in training was that there was only a 50% take up of courses offered. It was agreed that training from Essex and Thurrock would be accessible to people and professionals from Southend.
- A Train the Trainer update course has been delivered.
- A shared learning event (alongside the Violence and Vulnerability group and Community Safety Partnership) on Modern Day Slavery was led by the LSCB and SAB. Attendance and feedback for the event has been excellent.
- A Performance Dashboard has been developed and delivered. The presentation of headline statistics, with commentary, generates the majority of the work for the Performance Subgroup and is forwarded to the Board. The dashboard is currently under review for review and it is likely that the first iteration will change significantly as Partners have become aware of the benefit of the presentation and the opportunity to concentrate on areas of risk, and what information would be useful.
- Case Learning notes produced from other areas' serious case Reviews have been disseminated to partners to share learning and to understand the local position.
- The LSCB website content is under review. It was found that that there was content that was no longer relevant, missing or inaccurate. All errors and omissions have been rectified and a regular review of content planned.
- Induction Packs have been developed for Board Members to ensure that they have all the information, network and connections to add value to the LSCB as soon as possible.
- The Southend LSCB continues to work with SET and has been involved in the update of a number of shared policies and protocols. The SET procedures Working Together Group is working in line with the changes.

- The Set Summit meetings in June and October 2018 have increased collaboration.
- The LSCB has engaged with regional networks and sharing of best practice.
- Assurance: section 11 audits and returns have been completed and submitted with no actions arising. Once the cycle of reporting is complete in March 2019 the reporting schedule is to change to bi-annual.
- Harmful sexual behaviour audit carried out across agencies. Audit to be analysed and gaps identified for future training in 2019
- The Serious Case Review Panel has been reconvened due to the increased number
 of practice reviews. There are currently two active Local Practice Reviews which are
 to be commissioned. An overarching review has commenced to incorporate Baby S,
 neglect and fewer than 1s.
- The STW Serious Case review finalised and the action plan is monitored by the Audit Quality Assurance sub group

3.2 Schools' Safeguarding Activity

Building on the successes of previous years, Southend's schools currently have multiple dependable points of contact with the LSCB:

- Heads, Deputy Heads, and Designated Safeguarding Leads are actively engaging with the quarterly Safeguarding in Schools forum, forming an invaluable link for sharing information, maintaining lines of communication, and allowing for robust debate of developing issues. Through the Forum, Essex Police have engaged upwards of forty schools to take part in Operation Encompass, enabling schools to nominate a key adult who will appropriately support and report following a child's experience of domestic violence.
- The CSE Champions Forum affords similar opportunities for communication, with staff from many schools attending quarterly meetings to ensure their knowledge around CSE remains current and that information sharing can take place in a supportive and collaborative environment; those Champions that cannot attend on a given date will instead treat the minutes of each meeting as a briefing, enabling busy school staff to stay abreast of important developments.
- The biannual School Governors' Safeguarding Return encourages heads and Chairs
 of Governors to scrutinise and assess their own safeguarding provision, to identify
 points of improvement, and to create solutions and provisions accordingly; a number
 of schools have shown enthusiastic and proactive involvement with the LSCB's
 school safeguarding provision. The LSCB has recently developed a grading system
 for the returns, enabling the identification of the highest achievers and those most in
 need of improvement
- In the course of conducting recent Practise Reviews, several schools have been approached to engage and have provided useful information both to the LSCB and to Essex Police's investigating officers. As a result of the rapid review there has been

learning which has been implemented in a timely fashion leading to improved outcomes.

3.3 Joint Targetted Area Inspection

In March 2018 a Joint Targeted Area Inspection (JTAI) was completed (by Ofsted, CQC, HMICFRS and HMIP). The inspection concentrated on the multi-agency response to child sexual exploitation, children associated with gangs and at risk of exploitation and children missing from home, care or education in Southend-on-Sea.

The inspection found:

- There are strong partnerships in the area and that the Police and Council work effectively together.
- The involvement of Health Agencies must be further developed to ensure that formal and robust processes are put in place.
- Work is already underway involve Health Agencies, through the new multiagency Safeguarding Hub (MASH+), which has co located key professionals from across the agencies

Senior Leaders from the Partnership have developed a joint action plan to meet needs identified in the inspection. The CSP and LSCB hold agencies to account regarding progress and delivery of outcomes.

A multi-agency process developed an action plan. The workshop highlighted 29 areas for improvement and the plan developed key actions under 6 themes:

- 1. Strategic Response
- 2. Service Provision
- Assessment and Risk Assessment
- 4. Decision Making and Planning
- 5. Supervision
- 6. Communication

Progress is regularly reviewed within the multi-agency and individual agency governance boards. The current progress report (Jan. 2019) identifies all actions as 'on track'.

3.4 Partners' effectiveness highlights

The LSCB has been involved in partnership activity throughout the 2017/19 period and the following organisations regularly report into the LSCB and most have provided a summary of their activity over the period.

3.4.1 Essex Community Rehabilitation Company

Agency Context

Essex CRC manages adults in Southend who are sentenced to Community Orders or periods of imprisonment, where they are assessed as either low or medium risk of serious harm. We also deliver structured interventions to high risk offenders supervised by the National Probation Service. In Southend we are located in Civic 2, which has

allowed growth in our partnership working with local authority teams.

Our leadership team has remained consistent over the last year – at senior and local level. Our service delivery team has also remained largely consistent. We have experienced difficulty in recruiting experienced probation officers, but we have mitigated this by commencing a programme of training staff to complete the Professional Qualification in Probation (PQiP) programme.

Safeguarding Children Activity

Safeguarding is core training for all of our staff and standing item in staff supervision. We are engaged with the LSCB at Board and Exec level, and support a number of operational partnership groups; including MARAC and Op Censor. We are also present at the Violence and Vulnerability board and the spin off Criminal Justice sub-group. We have joined the newly formed MASH+, with practitioner attendance 1 day per week.

We contract Ormiston Children and Families to deliver specific interventions to service users with family integration needs, and we delivery the Building Better Relationships Programme for male perpetrators of domestic abuse (linked to this is our Partner Link Worker Service to support victims). This year (June 2018) we were inspected by Her Majesty's Inspectorate of Probation (HMIP) and rated as Requires Improvement. Our assessment and management of risk of harm was recognised as an area for development, but our organisational delivery, range of services on offer, community payback scheme, partnership engagement was rated Good. Of the 6 CRCs that have had HMIP reports published to date, Essex CRC is the highest rated.

Outcomes and Impact of Safeguarding Children Activity

Internally, managers complete a monthly audit of cases, to include at least one case per officer in each sample. Safeguarding of vulnerable children and adults is a key area of focus in this audit regime. Externally, as mentioned above, we were visited by HMIP this year and received a Requires Improvement rating. We incorporate learning and recommendations from internal and external audits into our ongoing development plans and report back on these to our Ministry of Justice Contract Management Team. As an adult orientated service, we do not have any performance measures which explicitly cover child safeguarding, but our most recent quarter's results (July-Sept 2018) were above contractual target.

Key Successes

This year we has joined the new MASH+, with practitioner location I that team 1 day per week. This will be reviewed in the coming year to ensure that it is an effective and efficient way for Essex CRC to contribute to the MASH+ arrangements. We have also engaged with the Violence and Vulnerability Board and Op Censor. This partnership has helped forge greater co-operation with social care and YOS teams. We have contributed to partner agency development by delivering a 3-day DA Perpetrator training event to social workers in Southend.

Key Areas for Development

In partnership with the Violence and Vulnerability Board, and the SET V&V Framework, we are forming an Essex CRC criminal exploitation strategy. This will include the identification of criminally exploited and embedded service users, an assessment framework and suite of interventions to address their behaviour and underpinning vulnerabilities. More broadly, the assessment and management of risk of harm has been identified as an area of development for us, which is in part a result of recording standards. This is being tackled through a range of revised case inspections, observed practice, team workshops and training events.

3.4.2 Essex Partnership University Trust

Agency Context

Essex Partnership University Trust (EPUT) is a provider of Mental Health and Community Services across Essex, Bedford and Suffolk. In April 2017 the two former organisations of South Essex Partnership Trust (SEPT) and North Essex Partnership Trust (NEPT) merged to form one organisation. As a result of the merger the safeguarding team expanded and appointed a Head of Safeguarding for Mental Health Services. The safeguarding team now consists of a variety of professionals, all of whom bring additional expertise to the team. The Executive Nurse has board responsibility within EPUT for safeguarding and this responsibility is explicit within the job role.

Safeguarding Children Activity

EPUT has robust and effective safeguarding services in place that reflect national and local authority guidance and the service has a strategic framework which establishes the services vision and build upon existing achievements. The Trust is actively represented on all appropriate Local Safeguarding Children Boards (LSCB) and committees giving partners assurance and oversight of EPUT's safeguarding arrangements and is an important part of the organisations ability to develop and influence their services.

EPUT has a safeguarding training strategy in place and delivers competency based safeguarding training to staff relevant to role from levels 1-3 of the Inter-Collegiate Document. The training programme is integrated into the Trust mandatory training policy and performance is reported to commissioners and the LSCB. Staffs that have attended the training are required to evaluate this and asked to make a pledge of what they will change in clinical practice as a result of the training. These are then followed up by the safeguarding train. Example this year has been: "During each MDT we explore all our patients that have children and have a discussion about how they coping and if there are any issues"

The Trust has safeguarding links in pace that champion the safeguarding agenda within their teams. The safeguarding team regularly present learning lessons cases to the oversight committee and this year topics have included cuckooing and professional

curiosity. Should include information about staff training and competence; and any services or activity which impacts on the safeguarding of children.

The safeguarding children team have undertaking an audit on the appropriateness and quality of child protection referrals made by EPUT teams. The Named Nurse is liaising with colleagues from social care for peer reflection on these from a partner's perspective to aid the learning that will result from this audit.

The Trust has developed a leaflet for service users giving advice for on line abuse, bullying and dangers of exploitation. The safeguarding team have included exploitation on their work plan for focussed pieces of work. Raising awareness and is being strengthened and organisational policies and procedures are being reviewed to include the learning from themed inspections.

Outcomes and Impact of Safeguarding Children Activity

Indicated previously staff pledge after attending training how children and families are discussed at the multi-disciplinary team meetings in adult mental health services.

- "The training brought forward various cases that the team are working with currently and we discussed issues around this. This also gave me and team further understanding of the safeguarding process and what impact this has on the patient and families we are working with, this is a standard topic on the agenda as well". Adult mental health services
- "This paper is a really helpful framework for us all in dealing with such complexities"
 This relates to guidance available to staff on Fabricated Induced Illness.
- "We approve foster carers in the area, who provide care to Children some of whom have had five different placements. The support the health visitor provided to the Parent, Baby and also the foster carer, has been quite exceptional in my experience. She has the best interest of baby at the centre of her practice and appreciates the additional support that so many new mothers require". Feedback from fostering agency on staff member.
- "The child protection referral I placed last week and was going to discuss with you has been dealt with and closed. Southend BC was brilliant in this case and has allocated a mentor/individual worker for the 17yr old son. They also commented on the missed safeguarding opportunity for many years by various agencies, so I'm more pleased than ever to have doggedly pursued it. It's brilliant having your team there for support, thanks." Feedback to safeguarding supervisor.
- "We are writing to thank you for completing the health assessment. In Harrow, we strive to ensure that we offer a high quality service to our children in care, and this health assessment was of an excellent standard. Again, thank you for this exceptional work". Feedback from another area"

Key Successes

- Newly updated staff intranet site for safeguarding for staff reference and guidance
- Newly developed organisational Children's Strategy which includes safeguarding
- Nominated member of safeguarding team allocated to adolescent in patient units
- Addition to level 2 safeguarding training of enhanced package of domestic abuse, forced marriage and female genital mutilation.

Key Areas for Development

The organisation plan to strengthen the safeguarding arrangements they have in place as a result of the learning from themed inspections on exploitation during 2018.

3.4.3 Essex Police

Agency Context

One of Essex Police's objectives, as set out by the Police and Crime Plan, is to ensure children and vulnerable people are appropriately safeguarded and that they receive the help and support they need. Within Essex Police, the Crime and Public Protection Command is mainly responsible for the safeguarding of vulnerable persons.

The Operations Centre is the point of entry into the organisation for all Public Protection partnership-related enquiries and referrals, forming the link between Essex Police and Southend Social Care. Also in the Operations Centre, is a large triage team made up of three areas, Adult, Child and CSE. This joint triage team enables Essex Police to enhance response and build a resilience of knowledge. The Operations Centre and the Child triage team give partners a single point of contact where they can speak with someone who has knowledge of the safeguarding protocols.

The Operations Centre also consists of the Central Referral Unit (CRU). The CRU's primary purpose is to assess the risk experienced by victims of domestic abuse and stalking (including honour-based abuse). CRU provides a central point of contact for police officers and agencies. It will ensure that domestic abuse referrals are accurately recorded, graded and fully researched and that relevant information is shared with social services and other agencies. This is part of Essex Police's commitment, working with partner agencies, to provide the best possible service and support to all victims of domestic abuse. By safeguarding adults from domestic abuse, we are in turn safeguarding children who often witness DV or are involved in it.

Essex Police also have dedicated domestic abuse investigation teams, 'Operation JUNO'. These teams will oversee all domestic abuse investigations and work alongside our partner agencies. This will help to ensure the force is able to give the best possible support for victims and a strong, co-ordinated response to those responsible.

Essex Police are continuing to support the Safeguarding Children Boards; all of the meetings are attended by a senior officer.

Safeguarding Children Activity

The Essex Police Child Triage Team was set up over 2 years ago to create a central point of contact for Social Care and to assist the Child Abuse Investigation Teams (CAIT) across Essex. This team receives all referrals of child abuse initially and will participate in strategy meetings with social care and other professionals on a daily basis. They will share information and collectively come up with a plan to safeguard child/children. The CAIT Investigating Officers also attend all the Initial Child Case Conferences. We also participate in the SET Procedures working group by attending monthly meetings. All new Police Officers will complete an attachment with a CAIT team and will have an input from the Triage Team during their probationary period. This is to ensure new officers are aware these teams exist, explain what role they play and to promote the importance of safeguarding children. These teams are also there to provide assistance and specialist advice to officers that come across a child in need of safeguarding whilst carrying out their duty.

We are inspected by HMIC who promote improvements in the services we provide and highlight any good practice. They monitor us as a force and report annually on our effectiveness, efficiency and legitimacy. The HMIC recently reported that we have made considerable efforts to improve our ability to protect vulnerable people and we are now good at supporting and protecting these people. They also reported that we have worked hard to develop constructive relationships with partner agencies, so that we can provide better support to victims and the communities that we serve.

Key Successes

Summary of key achievements by your agency which have protected children's wellbeing.

- Training has been delivered by a specialist Child Abuse Investigation Team
 Detective Inspector on taking a child into Police Protection. This training has been
 well received, resulting in further courses being offered to officers across Essex
 Police.
- A CPD event has been held around The Voice of the Child and the Family Court Process. This was open to all Police Officers and Police staff, particularly those in Public Protection, and LPT Inspectors who are often designated officers for Police Protection Powers. The event included a child victim speaking of her experiences with the Police and an input from the Centre for Action on Rape and Abuse in Essex (CARA). Holding these types of events educates officers and allows us to improve our practices and procedures when it comes to child safeguarding.
- We are now part of Southend MASH to help improve our service for vulnerable children.
- Supt. Hendy presented at the National CSE inside Government Conference in London and received excellent feedback from partners and police colleagues. The

- presentation delivered was on Effective Police Strategies for CSE.
- Op Goldcrest was presented to the LSCB Full Board in September, where it was fully supported by all partners and agreed that Thurrock will pilot the project. Essex SC has not yet taken this to the FLT and this will be done in the next few weeks; however they agreed the go ahead as this is a formality. A meeting was held with partners and a working group has now been set up. The Go Live date is anticipated to be in April 2019 at Grays.
- The memorandum of understanding has been re-written for Missing Children. This has now been agreed to form part of Chapter 20 in the SET Procedures.
- The Crime and Public Protection Command have agreed the updated SET procedures on the bruising protocol and also the SET procedures revised chapter on serious youth violence and gang activity.
- The Youth Offending Service received 'outstanding' from their Ofsted inspection and there was mention within the report of good work from Essex Police.
- Essex Police are part of Op Hydrant and provide feedback on any cases we identify.

Key Areas for Development

There is no identified investigative resource around child exploitation. Sub-Group meetings are expanding across SET

3.4.4 SBC Children's Services

Agency Context

Southend Borough Council's Children's Services are a statutory safeguarding agency. The service discharges the Council's statutory social work duties in relation to contact, referral and assessment, children in need, children subject to child protection plans, looked after children, care leavers and disabled children and young offenders. The Local Authority Designated Officer (LADO) sits within Children's Services.

Children's Services are responsible for discharging many of the Council's duties as Corporate Parent to looked after children including fostering and adoption services. The service delivers services for children who have additional identified needs, who are not children in need under Section 17, Children Act 1989, within our Early Help Family Support Service.

Four Heads of Service report to the Director of Children's Services who is a member of the Department for People management team. The Deputy Chief Executive, Department for People, is the statutory DCS and DASS.

Safeguarding Children Activity

This annual report covers the year of 2018 and as such aligns with the period covered by our self-assessment. This report can be read alongside the self-

assessment from March 2019 onwards.

Children living in this area:

- Approximately 39,115 children and young people under the age of 18 years live in Southend-on-Sea. This is 21.5% of the total population in the area.
- Approximately 18.9% of the local authority's children are living in poverty

The proportion of children entitled to free school meals:

- in primary schools is 13.6% (the national average is 13.7%)
- in secondary schools is 8.1% (the national average is 12.4%)

Children and young people from minority ethnic groups account for 21.7% of all children attending Southend schools at the time of the Spring 2018, compared with 31.8% in the country as a whole.

The largest minority ethnic groups of children and young people in Southend's schools are Asian and Mixed/Dual.

The proportion of children and young people with English as an additional language:

- in primary schools is 14.5% (the national average is 21.2%)
- in secondary schools is 13.3% (the national average is 16.6%)

Child protection in this area:

- At 31 March 2018, 1,323 children had been identified through assessment as being formally in need of a specialist children's service. This is a decrease from 1,387 at 31 March 2017.
- At 31st March 2018, 116 children and young people were the subject of a child protection plan. This is a reduction from 220 at 31st March 2017.

Children looked after in this area:

- At 31st March 2018, 291 children were being looked after by the local authority (a rate of 74 per 10,000 children). This is an increase from 282 (73 per 10,000 children) at 31st March 2017.
 - o Of this number, 147 (or 50.5%) live outside the local authority area
 - o 19 live in residential children's homes
 - No children are placed in a residential special school
 - 213 live with foster families
 - o 10 live with parents
 - 15 children are unaccompanied asylum-seeking children.

In the 12 months prior to 31st March 2018:

- There were 35 adoptions
- 8 children became subject to special guardianship orders
- 114 children ceased to be looked after
- 25 young people aged 18+ on the 7th of January 2019 are in independent living
- arrangements

Our approach to the changing landscape of risk and harm experienced by children and young people due to criminal and sexual exploitation is an area of strength and has received national recognition. We are in no doubt about the challenges of engaging with this cohort of young people and remain committed to supporting positive outcomes for them. The strength of our practice in this area was identified during the Joint Targeted Area Inspection in April 2018.

Our investment in staff has supported our improvement journey with reduced caseloads enabling higher quality practice. We have recruited to 3 additional team manager posts, and an additional deputy team manager post, to further improve the capacity of our managers to drive forward practice improvements including the quality and progression of assessments and plans and the quality of supervision. Management grip is an area of strength with the development of team performance dashboards and weekly reports which are reviewed by the Director of Children's Services, Deputy Chief Executive and the Chief Executive. We remain committed to ensuring there is a direct line of sight from senior leaders to the lived experience of Southend's children.

We continue to have a Children's Services Improvement Plan which sets out our practice improvement priorities. Progress against the plan is reported to our Improvement Board which is chaired by the Leader of the Council. Membership of the board includes the Lead Member for Children and Learning, The Chief Executive, Deputy Chief Executive, Director for Children's Services, Independent Improvement Partner and chair of the LSCB. We continue to use quality assurance processes, such as case audit and feedback from children and families, alongside performance data to assess the impact of our work and make changes where required.

Our areas of good practice have been achieved by working in partnership with other agencies at a strategic and operational level. These include our contact and referral arrangements, MASH+, our response to Child Exploitation and our response to domestic abuse, MARAT. These arrangements are functioning well. We demonstrate leadership in partnership and governance boards such as the Violence and Vulnerability Board, LSCB, Health and Wellbeing Board, SEND board and Success for All Children Group (Children's Partnership).

In 2017 we commissioned Research in Practice to undertake analysis of demand within the children's social care, early help and SEND. The findings from the research, received in 2018, has informed our significant investment in services and the structure of our services. It supported us to be able to use a strong evidence base with confidence to make the case for investment and this was well received by Members and senior leaders.

We have explored the reasons behind our Looked After Children rate, which is higher than statistical neighbours, our Child Protection Plan rate, which is lower that statistical neighbours, and our re-referral rate, which is slightly higher than statistical neighbours using performance and demand data and our understanding of the needs of Southend Children. Following this work we know that we are confident that children who are in care need to be in care and that the increase in numbers relates to improved safeguarding practice relating to infants and our improved understanding of risk and harm experienced by adolescents due to criminal and sexual exploitation. We know that our Looked After Children rate would be higher if it were not for the work of the Edge of Care service who enable children to remain living safely with their families who may otherwise have would have needed to become looked after to ensure their safety.

We have made a conscious decision to use a contextual safeguarding approach to our work with adolescents and this means they are being appropriately worked with by our adolescent intervention and prevention team as children in need. This is a group of young people who we know would have previously been subject to child protection plans and this is one reason for our rate of children subject to plans. In addition our continued, and increased, investment in early help provision and the increase in the number of social workers means the needs of children are met an earlier stage and they therefore do not require child protection plans.

Our exploration of the reason behind our re-referral rate has led us to increase our focus on the quality of assessment and decision making. We have invested in additional management posts within the assessment and intervention service to support improvements in decision making and assessment.

We are required to submit a Written Statement of Action following the recent partnership SEND inspection. Children's Services are contributing to actions for improvement and the Director of Children's Services is a member of Written Statement of Action working group. One area of focus for us relates to children allocated to the service who are missing education and we have held a senior leaders workshop to explore this area of work.

One area of focus is to ensure the strength of our early help service delivery is not diminished due to any future changes in Troubled Families funding. We are confident that we will be able to work across the children's system to support families.

Current challenges include the impact of the increase in demand related to new areas of vulnerability such as Child Exploitation and County Lines activity in the town, the increase in 'in work' poverty, the pressures on the system relating to placements and the impact of other local authorities housing families with additional needs in Southend.

We are facing challenges due to the national pressures on the system relating to placements for looked after children. The lack of choice of placements, the behaviour of some PVI providers and the increased cost of PVI placements increases the difficulty in ensuring that out looked after children live in the very best placements.

Outcomes and Impact of Safeguarding Children Activity

We know that our safeguarding activity means that children are safer. Our file audit programme shows an improving picture of practice. The proportion of audited cases found to be good or better increased from 44% in January to 65% in December with the average across the year being approximately 57%. The proportion found to Require Improvement of better increased from 77% to 94% over the same period with performance at or above the target of 85% for the majority of the year.

We know that social workers are spending more time with children. This enables them to build relationships with children, their families and carers and to work with families with purpose to progress plans. The proportion of children being visited in accordance with timescales when subject to child protection plans increased from 94% in January to 97.6% in December with performance being at or above target for the majority of the year. For looked after children statutory visiting performance increased from 83.9% in January to 88.4% in December. It should be noted that there are a small number of older children who have stated they want to be visited less frequently which impacts on our reported performance however the frequency of visiting for this group is regularly reviewed.

We know that there is no delay in initial child protection conferences being held other than when it is in a child's best interests to delay the conference. Every decision to delay a child protection conference is overseen by a Head of Service. Due to the improved management grip the timeliness of child protection conferences increased to 81% being held in timescale in December.

A significant majority of our looked after children tell us they are happy in their placements and that they feel safe in their placements. This information is contained with the annual report of the Principal Review Officer and is based on feedback from looked after children. It includes positive feedback about their placement from children who are clear they would rather be able to live with their families.

Children do not wait for a decision to be as to whether they will be receive a statutory social work assessment, an early help family assessment or will be signposted to support. Over 90% of decisions made on referrals within MASH+ take one working day or less with performance being above 95% since May.

We know that our approach to working with adolescents at risk of exploitation using a contextual safeguarding approach means they are safer. This was the finding in the Joint Targeted Area Inspection (JTAI) and we have subsequently made additional investment into that area of service. A review of this team, AIPT, in December 2018 included meeting with young people. The young people stated they valued the way in which the team work alongside them and do not give up on them.

The findings of the JTAI in relation to Children's Services and children's social care were predominantly positive for us and for the partnership. The inspectors found no children to be at risk of harm and identified that the majority of children had been made safer due to the intervention of Children's Services and that there was positive safeguarding activity in evidence for all children whose situations were inspected within Children's Services. We used the opportunity to lead on the development of a multi-agency action plan in response to the findings of the inspection. Progress of the plan is monitored within Children's Services and also by the LSCB and LSCB Executive.

Key Successes

Implementation of multi-agency safeguarding hub+ (MASH+) resulting in improved practice at point of contact and referral to children's social care.

Improvements in statutory visiting to children in need, looked after children and children subject to child protection plans which have been sustained

Reduction in children's records being audited as inadequate on more than one

occasion with no repeat inadequate audits since April 2018.

Improvement in quality of practice identified during case audits with the target of 85% of files being audited as requires improvement or better being met and exceeded for several consecutive months

Improvements in the timeliness of Section 47 investigations with strong performance being seen during Q2 and Q3 of 2018/19.

External validation of the strength of our approach to adolescents at risk of exploitation during the JTAI in April 2018.

Key Areas for Development

We know we need to continue to improve practice and our areas of focus have been identified during the JTAI, through our quality assurance and performance management processes, following changes in demand and through case reviews. Our priority areas of focus, within an improving picture, are:

- The quality and impact of assessments
- The quality and impact of plans
- The quality and impact of supervision
- Developing more participation opportunities for children, young people and families
- Ensuring that the lived experience of the child is evidenced in all our work
- Reviewing the application of threshold across the service and the partnership
- Response to sexually harmful behaviour

The action we will be taking in relation to these key areas of development are contained within our improvement plan. Our revised improvement plan will be implemented from March 2019.

3.4.5 SouthendBorough Council (SBC) Education

Agency Context

Education, including the important interface with all schools, is central to the LSCB's ambition regarding ensuring that our schools are both safe and operating effective safeguarding policies and practice.

Safeguarding Children Activity

Education contributes to safeguarding in serval ways:

- 1. In supporting the LSCB with annual report
- 2. In directly supporting schools to ensure that they have effective safeguarding

systems, including in preparation for an OFSTED inspection

3. Offering a single central record check

Specifically:

- 1. Where education is informed of a safeguarding concern by OFSTED, it works with the LADO to determine the nature and action required in relation to this concern. This either results in a direct investigation to the complaint, or requiring the school to respond directly to OFSTED.
- 2. In relation to specific context, and supporting the welfare and safety of young people, i.e. EHE, CME, LAC V&G etc.

Outcomes and Impact of Safeguarding Children Activity

Robust monitoring of school transfer records. Greater awareness and intelligence of safeguarding effectiveness in schools

Key Areas for Development

Building on the monitoring and tracking identified through the SEND inspection

3.4.6 Southend Clinical Commissioning Group

Agency Context

Southend CCG is a Clinical Commissioning Group (CCG) in south east Essex. A CCG is a group of GPs and clinicians who commission (buy) health services for their local communities. Our role is to specify outcomes that we want to achieve for our population, and then contract providers to provide care to achieve those outcomes. We are committed to ensuring the provision of local, high quality services that meet the specific needs of our population. During 2018 Southend CCG has aligned with Castle Point & Rochford CCG to increase efficiency through matrix working and the reduction of duplication.

On-going financial and capacity issues across the health economy will challenge both commissioning and provider health organisations. The Sustainability and Transformation Plan will continue to support change in local health services to reflect the changing needs of the population. However, the CCG maintains a strong commitment to safeguard children from abuse and neglect and is an active member of the LSCB. The CCG is responsible for the procurement of designated safeguarding professionals. A key function of the designated professionals is to provide clinical expertise and strategic leadership across the local health system to support other professionals in their agencies on all aspects of safeguarding and child protection. The Named GP undertakes a specialist role within the team to support and advise General Practitioners and Nurse Practitioners working in Primary Care on matters relating to safeguarding and promoting the welfare of children.

Safeguarding Children Activity

As a commissioning organisation the CCG does not deliver services directly to children and families but does have systems in place to ensure that the health services we commission has robust safeguarding arrangements in place.

There has been good collaboration in primary care over this year, with recognition of the increased numbers of health professions around the child, and good attendance at teaching. The teaching has also been recognised at CQC level with a recent Joint Training Area Inspection commending CCG Safeguarding Team teaching in its report. Consultant paediatricians are also now attending the Forum, reflecting the teaching's increasing popularity

We are work closely with other CCGs through the Clinical Safeguarding Network (SCN) which brings all designated safeguarding children and adult leads together to collaborate on areas of mutual interest.

The CCG has provided leadership to local health providers to improve the response to child exploitation following the Joint Targeted Area Inspection that took place in March 2018. The CCG has oversight of the action plan that feeds into the LSCB action plan.

Ac	ctions for Health Services			
Re	ecommendation	Action required		
a)	Emphasis the role and contribution of health organisations within the child sexual exploitation action plan and meetings	Provider services are contributing to the development revised child exploitation action plan There is an improved representation at all relevant meeting.		
b)	Improve the speed and quality of information sharing from health providers to the MASH+	Systems are being put in place to improve the flow of information between EWMHS, Primary Care and SUHFT.		
c)	Increase the strength of the Health contribution to the restructured LSCB to support its ability to fulfil its role as a 'critical friend'.	All health commissioners and providers to be represented and contribute to the work of the Safeguarding Partnership, its committees and sub groups in line with the revised Working Together to Safeguard Children 2018.		
d)	Improve the ability to share information between EWMHS and School Nursing to support better early identification of changes in young people's emotional health and well-being, including risks of going missing or vulnerability to exploitation or gang involvement.	EWMHS and school nursing service have been developed systems to improve information sharing.		
e)	Provide evidence that case auditing and quality assurance of practice in health is sufficiently strong to support on-going learning.	Peer review by JTAI health partners of safeguarding audit completed by each organisation has provided assurance.		

f)	Provide evidence that supervision is consistently implemented in all commissioner and provider organisations	Public Heath is revising current model to reflect school nursing service need. Supervision standards have been developed and shared with all health providers
g)	All health practitioners who come into contact with children during the course of their duties, to be able to recognise and response to children affected by gangs and criminal exploitation.	Training has been delivered across the health economy and further work in in progress.

Outcomes and Impact of Safeguarding Children Activity

As a commissioning organisation the CCG does not deliver services directly to children and families but does have systems in place to ensure that the health services we commission has robust safeguarding arrangements in place.

This has been monitored through the SCN Dashboard which brings together safeguarding data across the health economy for scrutiny.

Level 3 training for GPs has been delivered within the Time to Learn programme, 4 offered in 2017. Nurse Practitioners were offered bespoke level 3 training, the requirement to have this level of training is dependent on individual role and responsibilities. The figure cannot be given as a percentage as the total number employed is not available.

Level 3 training for Primary Care	Q1	Q2	Q3	Q4	Nurse Practitioners
CP&R	84%	86%	98%	83%	31
Southend	80%	94%	100%	93%	31

Level 2 training is part of both CCGs mandatory training programme and delivered by elearning. Recognition that compliance had dipped in Q1 resulted in a recovery plan that has reached the target of 90% in Q4. Level 4 refers to named safeguarding professionals and level 5 designated safeguarding professionals who are hosted by Southend CCG.

Southend	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Level 2	32%	84%	85%	90%
Level 4	100%	100%	100%	100%
Level 5	100%	100%	100%	100%
Governing Body	100%	100%	100%	100%

Key Successes

- Commissioning hospital-based Independent Domestic Abuse Advisors for 3 acute NHS Trusts and supporting the services already established in other Trusts.
- A Safeguarding Assurance Tool has also been submitted to NHSE England which demonstrates a high level of compliance.
- Moved towards a competency based approach to safeguarding training for primary care which is flexible to the needs of individuals.
- Health Services have supported development of the Multi Agency Safeguarding Hub
 + and have Health Liaison Nurses working within the hub. This has improved the
 quality and timeliness of information sharing between for children in need and those
 requiring protection. In addition it is reducing the demand on clinicians to complete
 section 17 and section 47 forms as this function can now be completed by the
 liaison nurse is they receive to consent to access the record.

Key Areas for Development

During 2019/20 the CCG will:

- Work with Safeguarding Partners and relevant agencies to implement multi-agency safeguarding arrangements.
- Work with partner CCGs to develop the Mid and South Essex Sustainability and Transformation Partnership (STP) to improve health outcomes for the local population
- Work with the Safeguarding Partnership to deliver the Violence and Vulnerability Strategy reducing child exploitation in Southend.
- Work with Primary Care to ensure that safeguarding is integrated into the work of Locality Hubs

3.4.7 Southend University Hospital Foundation Trust

Agency Context

All staff working for SUHFT, including those who predominately work with children has a critical role to play in safeguarding and promoting the welfare of children. The safeguarding children's team promotes a "Think Family" approach and embeds this across the organisation to ensure staff is able to identify risk and protect vulnerable children and young people from harm. Assurance that SUHFT is fulfilling its obligations in regard to the Children's Act is monitored through the LSCB/ESCB and Section 11 audits for both Southend LSCB and Essex Safeguarding Children Board are completed within agreed time scales.

In collaboration with National Guidance, SUHFT also ensures that regulations as identified by the Care Quality Commission (CQC) are adhered to, to ensure children are effectively safeguarded.

Since 2016 Southend, Basildon and Mid-Essex trusts have worked to together as part of a "group model" and in Jan 2017 the joint executive group were appointed to support

how we work together in both clinical and corporate services. As part of our progress towards becoming a single, merged organisation there will be a consultation process in February 2019 relating to safeguarding services across the 3 trusts. This will restructure hospital safeguarding services currently delivered across Southend, Thurrock and Essex.

National and local safeguarding arrangements for partnership working are being revised in order to comply with the new Children and Social Work Act 2017. Safeguarding Partnerships which include the Local Authority, Police and CCGs will replace Local Safeguarding Children's Boards from September 2019. The Safeguarding Partners are working to develop plans for the future arrangements and how these will be implemented across Southend University Hospital NHS Foundation Trust. Any associated impact is yet to be quantified.

Safeguarding Children Activity

The Safeguarding Team continues to work with external partners to ensure all statutory Safeguarding requirements are met and that health is represented at both the Southend and Essex Safeguarding Children's Boards and associated sub groups.

The Trust works closely with the LSCBs in their quality assurance, monitoring and safeguarding children arrangements. The Trust's Named Nurse reports assurance via the LSCB Monitoring Sub-Group and the Audit and Quality Group.

Training

SUHFT is committed to ensuring that all staff receives the correct level of training to safeguard children (0-18 years) from harm and abuse. All health care staff must have the competences to recognise children at risk of harm and abuse, and to take action to safeguard. The safeguarding team seek to also promote a multi-agency approach to training.

The team offer a programme of safeguarding Children Supervision which involves a comprehensive review of safeguarding cases with a trained Safeguarding Supervisor (the team have all completed the NSPCC Safeguarding Supervision Skills programme). The process provides a structured format in a one to one or group setting that involves both reflection and direction regarding case management.

Attached is the annual report 2017-2018 and performance data from April 2018 to December 2018.

Audit

A number of audits were undertaken in 2018 by the team against recommendations from national and local reviews. The team have also supported the LSCB audit programme. The safeguarding team determines an annual audit plan.

Peer Review

It is a core competency for all clinical staff working with children to undertake regularly documented reviews of practice. Peer review is a form of reflective practice, as is clinical supervision. SUHFT hold monthly paediatric peer review which involves paediatric clinical and nursing staff discussing recent cases sharing expertise and expertise by

providing an impartial evaluation of the work of others.

Partnership Working

The Trust continues to demonstrate a high level of commitment to partnership working through active participation in key partnership meetings. SUHFT has representation on Southend and Essex Local Safeguarding Children Boards by the Chief Nurse, Designated Doctor for Safeguarding Children, Named Doctor for Safeguarding Children, Named Nurse for Safeguarding Children and the wider safeguarding team. The Trust's Named Professionals are members of a number of safeguarding subgroup meetings as well as a considerable number of internal safeguarding meetings.

• Key Drivers; Neglect / Criminal Exploitation

The safeguarding team have drawn on the expertise of the adult safeguarding leads and the LA leads for CSE and Criminal Exploitation and also other health authorities which are thought to be providing exemplar services in relation to response and recognition of criminal exploitation and its impact on children. This collaboration has facilitated the development of a policy/guidance in relation to gangs, missing children and CSE. The policy is currently being reviewed by the relevant committees for ratification.

The team have facilitated a multi-agency neglect study day and have revised safeguarding training materials for focus on recognition and response to neglect.

Outcomes and Impact of Safeguarding Children Activity

An assurance of robust Safeguarding Children practice (incorporating looked after children - LAC) is presented at the Joint Adult and Children Safeguarding Committee and the team report to the Clinical Governance Committee on a regular basis throughout the year. Accountability for delivering the corporate Safeguarding Children function is held by SUHFT's Chief Nurse.

The Safeguarding Children Team supports, enables and challenges staff to make safe and effective decisions to safeguard and protect vulnerable children. Measurement of performance and outcomes is therefore complex and includes a variety of factors which include:

- Performance indicators related to training and supervision uptake
- Audit of safeguarding knowledge
- Risk management
- Review of serious/complex cases
- Responding to LSCB/CCG multi-agency action plans
- Reviewing policies to ensure that they are in line with local and national guidance

The impact of safeguarding training and supervision is audited yearly. The assessment for outcomes of safeguarding training is identified by assessment of 'learner's reactions', attitudes, knowledge and skills, and impact on behaviours. We utilise a primarily quantitative approach to the assessment of outcomes, seeking to measure them by means of self-completion questionnaires.

The Integrated Adult and Child Safeguarding Committee acts as a conduit for the following agendas and has representatives from the health economy, including, the

Designated Nurse for Safeguarding, Southend/Castle point

- Safeguarding adults including compliance with the Mental Capacity Act (2005), Deprivation of Liberty Safeguards (DOLS), and the Mental Health Act (MHA).
- Response to the Trusts duties as part of the PREVENT Strategy, working with partner agencies across the health economy.
- Safeguarding children including criminal exploitation, child sexual exploitation and female genital mutilation.
- Gaining assurance from the directorates that responses to external or internal inspection reports are met and that risk is managed and mitigated accordingly.
- The Trust upholds its reputation and meets its responsibilities in relation to the local
- Safeguarding Adult and Children's Boards and associated sub-groups.

Key Successes

- Significant work has been undertaken by the Safeguarding Team and informatics in relation to electronic flagging on clinical systems to ensure robust systems are in place. There has been a robust review to enhance and improve governance processes pertaining to electronic alert process —an email notification is sent to the Safeguarding Team whenever a child or adult with a current electronic alert attends the Trust. Further work in 2018/19 will need to be undertaken with regard to the Child Protection Information System (CP-IS) which has been rolled out in priority areas across the Trust.
- The development of a file entry for safeguarding which can be uploaded directly to the electronic child record and ensures all staff working with the child are aware of any safeguarding concerns in respect of the child. Family or unborn baby.
- S11 of the Children's Act 2004 places a statutory duty on key organisations to make arrangements to ensure that in discharging their functions they have regard to the need to safeguard and promote the welfare of children. The Trust completed a Section 11 audit at the beginning of the year which was approved by the LSCB.
- The safeguarding team facilitate regular multi-agency study days; topics covered have included FGM, Non-Accidental Injury and Neglect. Further dates are planned which will focus on Fabricated and Induced Illness and Criminal Exploitation of Children.
- SUHFT has continued to demonstrate compliance with national and local directives including CQC regulations.
- The Trust's Safeguarding Adult and Children's Strategic Plan (2017 2019) was approved by the Joint Adult and Children's Safeguarding Committee. Significant progress has been made during the year in delivering the targets agreed in the Strategy.

Key Areas for Development

- Support and action the findings and recommendations made from SCR and PLR ensuring work streams are embedded in practice and reflected in policies and guidance.
- As part of our progress towards becoming a single, merged organisation there will be a review of safeguarding service provision across the 3 trusts to ensure consistent practice and development of expertise within the STP.

- Continue to review Section 11 (Children's Act 1989/2004) requirements to ensure the Trust fulfils its responsibilities for safeguarding children.
- Develop, review and update the Child Protection Policy in line with local and national guidance including Working Together 2015, Intercollegiate Document 2014 and other Local and National findings from SCR.
- Supported by the safeguarding children team, the specialist midwife for maternity safeguarding will continue to strengthen processes in place to ensure that vulnerable families are identified; risk assessed and referred promptly in pregnancy and that appropriate support and pre-birth planning is implemented. Birth plans are monitored and updated regularly on the electronic system (CED) and provide direct access for maternity staff regarding sensitive information and actions required post birth. The safeguarding midwife will continue to develop her role in supporting midwives in their safeguarding roles and providing safeguarding supervision to the specialist roles.
- Promote awareness of Neglect and its relationship to other forms of harm to ensure better outcomes for children.
- Continue to monitor service level uptake of training via the Safeguarding Children Committee with a commitment to ensure uptake >95% for clinical staff through a targeted comprehensive training programme.

3.4.8 Public Health - Southend

Agency Context

Southend Public Health has oversight of population based health for children in Southend and delivers the universal School Nursing Service – The Healthy Child Programme (HCP) 5-19.

EPUT provides the safeguarding framework for the School Nursing Service in line with statutory guidance including Named Nurse provision, supervision, support for serious case reviews, advice and guidance and any other ongoing support as required.

The CCG commissions a range of safeguarding services from EPUT locally, currently including the 5-19 services.

Safeguarding Children Activity

School nursing services contribute to safeguarding of children through the provision of the Healthy Child Programme under the direction of PHE commissioning framework.

Safeguarding activity is overseen via the EPUT safeguarding clinical governance/commissioning framework for supervision, training, LAC Review Health Assessments and referrals to safeguarding.

The service priorities this year included ongoing development of Healthy Child Programme with targeted work on CSE/CE, Electively Home Education Children, Children with Special Educational Needs in addition to developing a package around mental health in young people in school based settings.

Outcomes and Impact of Safeguarding Children Activity

School Nurses provide Review Health Assessments for Children Looked After up to age 16 (in schools), section 17/47s in conjunction with the MASH, provide core health assessments for all children ages 5-19 going through child protection processes, carry a corporate caseload for all child protection cases and provide targeted support in the Adolescent Assessment Team.

School nurses review all Domestic Abuse Incidents for children age 5-19 in addition to A&E admissions.

There has been an increase in safeguarding referrals from the 5-19 service as a result of school nursing being more visible in school settings.

Key Successes

School nursing service recruitment has been positive and there is only one remaining vacancy in the service. There are 9 school nurses covering 51 schools and a caseload of over 50,000 children- however there are 3 nurses on temporary reduced hours at the moment.

Nearly 4,000 children have been weighed and measured as part of the statutory National Child Measurement Programme, in addition to provision of nearly 2,000 vision assessments in reception with targeted hearing tests.

The school nurses provide night time bed wetting clinics (nocturnal enuresis), anaphylaxis training & support for all schools, support for updating care plans where children have additional health needs, and provide core health assessments where schools and parents identify issues arising.

School nurses provide monthly primary school drop-ins and biweekly/month secondary school drop-ins where they see CYP or parents.

School Nurses support the Healthy Schools programme and this year co-deliver sessions on sleep issues in children.

School Nursing services also support tier two weight management delivery and support to parents and CYP on diet & nutrition.

Key Areas for Development

School Nursing services in 19/20 will developing work around SEND offer, will develop work with young carers and roll out new programmes of delivery including:

- Triple P Parenting framework to support one to one targeted work with CYP
- An outcome star for evidencing outcomes with targeted work in drop-ins
- ChatHealth anonymous texting platform to secondary schools and to wider CYP not accessing mainstream education

On the 1st April 2019, the School Nursing Services and the Health Visiting services will be reintegrated into the Public Health 0-19 Service. This service will be delivered within the Public Health Department under the PHE commissioning framework. Public Health will be commissioning a health safeguarding service working in partnership with the CCG to ensure safeguarding delivery, statutory functions and co-ordination remain safe and effective.

3.4.9 Public Health - Southend

Agency Context

Cafcass (the Children and Family Court Advisory and Support Service) is a non-departmental public body sponsored by the Ministry of Justice. Cafcass represents children in family court cases, ensuring that children's voices are heard and decisions are taken in their best interests.

The demand on the family justice system and on Cafcass services remained very high throughout the year, with rises in local caseloads varying across the country. Overall Cafcass has seen a rise in private law applications (involving arrangements for children following parental separation) and a small decrease in public law applications (involving the local authority), Cafcass is actively contributing to the Care Crisis Review, a sector-wide initiative that aims to stem the increase in care cases and promote safe and beneficial outcomes for children. We are also undertaking innovative projects that seek to improve practice, promote good outcomes for children and make better use of limited resources. An example is the three assessment pathways that we have been developing – domestic abuse; high-conflict; and parental alienation.

Cafcass' strategic priorities in 2017/18 were to: continue to improve our performance and the quality of our work; contribute to family justice reform and innovation; use our influence to promote knowledge and best practice; bring the uniqueness of each child (including diversity considerations) to the court's attention; be efficient and effective in light of high demand and financial constraints.

Safeguarding Children Activity

In February and March 2018 Ofsted undertook its second national inspection of Cafcass, making an overall judgement of outstanding. Ofsted found that practice was effective and authoritative, helping courts to make child-centred and safe decisions, adding value and leading to better outcomes for children. The overall judgement was

influenced by many factors including: the exceptional corporate and operational leadership; sensitive and knowledgeable direct work undertaken with children in relation to a wide range of diversity issues; the culture of continuous learning and improvement; and a strong aspiration to 'get it right' for vulnerable children. The inspection identified some areas for Cafcass to improve relating mostly to the quality of recording and to explaining to court consistently when issues of diversity are not relevant to the application. We will be working on these in the year ahead and will continue to try to improve our services, and to contribute to family justice reform.

Outcomes and Impact of Safeguarding Children Activity

In February 2018, Ofsted judged Cafcass' overall effectiveness to be **outstanding** following a national inspection. We are only the fourth organisation in children's social care to achieve this rating. The following observations were made:

- The overall effectiveness and quality of public law is good.
- The overall effectiveness and quality of private law is good.
- The leadership and management of local services is outstanding.
- The leadership and governance of the national organisation is outstanding.

These judgements were made following an inspection of 600+ cases in seven of Cafcass' service working areas, of which four areas achieved a rating of outstanding and three areas achieved a rating of good.

The final judgement identified the following contributing factors to our **outstanding** rating:

- Exceptional, aspirational corporate and operational leaders work relentlessly to ensure that children and their families benefit from good or outstanding services.
- Since we were rated 'good' four years ago, the chief executive and senior colleagues have worked diligently to develop and support a culture of continuous learning and development.
- Cafcass' highly evolved and mature strategic relationships with its key family justice partners (Her Majesty's Courts and Tribunal Services (HMCTS), the Judiciary and the Association of Directors of Children's Services (ADCS)) have led to creative and innovative services nationally and locally.
- Cafcass practitioners' effective and authoritative practice adds value and leads to better outcomes for the majority of children. The Voice of the Child is strongly embedded in practice throughout our work. This is enhanced by the splendid work carried out by the influential Family Justice Young People's Board (FJYPB).
- Most direct work is well planned, done at the child's pace, and ensures that the child understands what is happening. Stronger reports are enhanced by using the child's own words, resulting in the child's voice contributing to recommendations to the court.
- A rigorous, strength-based performance framework supports the delivery of good and outstanding services nationally and locally. Senior managers have clear plans in place to help staff improve the consistency of performance learning reviews (PLRs) and case planning, and to ensure that relevant diversity issues are fully considered. The National Business Centre (NBC) is exceptionally well-managed, effective and efficient. Support teams such as Cafcass Analytics are integrated into our

front-line work to great effect.

Key Areas for Development

Cafcass' commitment is to show continuous improvement in our performance and to deliver our services as effectively and as efficiently as possible within the resources available. This section describes some of our current, or recent, projects or developments.

In 2017-18, we received:

- 14, 207 new care applications. This is 2.7% (392) lower than 2016-17 and 11.1% (1,415) higher than 2015-16 respectively.
- 42,058 new private law cases. This is 3.8% (1,522) and 12.4% (4,643) higher than in 2016-17 and 2015-16 respectively.

Our current work programme includes the following:

Child exploitation strategy:

In 2017/18, Cafcass has continued to implement the work of the child exploitation strategy which incorporates sexual exploitation and radicalisation. The strategy was set up in 2015/16 and included the creation of regional CSE Ambassadors and team CSE Champions to collate and disseminate information to staff, and to have a "finger on the pulse" of local practice issues. We have further developed the strategy in 2017/18 including:

- o Introducing a way of recording on Cafcass' electronic case management system whether a case features child exploitation.
- Using this data to conduct internal descriptive research on cases known to Cafcass that have featured child trafficking and radicalisation.
- The addition of a child sexual exploitation screening tool into the tools matrix for practitioners to use to assess a child's level of risk of child sexual exploitation in a concise and consistent manner.

There is work currently underway to develop e-learning for staff on trafficking, radicalisation and children who are criminally exploited. This will be finalised later this year.

Apps for direct work with children:

Building upon the success of our apps, Backdrop and This Much!, Cafcass is developing a new app called Voice of the Child to enhance our suite of tools for direct work with children. These apps are designed for use with children in a wide range of circumstances to help them express their wishes and feelings, and may be particularly useful in cases where there are additional challenges around communicating with the child.

The overriding benefit of The Voice of the Child app is that it is contemporary, dynamic and reflective while enabling the child or young person to share their story in their words and images. The vision is to promote engagement by children through technology which is familiar to even pre-school children.

Voice of the Child enables a child or young person to write, draw, type or use characters and emotion icons on customisable backdrops. In doing so, it prompts

discussions about their life – feelings of safety, security, relationships or hopes, and follows the child or young person on their journey.

Engaging with application technology for smartphones and tablets, we can enhance and improve our existing tools to create products that could be released for use by any child in any setting or environment. There is considerable interest in this app throughout the sector to engage children and young people to share their lived experiences. The app will be launched to Cafcass staff in March 2018, there is potential for the app to be adopted by other services within the sector.

• Cafcass Model Office Pilots and MoJ Pathway:

The Model Office supports innovation by facilitating the testing of new operational ideas from colleagues across Cafcass. The project team assists in running and evaluating such pilots, so that new ideas are robustly tested before national implementation. The Model Office portfolio currently holds the following main pilots: Support with making child arrangements; Cafcass Positive Parenting; the Cafcass Plus model; the Child Impact Analysis framework; and the Family Drug and Alcohol Court (FDAC).

Cafcass is also supporting the MoJ on its private family law programme. Cafcass seconds its Business Transformation Analyst to the MoJ one day a week, while operational and specialist colleagues attend MoJ fortnightly updates, engage in regular workshops, and contribute to key decision-making.

Private law assessment pathways:

Cafcass is developing two new private law assessment pathways to help our practitioners systematically assess cases which feature adult behaviours associated with high conflict and parental alienation. The High Conflict Practice Pathway and the Parental Alienation Pathway will sit alongside the Domestic Abuse Practice Pathway in a new framework, and practitioners will decide which of the three is the most appropriate pathway(s) to undertake their assessment. An introductory pathway sets out the principles of private law assessments in Cafcass and advises on how each of the three pathways should be used.

The pathways follow a consistent and evidence-informed approach helping practitioners find an outcome which is truly in the best interests of the children involved. Each case is assessed individually and the final decision is made by the court.

Policy:

Major reform is expected through a 2018 Green Paper on aspects of family justice and the Cafcass AD (Policy) is embedded within MoJ policy one day a week to work on this. The reforms are likely to include additional roles for Cafcass and we will need to ensure that any changes are effective and achievable with a focus on outcomes for children.

The Nuffield Foundation has announced the launch of the Family Justice Observatory development and pilot phase from March 2018, with £5m provisional funding. The FJO seeks to improve the research carried out in the sector and how

the data is used. Teresa Williams is leading our involvement as Director of Strategy.

Research:

In line with the strategic plan Cafcass has undertaken a number of research projects in 2017/18 into:

- o A review of risk factors in private law applications (c100s) Special Guardianship.
- A review of private law cases where domestic abuse is alleged, working with Women's Aid.
- o Best practice within high conflict (Rule 16.4) cases.
- Cafcass also supports a number of important external research projects. Two recently published studies are a study on FDAC (Family Drug and Alcohol Court) outcomes (Broadhurst and Harwin), and research on the impact of the 26-week deadline on child outcomes in the Triborough area (Dickens). A wider national study of the PLO (Masson) is in progress.

Cafcass is considering the possibility of working with a third-party to make our case data available to external researchers.

3.4.10 North East London Foundation Trust (NELFT)

Agency Context

NELFT provides an extensive range of integrated community and mental health services for people living in the London boroughs of Barking & Dagenham, Havering, Redbridge and Waltham Forest and community health services for people living in the south west Essex areas of Basildon, Brentwood and Thurrock. We provide an Emotional Wellbeing Mental Health Service for children and young people across the whole of Essex.

In the period April 2017-March 2018 we became the provider of all age eating disorder services and child and adolescent mental health services across Kent and Medway.

Within the Southend LSCB area NELFT solely provide child and adolescent mental health services.

There is a single safeguarding team that works across NELFT. The team are fully staffed. The Emotional Wellbeing and Mental Health Service (EWMHS) service in Southend is supported by both Jenny Harris and Jay Brown.

Safeguarding Children Activity

Training:

NELFT staff within Southend are required to attend mandatory internal LAC training, PREVENT training and safeguarding children's training at Level 1, 2, or 3 as specific to their role. The Named Doctor for safeguarding and the safeguarding Named

Nurses and advisors are also expected to attend Level 4 safeguarding children's training as this is specific to their role. In addition to this staff are also encouraged to attend a variety of internal Level 3 safeguarding training to include; Protecting Families from Domestic Violence & Harmful Practices, Child Sexual Exploitation, Bespoke training for recording safeguarding concerns on Electronic Patient Records.

Staff were encouraged to attend external and multi-agency safeguarding training delivered through partner agencies and through the LSCB as well as through training offered by other local LSCB within the SET footprint. The safeguarding advisors and Named Nurse attended NHS England training events and learning from other national agencies. Any learning from these events was disseminated through team meetings, Directorate Business Meetings, Safeguarding supervisor network meetings and internal training.

CCG Designate Nurses have attended NELFT training sessions as part of our governance procedures.

Safeguarding Supervision:

NELFT corporate Safeguarding Advisors and Named Nurse carried out 3 monthly safeguarding supervision with staff members who work directly with service users through group and 1:1 supervision as appropriate to their role and responsibilities. During the period April 2017-March 2018 a number of EWMHS staff within Southend completed the safeguarding supervisors training course in order to provide safeguarding supervision to their own team members.

Audit:

During the period April 2017-March 2018 the NELFT safeguarding team undertook internal NELFT wide audits.

Quality of referrals made to social care - The findings from this report were not broken down into findings specific to Southend. However actions and areas identified for improvement in the initial audit were monitored through a re-audit in the latter part of the time period in question. NELFT wide findings in the re-audit were encouraging.

Areas for improvement included the inclusion of older children's details on the referral form, identification around need for an interpreter, attachment of appropriate assessment when referral was made in relation to an escalation of need, evidence in records that discussion had been held within our service around unmet need and use of escalation. Areas identified for improvement included the need for all sections of the referral to be completed fully with details of carer and siblings if information is available, GP details to be included, ethnicity to be identified in the referral, improvement in identification of the local threshold document and use of evidence of this in the referral, improvement required in ensuring the referral is attached to the child's electronic health records and improved identification of risk factors for child.

NELFT safeguarding team repeat this audit on a yearly basis in order to monitor and continue to improve the quality of referrals made to social care by our staff and to be able to identify areas for improvement in a timely manner. The next audit will be able to provide area specific information for Southend as this has been identified by operational service managers as a more useable piece of work for making

improvements and identifying issues within teams.

All audit findings and recommendations forming part of the action plan were disseminated through team meetings, Directorate Business Meetings, Safeguarding supervisor network meetings and internal training. Results were also shared with Designate partners for each locality and LSCB for each locality. Where recommendations have been made, the safeguarding team continues to support operational staff to develop action plans. These are monitored through the internal governance process. This audit report also formed part of a peer audit review completed as an outcome of the JTAI audit within Southend in 2018

JTAI AUDIT- NELFT as a partner agency participated in the Southend Joint Targeted Area Inspection and are a key partner in the implementation of the linked action plan.

Policies

The safeguarding team continues to comment on new polices to ensure safeguarding has been considered. Additionally the Safeguarding team has written or updated the following policies: Managing Allegations Against Staff; Protecting Children And Young People At Risk Of Sexual Exploitation, Management of Missed Appointments, Responding to Sexually Harmful Behaviour Think Family

The Safeguarding Team continue to emphasise the importance of a Think Family approach in safeguarding. An updated Safeguarding strategy and action plan was developed to incorporate our adult and children's teams. Our updated Safeguarding intranet page, reflecting Think Family, which was re-launched in February 2018.

Outcomes and Impact of Safeguarding Children Activity

Senior Safeguarding Meetings are held monthly and facilitated by the Associate Director for Safeguarding & LAC, Named Nurse and Doctor for Southend are in attendance. This working group works together to ensure any performance issues are resolved and quality assurance is undertaken.

Directorate Business Meetings are held monthly and safeguarding updates and exceptions are shared in these meetings as well as holding discussions around performance issues relating to training and safeguarding supervision compliance

Southend EWMHS Operational staff prioritise multi-agency meetings such as child/adult protection conferences, child in need meetings, strategy meetings and at minimum provide reports when for any reason cannot attend. Exceptions tend to be in relation to lack of or late invitation.

The NELFT Safeguarding Advice Service introduced a new recording database in June 2017 and from then until April 2018 Southend EWMHS made 31 contacts with the team for advice and support relating to safeguarding concerns for young people living in Southend.

In the period in question there were 16 referrals made by EWMHS operational staff to children's social care in Southend where they identified safeguarding concerns

through the course of their contact with their service users.

Key Successes

Operational pathways

Safeguarding Supervision – Within Southend in the period April 2017-March 2018 a number of EWMHS practitioners undertook training to become safeguarding supervisors

The safeguarding team has worked with HR to strengthen and update the process of LADO (Local Authority designated Officer) referrals/discussions where there has been an allegation or concern against a staff member who works with children or adults with care and support needs. The number of LADO referrals will be reported and monitored via the HR dashboard from January 2018.

Key Areas for Development

As a result of the JTAI it was identified that there needs to be improved information sharing between EWMHS in Southend and Southend MASH and School Nursing Service. This is a piece of work which will be carried out going forward in to 2019-2020.

There is to be a review of the NELFT CSE policy to incorporate Exploitation as a whole and to review the CSE risk assessment toolkit used by practitioners in 2019-2020.

Training is to be reviewed in line with new Intercollegiate document that is due to be released at the end of 2018. Policies and procedures will also be reviewed in order to encompass new guidance from the revised Working Together to Safeguard Children.

Section 4: Learning from Serious Case Reviews, Child Death reviews and other Reviews

4.1 Serious Case Reviews and Child Safeguarding Practise Reviews

Serious Case Reviews, now known as Child Safeguarding Practise Reviews, are undertaken by LSCBs where a child dies or is seriously harmed and abuse or neglect are known or suspected to be a factor in the death. Their purpose is to identify and implement learning to improve how services work together to safeguard children and they are a statutory requirement.

The LSCB concluded one Serious Case Review and commenced two new Child Safeguarding Practise Reviews during the period covered by this report, following referrals received in April and September 2018. Additionally, the LSCB is participating in a review undertaken by Essex LSCB regarding the child of a family formerly resident in

the Borough of Southend. In response to the undertaking of two new Child Safeguarding Practise Reviews the LSCB Case Review Panel, which had been decommissioned in December 2017 due to insufficient content, was reformed with renewed purpose.

These ongoing reviews are in their preliminary stages at the time of writing, with Terms of Reference agreed, Independent Reviewers sought, and Individual Management Reports and Chronologies commissioned from each agency. It was suggested to the National Review Panel that one of the active reviews should be approached as a national review, due to the high probability that the learning from the review will be relevant throughout the UK. This was initially declined after correspondence with the Panel, but will be held in consideration as the review continues. It is anticipated that the report-writing stage of both reviews should take place following the end of the period covered by this report, although this is contingent on the outcome of the LSCB's ongoing dialogue with Essex Police's Senior Investigating Officer on each case.

It should be noted that the procedure for each review has been reinterpreted in relation to the changes laid out in *Working Together to Safeguard Children* (July 2018); while the reviews are not Serious Case Reviews, they are being conducted in a similar fashion to previous SCRs in the absence of guidance recommending otherwise. As per the new guidance, a Rapid Review was undertaken immediately following the receipt of a referral in September 2018, with significant learning points identified and acted on by the relevant partners well before the expected conclusion of the standard review period.

The action plan from the completed review was signed off by the LSCB Chair in May 2018, updated in July 2018 in response to completed tasks, and remains under monitoring from the LSCB Audit and Quality Assurance subgroup.

4.2 Child Death Reviews

Child Death Reviews for children resident in Southend are undertaken by a multi-agency Child Death Review Panel (CDRP) covering South East Essex. The Panel is chaired by a representative from Public Health and is overseen by a multi-agency Strategic Child Death Overview Panel (SCDOP) for the County. When considering the work of the Panel, it should be noted that not all reviews are completed in the year the notification was received, especially when an inquest or criminal proceedings have been involved.

During the year 1 April 2017 to 31 March 2018 the CDRP received six notifications of deaths of children resident in the Southend area, a 25 per cent decrease from the eight notifications received in the year April 2016 to March 2017 and the fewest of any year since 2010. Of these six, half took place in the first four weeks of life and two were classed as unexpected, necessitating the rapid response process. Infant mortality in Southend is comparable to the average of its geographical and statistical neighbours, with child mortality slightly lower than average.

The CDRP completed five child death reviews for Southend cases from 1 April 2017 to 31 March 2018, a significant reduction from twelve reviews between April 2016 and March 2017. Of these five reviews, two were identified as non-modifiable, having been respectively caused by malignancy and a neonatal event. The remaining three deaths were found to have modifiable factors, and were respectively caused by infection, a chronic medical condition, and trauma or external factors; of these, the two former deaths were related to service provision or access to medical intervention, and the latter

was found to involve parental drug and alcohol use. None of the five deaths reviewed this year were of children who were subject to a Child Protection Plan at the time of death.

Since the reporting period of the Annual report of May 2018 there have been the following child death notifications:

- Nine notifications for Southend-resident children from the period 1st April 2018 to 30th January 2019.
- One child death review has been completed of a child who died in October 2017 who was also subject to an LeDeR Review.

4.3 Learning Disabilities Mortality Review Programme (LeDeR)

The LeDeR programme, a mortality review process for both expected and unexpected deaths of children with learning difficulties aged from 4 to 17 years and adults up to the age of 75, commenced in September 2017. The programme aims to drive improvement in the quality of health and social care service delivery for people with learning disabilities and to help reduce premature mortality and health inequalities in this population. This review process is additional to the Child Death Review.

Section 5: How do we know we are making a difference?

5.1 Child Protection

Where there are concerns, assessments of children are undertaken in accordance with a local assessment protocol based on Department for Education statutory guidance, Working Together 2015. The assessment seeks to establish the level and nature of any risk and harm so appropriate support services can be provided to improve the outcomes for the child. The assessment will ascertain if:

- The child/sibling are a child/children in need (s17 Children act 1989)
- There is reasonable cause to suspect the child/children are suffering, or likely to suffer, significant harm (s47 Children act 1989)
- The child/children are in need of or requesting accommodation (s20 or s31 Children act 1989)

The council collects information about safeguarding children work in Southend, so we know how well children are being safeguarded. This information helps the Southend LSCB decide what their next steps should be.

Data in relation to all safeguarding issues is monitored both locally and nationally. All safeguarding concerns and enquiries are recorded and co-ordinated by Southend Council. Progress from initial concern through to conclusion is monitored for timeliness and quality across a wide variety of measures including the nature and location of harm, service user groups, outcomes, age, gender, ethnicity, etc. This information is scrutinised by the LSCB sub-groups who report key issues and trends to the Board via the Executive group.

5.2 Child protection in Southend

Children living in the area

- Approximately 39,115 children and young people under the age of 18 years live in Southend-on-Sea. This is 21.5% of the total population in the area.
- Approximately 18.9% of the local authority's children are living in poverty.
- Approximately 43% of children and young people under the age of 18 years live in areas classed as the most deprived.
- The proportion of children entitled to free school meals:
 - o In primary schools is 13.6% (the national average is 13.7%)
 - o In secondary schools is 8.1% (the national average is 12.4%)
- Children and young people from minority ethnic groups account for 21.7% of all children attending Southend schools at the time of the spring 2018, compared with 31.8% in the country as a whole.
- The proportion of children and young people with English as an additional language:
 - o In primary schools is 14.5% (the national average is 21.2%)
 - o In secondary schools is 13.3% (the national average is 16.6%)

Child protection in this area

At 31 March 2018, 1,323 children had been identified through assessment as being formally in need of a specialist children's service. This is a decrease from 1,387 at 31 March 2017.

		2015-16	2016-17	2017-18
Children in need episodes at 31 March	Number	964	1,387	1,323
Rate of children in need at 31 March per 10,000 children	Rate	251	358	338

There is, however, an increase in demand both nationally and locally. This is due in part to increased poverty including in-work low income. There is also an increased understanding of emerging risks such as Child Exploitation

Primary Need	2015-16	2016-17	2017-18
Abuse or neglect	82.0	86.6	82.1
Child's disability or illness	9.9	7.4	6.9
Parent's disability or illness	0.9	0.7	0.7
Family in acute stress	1.7	1.7	3.6
Family dysfunction	2.0	1.2	2.4
Socially unacceptable behaviour	1.1	0.6	0.9
Low income	0.9	0.6	0.6
Absent parenting	-	1.0	2.0
Cases other than children in need	0.7	-	0.8

Not stated	-	-	0.0
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Abuse and neglect are key strategic priorities of the Board and work streams relate to these needs.

Referrals completed by children's social care services, in the year ending 31 March, by source of referral

	2015-16	2016-17	2017-18
% Individual	9.0	9.4	8.1
% Schools	15.6	20.5	17.6
% Education services	-	0.4	0.4
% Health services	15.7	11.1	16.3
% Housing	4.1	1.4	2.5
% LA services	14.3	12.3	18.2
% Police	28.5	30.5	24.1
% Other legal agency	3.1	2.6	2.7
% Other	7.3	9.6	5.5
% Anonymous	1.3	1.8	2.7
% Unknown	-	0.3	2.0

	2015-16	2016-17	2017-18
Initial Child Protection Conference within 15 working days	103.0	146.0	105.0
% Initial Child Protection Conference within 15 working days	47.7	45.5	66.0

As at December 2018 the in month performance of % ICPC within 15 working days was 81% which demonstrates the significant improving picture. Timeliness has improved.

	2015-16	2016-17	2017-18
Children who were the subject of a child protection plan at 31 March	189	220	116
Rate of children who were the subject of a child protection plan at 31 March per 10,000 children	49.2	56.7	29.7

At 31st March 2018, 116 children and young people were the subject of a child protection plan. This is a reduction from 220 at 31st March 2017. ¹ Southend Children's Services have explored the reasons behind the rate in reduction of children subjected to child protection plans.

Decisions have been made to take a contextual safeguarding approach to work with adolescents. There is also a continued and increased investment in early help provision

and an increased number of social workers ensuring that children's needs are being met at an earlier stage.

	2015-16	2016-17	2017-18
% Neglect	54.2	58.6	69.1
% Physical Abuse	-	-	-
% Sexual Abuse	-	-	-
% Emotional Abuse	33.8	30.0	16.4
% Multiple	6.0	7.6	11.8

Children looked after in Southend

	2015-16	2016-17	2017-18
All children looked after at 31 March	260	280	291
Rate of children looked after at 31 March per 10,000 children	68	73	74

At 31st March 2018, 291 children were being looked after by the local authority (a rate of 74 per 10,000 children). This is an increase from 282 (73 per 10,000 children) at 31st March 2017. However, as at December 2018 the rate of children looked after is at 78 per 10,000 children. The local authority have explored the increase in the rate of children looked after and report that: practice has improved in infants (under 1s),that there is an improved understanding of the risk of harm experienced by adolescents, and that investment in the Edge of Care Service has ensured that there is not a higher number of children looked after

2018 Placements

Of this number, 147 (or 50.5%) live outside the local authority area 19 live in residential children's homes

- No children are placed in a residential special school
- 213 live with foster families
- 10 live with parents
- 15 children are unaccompanied asylum-seeking children.

In the 12 months prior to 31st March 20182:

- There were 35 adoptions
- 8 children became subject to special guardianship orders
- 114 children ceased to be looked after
- 25 young people aged 18+ on the 7th January 2019 are in independent living arrangements

¹ Characteristics of children in need – 2017 to 2018

² Children looked after in England including adoption – 2017 to 2018

5.3 Outcomes

Children who ceased to be looked after and the number and percentage adopted during the year ending 31 March 2018

	2015-16	2016-17	2017-18
Number of children who ceased to be looked after during the year	105	135	113
Number of looked after children adopted during the year	25	-	35
Percentage of looked after children adopted during the year	23	21	31

- This continues to be an area of strength with the Local Authority
- Adoption performance being in the top five Local Authorities in the country

Care leavers activity (aged 17-18)

	2015-16	2016-17	2017-18
% Total number in education, employment or training	56	57	67

Care leavers activity (aged 19-21)

	2015-1	6 2016-17	2017-18
% Total number in education, employ training	oyment or 60	52	41

Children's Services' quality assurance processes have shown improvements in practice across 2018 with increased proportions of audited cases being graded as good or above.

Section 6: Conclusions and what the Board will be working on in 2019 – 2020

This report described the significant changes in the provision of resources and the introduction of an agreed strategy and work plan.

The LSCB is engaging with partners well and the development of governance including strategic, policy, and procedures is managed in a collaborative way that adds value and deliver outcomes for children and young people.

Outcomes for the LSCB self-assessment have provided evidence of the success of the board and the administration and governance of the arrangements.

2019 will be significant for the LSCB and its transition to the new multi-agency safeguarding arrangements (MASA) (working together 2018.) the new strategic partnership, which will comprise the local authority, police, and clinical commission group, will deliver its safeguarding arrangements through co-production and co-design. The new arrangements follow a statutory timeframe whereby safeguarding arrangements have to be implemented by 29th September 2019.

Over the next year the following areas of development have been identified in response to LSCB partner self-assessment:

- Implementation, with the three statutory partners, of the changes for Working Together 2018.
- Co-design and co-production of the Voice of the Child in designing safeguarding services.
- Restructure of dashboard to enable analysis and interrogation of data so that data reflects partnership priorities and can therefor evidence impact.
- Implementation of learning from serious and local practise reviews to improve services and outcomes for children and young people.
- Promote and facilitate multi-agency training across the partnership considering any scope to jointly commission training with other partnerships.
- Develop community engagement.
- Work alongside and improving the functional working relationship:
 - Violence & Vulnerability Group
 - Health & Wellbeing Group
 - Community Safety Partnership
 - Community Action Group
 - SET (Southend, Essex, and Thurrock)
 - Regional and national groups

Section 7: Appendices

Appendix 1: Board membership and attendance

Board membership and attendance September 2017 – March 2019 (nominated representative or substitute)

Y = Yes, attended

A = Sent apologies

N = No attendance, no apology. This may occur when agencies have become Board Partners after September 2017 or where staffing changes have removed an attendee from their post pending a successor.

Organisation	Current Rep. Name	21 Sep 2017	16 Nov 2017	21 Feb 2018	05 Jun 2018	25 Sep 2018	11 Dec 2018	06 Feb 2019	%
Clinical Commissioning Group	Tricia D'Orsi	Υ	Y	N	Υ	Υ	Υ		
Designated Doctor for Safeguarding	Anupam Shrivastava	Υ	Υ	Υ	Υ	Α	Α		
Essex Community Rehabilitation Co.	Alex Osler	Y	Υ	Υ	Υ	Υ	Υ		
Essex Police	Jason Hendy (DS)	Y	Υ	Y	Υ	Υ	Υ		
Lay Member	Anne Horn	N	N	N	N	Α	Υ		
National Probation Service	Shirley Kennerson	Y	Υ	А	Υ	Υ	Υ		
SBC	Simon Leftley	Υ	Υ	Υ	Υ	Υ	Υ		
SBC Children's Services	John O'Loughlin	Y	Y	Υ	Α	Υ	Υ		
SBC Children's Services	Laurence Doe	Y	Y	Υ	Υ	Υ	Υ		
SBC Councillor	Cllr Helen Boyd	Y	Y	А	Υ	Υ	Υ		
Southend LSCB	Liz Chidgey	Υ	Y	Y	Υ	Υ	Υ		
SUHFT	Denise Townsend	N	Α	N	Υ	Υ	Υ		

Appendix 2: Local Safeguarding Children Board Finance 2018/19

	Description	£
	Salaries	87,819.53
	Salary Recharge	-11,745.03
	Professional Fees: Essex CC	11,102.48
	Professional Fees: E J C ASSOCIATES	21,086.40
	Professional Fees: Leela Consulting Services	1,858.50
	Consultancy: STRATEGIC ARC	11,431.80
	Recruitment	950.00
	Criminal Records Bureau Checks	54.00
	Security	7.00
	Meeting Expenses: Equipment Hire	1,000.00
Evpanditura	Meeting Expenses: Catering/Hospitality	761.15
Expenditure	Office Expenses: Telephone charges	466.92
	Office Expenses: Stationery	25.13
	Office Expenses: Postage	4,005.39
	Office Expenses: Printing	2.56
	Training fees	2,500.00
	Web Design - Danny Barker	350.00
	ICT: ChronoLator Licence	1,130.00
	ICT: Hardware	2,750.00
	Association of Independent LSCB Chairs	1,500.00
	Health and Safety	500.00
	Insurance	200.00
	Total Expenditure	137,755.83

	Description	£
	Other	-62,921.00
	DSG	-10,000.00
	CAFCASS	-805.00
Incomo	Essex CRC	-4,577.00
Income	Essex Police	-20,972.00
	National Probation Service	-1,770.42
	NHS Southend CCG	-33,039.00
	Schools & Colleges	-6,000.00
	Total Income	-140,084.42

Outcome -2,328.59

Appendix 3: Self-Assessment Tool

The tool is split into three sections:

- 1. Statutory duties set out in the Children Act 2004
- 2. Statutory Guidance key roles and responsibilities
- 3. Enablers of board effectiveness

The outcomes of the self-assessment will be collated by the LSCB Manager and provided anonymously to the LSCB for discussion, alternatively the self-assessment could be completed collectively in small groups facilitated by an external assessor with overall findings discussed as a whole board. Each statement should be attributed one of the following ratings:

1 = poor

2 = adequate

3 = good

4 = outstanding

This summary includes the:

Mode – Score that appears most (the closes whole number)

Mean – Average score (the closes whole number)

Range - Difference between lowest and highest score (the closes whole number)

The following is compiled from partner input from six agencies. The self-assessment of the board by partner agencies identifies and number of key strengths and areas for development which are summarized in the table below.

	Self-Assessment Outcomes (Score) – Set Against Specific Duties	Mode (Score appearing most frequently)	Mean (Average score)	Range (Differenc e between high and low score)
Statutory Du	uties set out in Section 14 of the Children Act 2004			
Strategic	To publish a strategic plan for each financial year that sets how it will meet its main objective, and what the members will do to achieve this.	3	3	2
Plan	The plan should be evidence based and make use of all available evidence and intelligence from partners to form and develop its plan.	3	2.8	1
Annual Report	, , ,			
Case Reviews	To arrange local child safeguarding practice reviews, including SCRs, in accordance with Section 16F of the Children Act.	2/3	2.5	1
Statutory G	uidance - Key Roles and Responsibilities			
Identify the role, responsibility, authority and accountability with regard to the action each agency and professional group should take to ensure the protection of children.				1
	ays of analysing and interrogating data on safeguarding notifications that increase the LSCB ng of prevalence of abuse and neglect locally that builds up a picture over time.	2/3	2.7	1.5
Establish how it will hold partners to account and gain assurance of the effectiveness of their arrangements.			2.8	1
Determine its arrangements for peer review and self-audit.			3.2	1
Establish mechanisms for developing policies and strategies for protecting children which should be formulated, not only in collaboration and consultation with all relevant agencies but also take account of the views of children, their families, and carers.		3	2.8	1
Develop pre	eventative strategies that aim to reduce instances of abuse and neglect in its area.	3	3	0
Develop strategies to deal with the impact of issues of race, ethnicity, religion, gender, gender orientation, sexual orientation, age, disadvantage and disability on abuse and neglect.		3	2.3	2
Balance the requirements of confidentiality with the consideration that to protect children, it may be necessary to share information on a 'need-to-know basis'.			3.7	1

Identify mecha	anisms for monitoring and reviewing the implementation and impact of policy and training.	3	2.5	2
Carry out case	e reviews and determine any publication arrangements.	3	3	2
Evidence how	LSCB members have challenged one another and held other boards to account	3	3.2	1
	-agency training and consider any specialist training that may be required. Consider any commission some training with other partnerships.	3	2.8	1
Enablers of Bo	pard Effectiveness			
Aim and Vision	All board members have a clear understanding of the purpose and aim of the LSCB.	4	3.7	1
Membership	All members of the LSCB have the requisite skills and experience necessary for the LSCB to act effectively and efficiently to safeguard children in its area.	4	3.5	1
	LSCB Membership covers the full range of stakeholders and expertise required for an effective LSCB.	3	3.2	2
	LSCB Members from core partner agencies attend every meeting, including Southend Council, Southend CCG and Essex Police	4	3.7	1
Attendance	3	3.2	1	
Risk	Board Members contribute to the development and ongoing review of the LSCB Risk Register; including mitigating actions and agreeing which direct action to take.	3	3.4	1.5
Finance	Board Members regularly monitor the LSCB budget, resource allocation discuss potential projects.	3	3	2
Leadership	Board Members actively raise the profile of the board and its role.	3	3.3	1
	The Leadership Executive Group clearly articulate the role of board members, encourage active discussion by all board members, encouraging full participation in strategic planning, board development opportunities, and individual agency ownership of tasks.	3	3.2	1.5
	The Independent Chair with the support of the Board Manager is proactive in raising the profile of the LSCB with professional stakeholders and the community.	4	3.5	1

Self-Assessment Tool: Examples of Commentary by Partners

Strategic Plan

- "Board members are involved in the creation of the strategic plan and take ownership of actions."
- "Revisions to the use of information and intelligence have strengthened this area during 2018."
- "The Board clearly demonstrates what the main objectives are and how we will achieve them."
- "The Board has a good understanding of partners view points and takes into account all information and intelligence"
- "The plan is themed and board members are asked to give feedback on any barriers safeguarding and that these are responded to."

Annual Report

- "All members are asked to contribute to the Annual Report by giving a specific account of their agency's safeguarding context, outcomes and successes."
- "Yearly we are given the opportunity to fully engage with this process and provide feedback. Amendments are made as required and the final copy is presented to the board for sign off."
- "The approach of completing the annual report is an area of strength as there is now a consistent way of including feedback from safeguarding partners."

Case Reviews

- "I am aware that there has been professional disagreement regarding the arrangement of a recent safeguarding practice review, and it may be that this particular review could have been arranged differently. However, my previous experience of the arrangement of SCRs and agency's cooperation with this process in Southend is good."
- "The process of arranging practice reviews has developed over the year and is becoming an area of strength. This has worked well during 2018 and has included complex cases where the issue of publication presented a challenge. The partnership worked together well in this regard."
- "There is a designated panel which feeds to the board and responds to demands for review. This is a multi-agency attendance and the responsibilities for partner agencies are made clear."
- "The board can demonstrate a proactive approach to reviews and publication is debated at the SCR group taking into account the learning from the review and whether the families involved would be identifiable. National reviews are discussed and summarised to ensure local partners share the learning."

Role, Responsibility, Authority and Accountability

- "I [am] clear about our role and responsibilities in relation to safeguarding children, and as a member of the board."
- "We are a lead safeguarding agency and we are aware of our role, and the roles of others, in safeguarding children"

• "There is a clear view of your obligations and tasks set out from meetings and you are accountable to the Board and the community."

Holding Partners to Account

- "This is an area of improved practice with schedules for reporting becoming clearer during 2018. Oversight of the multi-agency JTAI action plan and Children's Services Improvement Plan is an example of this."
- "Being held to account is vitally important to a successful board and this is completed in a constructive environment."
- "Partners hold each other to account for their contribution to the safety and protection
 of children and young people, facilitated by the chair. Both boards monitor
 attendance closely and ensure all partners are able to express their views and
 feedback."

Developing Policies and Strategies

- "As an agency working across Southend, Essex and Thurrock, with operational teams in each area, I value the collaboration across SET for the development of procedures to safeguard children – the SET procedures – so all teams can work to the same policy set."
- "Key policy development is generally formulated on a SET wide basis. Many professionals have to work across different organisational boundaries therefore it is important that this approach continues wherever possible.
- "The Board is good at taking all partners views in making policies and strategies. It has a good understanding of what is happening within its community."
- "The board reviews key themes to ensure the work of the board assimilates with the local safeguarding picture and develops strategies to address emerging risks."

Preventative Strategies

- "The boards' communication, communities and schools work are good example of preventative work. In addition the Southend combined boards (LSCB, SAB, HWB, and CSP) work on their violence and vulnerability plan is an excellent example of preventative work, as well as responsive work."
- "The Board has input to the development of Early Help services and receives reports on the effectiveness of the service. The Chair of the LSCB is a member of the Health & Wellbeing Board and acts a 'critical friend'."
- "The LSCB contribution to the Violence and Vulnerability Board is an area of strength in this regard. The audit of referrals relating to children aged under 1 year old supported strategies being developed for improvement in practice within children's services"

Confidentiality

- "I think that all agencies are well sighted on the issues underpinning information sharing arrangements, including consent; when consent can be overridden, and information on a 'need to know' basis."
- "The guidelines around confidentiality are explicit within the work of the board and sub-groups."

- "We are confident that the need to safeguard takes priority over confidentiality requirements and that the LSCB is clear on this issue"
- "The development of the MARAT and MASH has improved the quality and timeliness of information sharing to protect children and young people."

Multi-Agency Training

 "I think that all board members agree, and promote multi-agency training as a critical component of all our training plans; and the board as a whole recognises and promotes the importance of training."

Challenge

- "Board members challenge each other as 'critical friends'. There is external challenge through the Joint LSCB & SAB Scrutiny Panel."
- "The Board has clearly challenged each other in keeping children safe within Southend as already stated in a constructive environment."



Appendix 4: Glossary

A&E	Accident and Emergency	HR	Human Resources
AQA	LSCB Audit & Quality Assurance Subgroup	HSB	Harmful Sexual Behaviour
CA	The Children Act 1989, 2004, or 2014	HWB	Health and Wellbeing Board
CAIT	Essex Police Child Abuse Investigation Team	ICPC	Initial Child Protection Conferences
CARA	Centre for Action on Rape and Abuse in Essex	JTAI	Joint Targeted Area Inspection
CE	Child Exploitation	LA	Local Authority
CE	Criminal Exploitation	LAC	Local Area Co-ordinator
CCG	Clinical Commissioning Group	LAC	Looked-After Child
CED	Clinical Electronic Documentation	LADO	Local Area Designated Officer
CDR	Child Death Review	LeDeR	Learning Disabilities Mortality Review
CDRP	Child Death Review Panel	LPT	Local Police Team
CME	Children Missing Education	LSCB	Local Safeguarding Children Boards
CP-IS	Child Protection - Information Sharing project	MARAC	Multi-Agency Risk Assessment Conference
CPD	Continuing Professional Development	MARAT	Multi-Agency Referral and Assessment Team
СРР	Child Protection Plan	MASA	Multi-Agency Safeguarding Arrangements
СРРС	Essex Police Crime and Public Protection Command	MASH+	Multi-Agency Safeguarding Hub (This is the same as'MASH')
CQC	Care Quality Commission	MCA	The Mental Capacity Act 2005
CRC	Essex Community Rehabilitation Company	МНА	The Mental Health Act 1983, 2007, 2017
CRU	Essex Police Central Referral Unit for domestic abuse	NAI	Non-Accidental Injury
CSE	Child Sexual Exploitation	NHS	National Health Service
CSP	Community Safety Partnership	NHSE	National Health Service Executive
DA	Domestic Abuse	NSPCC	National Society for the Prevention of Cruelty to Children
DASS	Director of Adult Social Services	OFSTED	Office for Standards in Education, Children's Services and Skills
DCS	Director of Children's Services	PHE	Public Health England

DoLS	Deprivation of Liberty Safeguards	PREVENT	part of CONTEST, the UK Counter Terrorism Strategy
DV	Domestic Violence	PLR	Practise Local Review
ECC	Essex County Council	PQiP	Professional Qualification in Probation
EHE	Elective Home Education	SAB	Safeguarding Adults Board
EPUT	Essex Partnership University Trust (formerly SEPT and NEPT)	SBC	Southend Borough Council
ESCB	Essex Safeguarding Children Board	SCDOP	Strategic Child Death Overview Panel
EWMHS	NELFT NHS Emotional Emotional Wellbeing and Mental Health Service	SCN	Safeguarding Clinical Network
FII	Fabricated or Induced Illness	SCR	Serious Case Review
FM	Forced Marriage	SEND	Special educational needs and disability
НВА	Honour-Based Abuse	SUHFT	Southend University Foundation Trust
HCP	Healthy Child Programme	SET	Southend, Essex & Thurrock
HMIC	Her Majesty's Inspectorate of Constabulary	STP	Sustainability and Transformation Partnership
HMIP	Her Majesty's Inspectorate of Prisons	STW	Identifier for a specific Serious Case Review