

# **Newham Local Safeguarding Children Board Report**

**April 2018 – September 2019**

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# Foreword by the Independent Chair of the Board and Partnership

The period covered by this report is April 2018 until September 2019. In line with the requirement set out in s14A of the 2004 Children Act, progress on child safeguarding in the 2018/19 business year and the first half of the current business year up to the end of September 2019 is set out. Our next report will cover October 2019 until March 2020, the first 6 months of the Newham Safeguarding Children Partnership, introduced as a result of recent reforms of the function. We have taken this decision in order for the new independent Chair, Julia Stephens Row, to put her stamp on the first few months of the new arrangements and to report on those publicly.

## **Priorities, based on local need and the data that backs it up**

We had 5 priorities in the 2018/19 business year. By the end of the reporting period, I believed we had completed what we set out to do with two of those priorities so, in consultation with partner agencies, I decided to concentrate on delivering improvements in youth safety and violence: to neglect; and to child sexual abuse. Youth safety in particular assumed an ever-greater importance during the reporting period. One of our cases was selected by the national Child Safeguarding Review Panel to help inform their first national report – on adolescents in need of state protection because they face criminal exploitation.

Here are our 5 priorities:

1. The criminal exploitation of children and young people
2. Supporting and safeguarding children affected by parental mental health
3. Child neglect
4. Suicide and self-harm
5. Child sexual abuse.

## **Serious Case Reviews and the new system for reviewing**

The reviews we carried out and the learning points are set out in the body of this report. I was especially pleased that the transition from the programme of Serious Case Reviews to rapid reviews of practice with flexibility about how Newham goes about acquiring and distributing learning was a smooth one. At the time of writing, commissioning and completing rapid reviews has become standard practice. Thanks are due out Newham Council's Principal Social Worker, Beverley Halligan, for being instrumental in making and achieving this complex shift in practice and in expectations.

## **Sharing the report and testing our approach**

I would like this report to have the wisest possible circulation, the issues are that important. Whilst scrutiny is traditionally the province of local politicians, the media and Ofsted and statutory bodies like ours, I believe the best scrutiny comes from people who are on the receiving end of services and interventions, not just the professionals. I began to take steps to engage with and involve children, young people and their families in the work of the Board and Partnership. I very much hope this direction of travel will continue and even speed up.

## **Putting my appreciation on record**

I took over as Interim Chair just before the end of 2018. I will have completed a year in my role by the time I hand over to Julia Stephens Row in December 2019. I am pleased to have made progress on important issues for the future, such as harmonising some aspects of how this Board works together with the Safeguarding Adults Board (the SAB) in Newham. A Think Family approach is especially relevant as problems for one family member inevitably have profound repercussions for others which an all-age approach can help to understand and support.

I want to place on record my profound thanks to the Board secretariat for supporting me and for all of my Board members for their relentless focus on doing what's right and doing what's best for some of the most troubled and vulnerable children and young people in Newham.

Frances Pearson  
December 2019

# The Newham Safeguarding Children's Partnership (NSCP)

## Who we are

The Newham Safeguarding Children Partnership (NSCP) is a partnership of statutory and non-statutory organisations, representing Newham Council - through its social care and education services -, the police, the health service and smaller services like Probation and Cafcass. Most services operate within the geographical boundaries of the London Borough of Newham though some like the health service cover several East London boroughs and the Metropolitan Police operate London-wide. The NSCP has an interim independent Chair, Fran Pearson, who took over from Nancy Kelley in December 2018 and who will remain as Chair until the new permanent Chair, Julia Stephens-Row takes up her post in December 2019.

## The statutory partners

The statutory partners are Newham Council, Newham Clinical Commissioning Group (CCG) and the Metropolitan Police through their Basic Command Unit in charge of local policing in Newham. Under new arrangements published in September 2019, the 3 statutory partners have a joint responsibility for child safeguarding in Newham. In Newham, the partners decided that education services would be the 4<sup>th</sup> partner and would have equal status in all of the arrangements, given their importance to the developing lives of children and young people and how they are kept safe.

In the table overleaf, Newham Council has set out its future objectives for partnerships and the other partners share this vision and ambition.

Objectives	Actions
<b>A strong and aligned local multi-agency partnership is in place.</b>	Develop a multi-agency children and families partnership board to drive the strategic ownership and direction of services to children and families across the borough.
<b>The safeguarding partnership provides effective and meaningful scrutiny.</b>	Ensure that the improvement priorities for the Improvement Board and NSCP continue to be closely aligned, providing robust challenge to the NSCP to ensure a strong focus on monitoring and evaluating the effectiveness of frontline practice.
<b>Performance and outcomes are regularly monitored, with risks managed and successes recognised.</b>	Monitor and challenge an agreed multi-agency dataset so that board members can actively quality assure, evaluate and challenge the effectiveness of services.

Front-line services were under great pressure during the period covered by this report. The low point was the 'inadequate' grading given to Children's Social Care in Newham by Ofsted, an indicator of the need for fundamental improvement. This bore out concerns by several partner agencies such as schools, who felt Children's Social Care was not willing to share the risks to some individual children and young people and the police, who felt that the high number of agency social workers and churn in front line staff meant that joint investigations were unduly hampered.

Towards the end of the reporting period, agencies were reporting improvements in this picture and there is now all all-round commitment and willingness to go on improving.

As part of this push on improvement, the statutory partners decided to retain an independent chair of the Partnership rather than to shift to a 'scrutineer' role, which is a less intensive role. Partners thought that improvements would be accelerated by an independent chair in a position of multi-agency authority helping them to drive up standards.

# Our priorities

*The board's 5 priorities for 2018/19 and the top 2 priorities for the first half of the 2019/20 business year.*

The 5 priorities for 2018/19 were:

- **Priority One:** Criminal Exploitation of children and young people; *continuing as a priority in 2019/20;*
- **Priority Two:** Supporting and safeguarding children affected by parental mental health; *a task and finish group to conclude this work by March 2020;*
- **Priority Three:** Child Neglect; *continuing as a priority in 2019/20;*
- **Priority Four:** Suicide and Self harm; *work on this priority has been complete and other working groups are well established*
- **Priority Five:** Child Sexual Abuse; *continuing as a priority in 2019/20.*

## Strategic priority one:

**I Come From** – a poem by Forest Gate Youth Group, with Laila Sumpton

**I come from**

burgers eating,  
candy shops selling,  
young adults shouting,  
youth centres chilling,  
youth centres warning.

Can you hear me?

**I come from –**

schools trapping,  
teachers neglecting,  
houses fighting,  
hospitals heaving,  
believers preaching.

Can you hear me?

I come from –  
cultures speading,  
mums rushing,  
children laughing,  
men harassing,  
gangs trapping,  
mothers crying.  
Can you hear me?

I come from –  
home leaving,  
carers earning,  
children losing,  
mothers changing,  
authorities abusing.  
Can you hear me?

I come from –  
drill implanting,  
police judging,  
gangs roaring,  
postcodes warring,  
knives dripping,  
friendships failing.

Can you hear me?  
I come from –  
dreams soaring  
hopes birthing,

employers barring,  
adults stereotyping,  
inspiration fading.  
Can you hear me?

We come from –  
gangs hustling,  
parks dealing,  
blocks smoking,  
youth dying,  
Can you hear us?

**By Forest Gate Youth Group, with Laila Sumpton from Protection Approaches.**

## **Overview of progress and achievement**

### **Criminal Exploitation of children and young people**

- An increase in knife and weapon offences was reported. Of particular concern is the increase of carrying on school premises. Despite this, there have been fewer exclusions from school on behavioural grounds and Newham's school system is an inclusive one;
- An increase in contacts to the MASH were reported from schools where exploitation or youth violence was the primary concern;
- Gangs were an issue in 5% of cases which was probably an underestimate as this is in the mid-range for London and Newham has been one of the London Boroughs most affected by the rise in knife crime;
- Fewer incidents of grooming in school locations were being reported
- The lessons from the Serious Case Review into the death of Chris and the Learning Review about Child R were being applied (evidenced by snapshot audits);
- The new Complex Safeguarding Hub has been praised by partners for the effectiveness of responses to referrals about criminal exploitation and youth violence;
- A number of criminal exploitation workshops were provided over the period covered by this report, focussing on how young people are targeted to join groups, the business model of county lines and the safeguarding response to criminal exploitation.
- An all-age exploitation team is being planned under one command as part of the programme of work to unify a number of programmes currently run separately by the Children's and Adult's Boards.

The dataset below shows the data currently held on exploitation. \*Authorised tools

	2018/19 Q1	2018/19 Q2	2018/19 Q3	2018/19 Q4	2019/20 Q1	2019/20 Q2
<b>Total number of children identified as exploited during the period (sum of new flags + referrals with exploitation + assessment with exploitation (1+2+3))</b>	201	222	270	239	233	175
<b>Number of referrals to CSC that had exploitation factors and progressed to assessment (completed in month) (2)</b>	91	118	167	80	68	36
<b>Number of assessments (completed in month) with Exploitation factors AND outcome of CIN or CP</b>	40	34	22	54	52	57
<b>Number of exploitation tools authorised in month</b>	0	0	13	95	101	81
<b>Number of authorised Tools with exploitation indicated (1)</b>	0	0	10	62	63	44
<b>Number of assessments (completed in month) with exploitation factors indicated at the end of assessment (3)</b>	110	104	93	97	102	95

***NB confirming the full explanation of Authorised tools***

## Strategic priority two

### Overview of progress and achievements

In the first half of the period covered by this Report, a Task and Finish Group was set up to investigate and assess the level of provision in Newham for families affected by parental mental health. The aim was to identify how support for children can be improved and how a model for families with longer-term needs could be developed.

The following relevant factors emerged:

- It is not possible through local databases to aggregate data into a meaningful picture at a system-wide level of the extent of parental mental illness in Newham. Instead, a manual trawl was carried out to identify a sample of families about whom provisional conclusions might be drawn. This sample was 45 parents and 110 children linked to the parents;

- The list of parents was cross-referenced to child health (the Best Start in Life Universal Plus offer) and early help records (from Families First and the Assessment and Early Intervention services in children's social care) in order to assess the level of service offered to these parents and children;
- After appropriate consents were obtained, parents and children were contacted and asked to provide feedback about the impact and outcomes of what was offered to them;
- The Task and Finish Group concluded that these families are in need of additional support which was in general being provided at a reasonable level by universal services. However, a targeted early help service was rarely provided and only 1 of the 45 families were accessing carer support;
- There was evidence of good joint working with the 2 families whose children were subject at the time to child protection plans.

We provided 2 one-day training courses, one about the impact of parental mental health on children and young people, put on twice and the other covering perinatal mental health, put on 4 times. The first event focussed on improving multi-agency assessments and interventions. The second on perinatal mental health taught practitioners about local treatment pathways, the management of risk in the perinatal period and the impact of stigma and culture on parental mental illness.

We held a successful Stakeholder Workshop on parental mental illness on 20 June 2019, convened jointly by the Partnership and by the charity, Our Time. The workshop achieved the following 2 objectives:

- To raise awareness about parental mental illness and its impact on children and to think about the issues in the Newham context;
- To map the current provision for families affected by parental mental illness so as to identify what is currently in place, what is missing and areas for improvement. A link to current provision is on the NCSP website at [www.ncsp.org.uk](http://www.ncsp.org.uk);
- Our Time will continue to provide awareness workshops during the first half of 2020.

## Strategic priority three

### Overview of progress and achievements

- Referrals to the MASH were more consistent. At the end of social care assessments, 9% of cases had neglect identified;
- In line with the national picture, about 50% of child protection plans were for neglect;
- Where child neglect was the primary concern, a referral was made to children's social care, not early help services;
- Use of the Graded Care Profile (GCP) was low despite extensive training and further offers of training across professional groups – 6 one-day courses at Levels 2 and 3 were provided using the GCP assessment tool with a video and manual;
- The GCP tool was being loaded on multi-agency IT systems so that use in time can be fully utilised.
- An introductory Level 1 half-day course about recognising child neglect was also delivered.

## Strategic priority four

### Overview of progress and achievements

- In the eighteen-month period covered by this report, there was a rise in Tier 4 admissions as a result of self-harm;
- Waiting times for CAMHS are falling;
- Following assessment by social care, approximately 4% of cases are concluded to have an element of self-harm;
- Steps were taken to extend the Suicide Prevention Strategy into a fully-fledged Suicide Prevention Partnership, launching in 2020;
- A follow-up review of the use of strategy meetings which was recommended after the suicide of a young person in 2016 found that the response to concerns was prompt and effective and that decision making was appropriate at the early stage. Given the urgency of suicide risk, this was a positive finding. Areas for further improvement were to have a less variable use of medicals: to automatically consider siblings: and to report the outcome of referrals back to referrers more consistently. The development of an integrated assessment service and refresher training about the use of strategy discussions and meetings were the outcomes of this follow-up review;
- A new nurse-led pilot crisis service across East London was successful in reducing waiting times, supporting admissions and offering brief intervention when needed. Funding to extend this will be sought;

- Triple Aim Project. This is an East London-wide quality Improvement project aimed at a population health level to reduce self-harm in the school population. The local school in Newham in Kingsford School. This is a multi-agency project involving CAMHS, Headstart, the school and Public Health to engage with pupils at the school to explore the risk and protective factors that contribute to self-harm in this particular school's population. The aim is to identify the determinants that make children more at risk of self-harm but also to look at preventative and supportive strategies that can help;
- A follow- up audit of hospital discharge showed that the transfer to community mental health services for young people was being handled well.

## Strategic priority five

### Overview of progress and achievements

- 4% of contacts and assessment are identified as involving sexual abuse;
- Children's social care carried out a single-agency audit of their CSA work in October 2018;
- 2 one-day courses were provided, focussing on recognising and referring CSA and in how to strengthen children's resilience;
- A new CSA course will be commissioned as part of the new Training Strategy and Programme from April 2020;
- An NHS audit of self-harming presentation suggested that a high proportion of children who had experienced Child Sexual Abuse. This was of particular concern for 16-18-year olds who were not covered in the same way as younger children by admission procedures to hospital. The concern that these young people do not necessarily get equitable care in this regard and may well present with higher risk is an issue we will take forward in future planning.

## Other priorities

Although we concentrated on a small number of priorities, we had other priorities reflecting the complexity of our operating environment, including:

1. Advocacy Services for children with special needs (and advisory services like SENDIAS);
2. EHC Plans which are improving but where there is still a long way to go (in the Education Transformation Programme): re-designed exclusion pathway guidance;

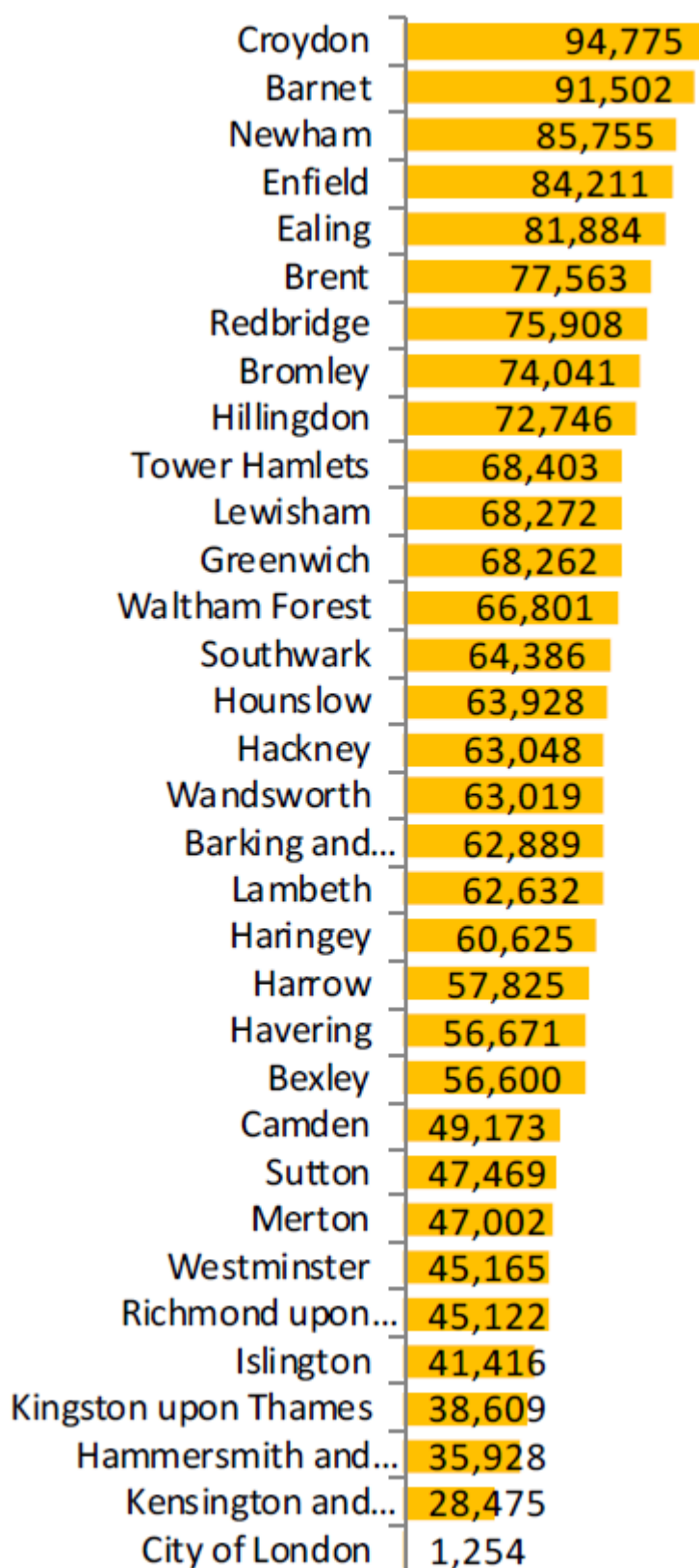
3. Equipment for children with complex needs (following the SCR on Child L set out below);
4. Children's social care are better able to assess risks from violent adults;
5. Children who miss health appointments, seeing this as starting a discussion about the wider meaning of 'missing';
6. Producing a slide pack to share the learning from the AB and AG cases and putting these into an open-access library.

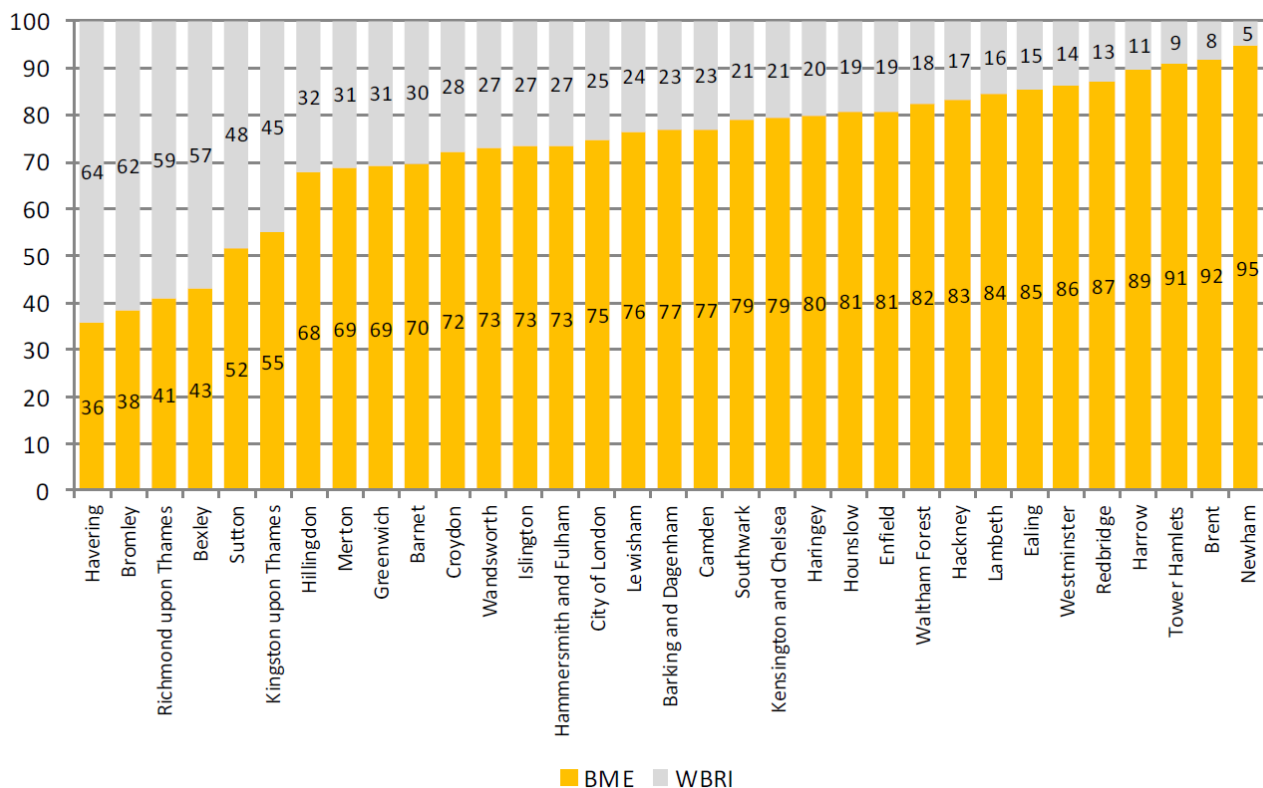
# Data about children and young people in Newham

## General

- **Population** - 352,005 (2018 midyear estimate) a fast-growing population 1991 (211,137); Newham is the 10<sup>th</sup> most densely populated area in the country (the 9 above Newham are also London boroughs);
- **Births** - Mid 2018 population estimate show Newham to have the second highest rate of births (per total population) in the country (Barking and Dag top) – Newham shows 5800 births per year;
- **0 to 17 population** - 86,567 One of the ‘youngest’ age structures in England;
- **Ethnicity** - 95% of primary children and 94% of secondary school children from an ‘ethnic minority’ group made up of 46% Asian; 24% Black; 13% white Other; 6% White British; 6% Mixed; 6% Other; this means Newham is the second most ethnically diverse area in the country (Tower Hamlets is the most diverse);
- **Languages** - over 200 separate languages are recorded in schools; 73.3% (P) 63.6% (S) of pupils have a first language other than English. Only Tower Hamlets records higher levels;
- **Religion** Christian (40%), Muslim (32%), Hindu (8%);
  - **However**, the areas that appear to be showing the improvement seem to be those where new apartment builds have been prevalent, these are often not family properties and therefore the increase in affluence is not related to families with children – Newham has progressed from 2<sup>nd</sup> (in 2010) to 25<sup>th</sup> (in 2015) to 34<sup>th</sup> (in 2019);
- **IDACI (IMD)** – 2015 has 19 Lower super output area in the lowest decile, in 2019 this has fallen to 6, - Indications are that income deprivation effecting children (IDACI) has shown improvement;
- **Barriers to housing and services (IMD)** – However barriers to housing have got worse with ALL 164 Lower super output areas in Newham falling into the lowest decile in the country;
- **Home ownership** - Newham has one of the lowest owner occupying levels in the country with only 33% of homes being owner occupied and 34% being privately rented (2011 census);
- **Private Renting July 19** there were 36205 licenses for private renting in Newham;
- **Household income** - For those living in Newham the median gross weekly income is £598.80. This is lower than the London average of £670.80 (Annual survey ASHE 2018);
- **Economic Activity** – Unemployment is higher than London average at 5.5% (London 5.1%);
- **Mobility** - Newham has one of the most highly mobile populations in London – 20% population churn (mid 2018 pop estimates);

- Components of change shows Newham to have the 6<sup>th</sup> greatest 'international migration inflow' in the country with over 12,000 per year (mid 2018 pop estimates).





### Data about safeguarding

- Looked After Children – 423, with older children disproportionately represented
- Children with child protection plans – 392
- Children undergoing assessment – 779
- Children in need - 1494

NB Asian children are underrepresented in all aspects whilst white children are equally over represented.

### Contacts, referrals and assessments

#### Contacts

- Decline in the number of contacts processed by MASH, probably due to better engagement with partners and a resolution of issues without the need for a formal referral (this is only a hypothesis at this stage);
  - 2018/19 average 1950 per month
  - YTD – average 1500 per month
- Police largest contact source (36%);
- Age profile of contacts does not reflect Newham population (disproportionate numbers of older children)
- 29% of contacts result in a referral to SC (YTD) (25% 2018/19).

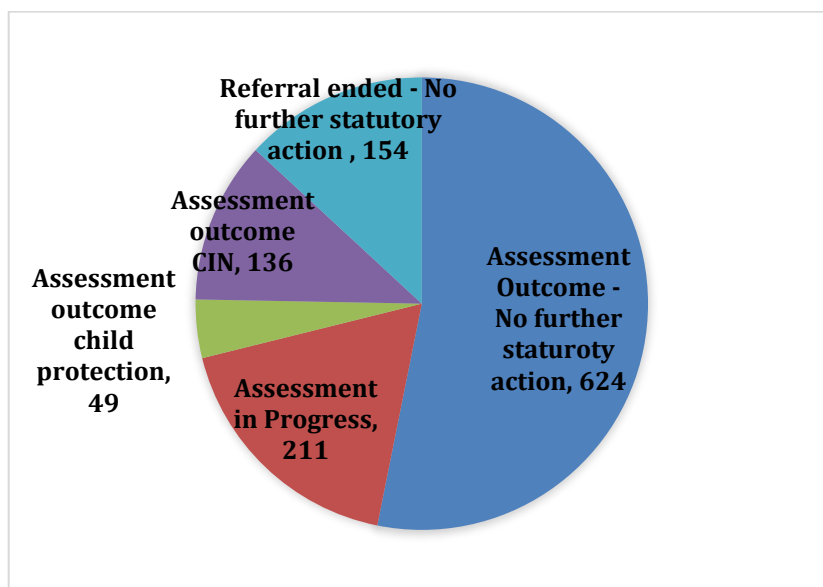
Agency Type	2018/19 Q1	2018/19 Q2	2018/19 Q3	2018/19 Q4	2019/20 Q1	2019/20 Q2
Anonymous	28	14	17	21	11	13
Education Service – PRU	34	10	33	29	10	5
Education Services - Home Education service	4	2	9	4	5	2
Health Services - A & E	33	20	22	49	63	50
Health Services - Child Adolescent Mental Health	26	26	35	28	39	40
Health Services - Community Mental Health Team	25	36	10	15	18	10
Health Services – GP	58	77	95	86	73	83
Health Services - Health Visitor	22	36	25	17	26	33
Health Services - Home Treatment Team	5	10	11	4	8	7
Health Services – Hospitals	224	245	372	414	385	328
Health Services - Maternity service	60	106	124	128	76	100
Health Services – Other	108	124	95	203	150	219
Health Services - Perinatal health	10	9	10	3	19	6
Health Services - School Nurse	1	2	0	2	0	0
Housing - Housing Association	4	9	15	5	4	9
Housing - Local Authority	59	67	38	22	20	33
Housing - Private Landlord	0	0	3	0	0	0
Individual – Acquaintance	13	12	15	5	5	6
Individual - Family member	98	77	84	110	96	143
Individual – Self	24	39	30	46	25	28
LA Service - Early Help	71	41	21	57	50	17
LA Service - Newham Adult Social Care	20	26	15	16	21	15
LA Service - Newham Children's Social Care	408	458	467	388	360	313
LA Service - Non-Newham Adult Social Care	7	6	2	9	0	14
LA Service - Non-Newham Children's Social Care	172	351	478	431	253	255
LA Service - Youth Offending	34	33	30	24	19	21
Legal Agency – CAFCASS	5	211	130	99	20	18
Legal Agency – Courts	47	62	43	73	20	25
Legal Agency – Prison	8	12	18	20	8	11

<b>Legal Agency – Probation</b>	17	151	234	157	48	67
<b>Legal Agency – UKBA</b>	26	48	55	50	41	47
<b>Legal Agency - YOI and/or Secure Training Unit</b>	0	0	0	6	0	0
<b>Other – Charities</b>	52	125	60	86	113	68
<b>Other - Children's/Outreach Centre</b>	47	33	26	35	48	24
<b>Other - Faith Organisations</b>	0	0	0	10	5	0
<b>Other - Independent Providers</b>	66	57	125	37	57	73
<b>Other - LBN Youth Service</b>	2	10	2	0	6	3
<b>Other - Voluntary Organisations</b>	81	85	121	128	69	44
<b>Police</b>	3885	2280	2163	2019	1757	1431
<b>School - 6th Form College</b>	2	6	33	16	21	15
<b>School – Academy</b>	127	112	159	142	111	67
<b>School – Independent</b>	7	5	24	13	21	18
<b>School – Primary</b>	247	143	346	447	352	223
<b>School – Secondary</b>	181	128	187	302	189	144
<b>Unknown</b>	23	19	21	20	23	30
<b>(blank)</b>	83	65	75	107	129	127
<b>Grand Total</b>	6454	5388	5878	5883	4774	4185

### ***Referrals***

- Rate of referrals in Newham was above SN and Eng. (2017/18) however fell 2018/19 and for the year to date and is now in line with SN and Eng;
- During the same period the percentage of referrals not proceeding to assessment had fallen from 13% (high compared to SN and Eng.) to a present figure of 4;
- Re referral rates are in line with SN and Eng.

Assessment outcome CIN plan	<b>136</b>
Assessment outcome Child protection	<b>49</b>
Assessment outcome – No further statutory action	<b>624</b>
Assessment not complete	<b>211</b>
Referral ended – No further statutory action	<b>154</b>
Total referrals in Period	<b>1174</b>
% Referral NFSA	<b>13%</b>
Number Assessment ending NFSA	<b>624</b>
% assessment NFSA	<b>77%</b>
% assessments completed resulting in Social care service	<b>23%</b>



### **Assessment**

- Rate of assessments in Newham is in line with SN and Eng;
- Timeliness of assessments has improved with the last 6 months showing as 77% (2018/19 60%). Recent months have shown even higher and consistent performance. However, too many assessments are completed 'just in time';

- Median assessment duration in 18/19 was 45 days, this has now fallen to 39;
- 61% of assessment end not needing a social care service.

### ***Safeguarding investigations and Initial Child Protection Conference***

- From a low rate of S47 investigations, Newham has risen and is now higher than the rate seen in SN and Eng. (18/19 192 SN; 166)
- 58% S47 did not proceed to ICPC (73% in 18/19 compared to 63% SN: 57% Eng.) Current performance more in line with SN and Eng;
- The number of ICPC resulting in CP plan is in line with SN and Eng. (86%);
- The rate of ICPC was below SN and Eng., however recently in line (rate of 60).

<b>Strategy Discussion and Section 47 Investigation activity</b>	<b>2018/19 Q1</b>	<b>2018/19 Q2</b>	<b>2018/19 Q3</b>	<b>2018/19 Q4</b>	<b>2019/20 Q1</b>	<b>2019/20 Q2</b>
<b>No. of Strategy discussions held in the period</b>	518	461	432	617	514	425
<b>Partners involved (NEW) (% with 3 or more attendees)</b>	78%	68%	63%	60%	75%	82%
<b>No of S47 Actions in month</b>	388	392	344	553	394	370
<b>No. of S47s concluded in the period</b>	508	427	327	546	423	365
<b>No. of S47 ongoing at end of month</b>	462	267	243	339	282	271
<b>No. of S47s on-going at period end and out of timescale</b>	265	100	75	76	81	80
<b>S47 outcome - % conference required</b>	30%	21%	26%	27%	29%	43%
<b>S47 number requiring conference</b>	151	89	85	149	123	157

Initial Child Protection Conference activity	2018/19 Q1	2018/19 Q2	2018/19 Q3	2018/19 Q4	2019/20 Q1	2019/20 Q2
% S47 completed in the period that led to ICPC (system)	30%	21%	26%	27%	29%	43%
Number of ICPCs Held in Month (children) - (inc Pre birth not transfer in)	132	65	59	122	113	131
Number of ICPC (family groups)	59	31	34	58	54	68
% ICPCs held within 15 days from a strategy discussion (% based on children not family groups)	32%	78%	56%	74%	77%	72%
% Children taken to ICPC that resulted in a CP Plan for the child	79%	93%	84%	84%	92%	84%
% RCPCS held in time	93%	95%	93%	94%	89%	72%

### ***Child Protection***

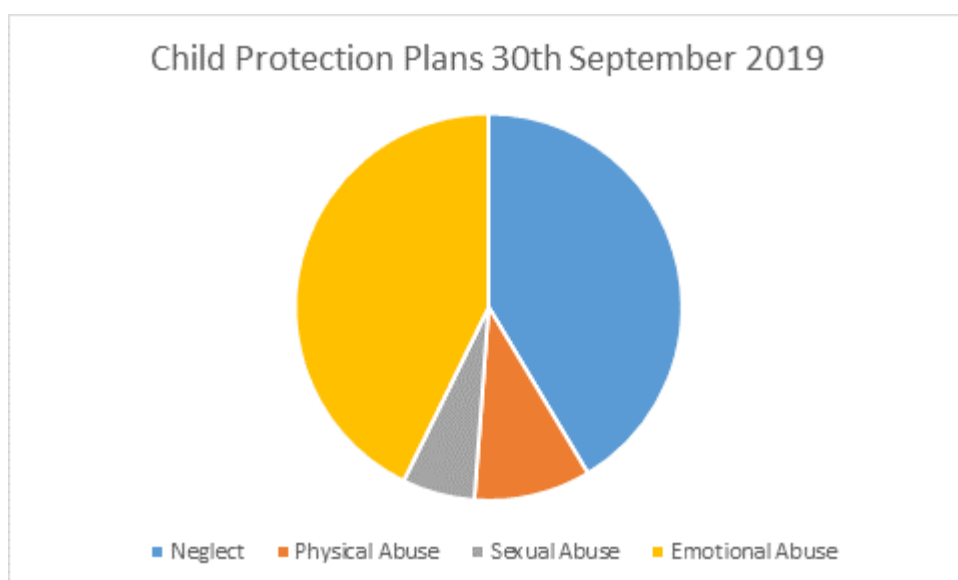
- The number of children on a Child Protection Plan fell consistently over several years to a low rate of 32 per 10,000 in 18/19 which was well below SN:37 and Eng.: 41. However, we have seen a recent increase and now have a rate of 45 per 10,000;
- Whilst historically our CP rates were low the rate of starters and leavers was in line or above;
- Recently the starter rate has been extremely high there has also been an increase in children on plans for longer periods of time (currently 5% (18) cases open for more than 2 years);
- Neglect and Emotional abuse are our largest categories with 42% of case in each category;
- 86% of visits take place within 4 weeks and 57% within two weeks.

### ***Hypothesis***

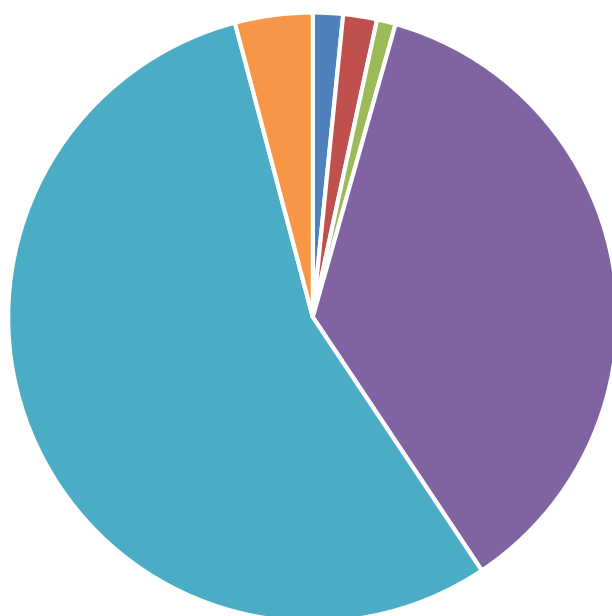
Increase in CP numbers has two part firstly greater conversion from ICPC is leading to higher rate of starter and secondly children subject to CP plan are remaining on a plan for longer.

1. Generally, Newham and partners are risk adverse with a lack of confidence (or services) to hold the risk at a lower level leading to more

- children becoming subject to CP plan and CP conference not agreeing to children ceasing to be subject to plan;
2. Poor CP planning and support do not enable the de-escalation of cases;
  3. Poor early help and CIN support;
  4. Children arriving in Newham where the need has already escalated to require CP before becoming known to our service – could account for higher numbers becoming subject to plan;
  5. Rate could now be more reflective of expectation, with previous numbers being too low (would not account for increase in length of plans).



Police outcomes child abuse Sept18-Aug19  
[rolling 12 months]



- community resolution
- caution charged summonsed
- caution/charge/summonsed alternate offence
- Case not progressed various
- Transferred to CSC
- No/non crime

## LAC

- From historically low rate of LAC since 2015/16 (these were below SN and Eng.) Newham has recently risen to 49 per 10,000 (this is still below SN/Eng);
- 18% of our LAC population is now UASC (74 children) with 7 becoming LAC in September and 6 in October;
- Recent months have seen a large increase in the numbers of children becoming LAC (18/19 average 19 per month, YTD average 22 per month) At the same time our average leavers have declined;
- Newham LAC population is disproportionately in the older age range with far higher percentage of new starter being in the 10 to 15 (36%) and the 16 plus range (33%) than SN and Eng. This is impacted by high UASC numbers;
- Conversely fewer young children coming into care;

- Historically Newham also had a higher proportion of new starter 'under police protection' (30% 17/18) This has now dropped to 20% in 18/19 and 13% so far this year – now in line with SN and Eng;
- The proportion of children in foster placements whose placement is long term was very low (6%) however this has risen to 28%;
- 26% (35) of our new starters in the last 6 months have previously been LAC;
- Higher than national proportions reason for LAC is absent parenting (high UASC).

### ***Hypothesis***

1. Increased numbers and age profile is in part due to the increase in UASC that Newham has recently started to support however this could also be indicative of poor support for adolescent children and their families at an early enough stage preventing escalation too LAC, figures suggest that the high numbers of repeat LAC children are within this age range perhaps suggesting that there could be more we could do to support the children within their families once they return
2. Recent reduction in the numbers of children becoming LAC via Police protection could be indicative of better partnership working with Police / schools
3. High churn (starters and leavers) could again show risk adverse practice, with insufficient support to prevent short episodes of care OR this could show that Newham's work to return children to their families is good.

# Our structure

## Our Board members

### Board members in April 2018

NAME	JOB TITLE
Nancy Kelley (NK)	Independent Chair LSCB
Grainne Siggins (GS)	Executive Director Strategic Commissioning
Maura Cardy (MC)	Partnerships & Workforce Development Manager.
Natalie Newton (NN)	NSCB Business Manager
Nicola Needham (NN)	CDOP Co-ordinator
Keith Paterson (KP)	MPS (Child Abuse Investigation)
Clive Ansell (CA)	Newham College
Eirlys Evans (EE)	ELFT
Michelle Edwards (ME)	YOT
Reagender Kang (RK)	NHS Newham CCG
Jerry Rider (JR)	MPS Newham
Jackie Ferdinand (JF)	West Ham Football Club
Elaine Redding (ER)	Director of Service Improvement & Transformation
Chetan Vyas (CV)	Newham CCG
Anthony Wilson (AW)	Lister School
Ben Levinson (BL)	Kensington Primary
Greg Tillett (GT)	Probation Service (NPS)
Alice Smith (AS)	Cafcass

### Board members in September 2019

Fran Pearson	Independent Chair
Chetan Vyas	Newham CCG
Tim Aldridge	Corporate Director, Newham Council
Michelle Edwards,	Head of Youth Offending, Newham Council
Sandy Davies,	Principle. Education Links
Alice Smith,	Cafcass
Cathryn Adams,	Safeguarding Development Officer, Newham Education
Pauline Grant,	Named Nurse Children Safeguarding, Newham CCG
Ben Levinson	Head Teacher, Kensington Primary School
Caroline Oakley	Youth Service Senior Manager
Natalie Newton	NSCP Business Manager
Clare Hughes,	Lead Named Nurse Children Safeguarding
Alison Matthews,	Strategic Lead Data and Impact, Newham Council
Nicola Needham,	CDOP Co-ordinator
Andrew Packer	Detective Superintendent, Safeguarding Lead, North East BCU

## **The work of the Newham Safeguarding Children Board from March 2018 until September 2019**

### ***The executive board (the LSCB)***

Throughout 2018/19, the Board was transitioning towards the new arrangements which are set out in the Children and Social Work Act 2017 and Working Together 2018.

The Executive Board/Partnership scrutinises, amends and where appropriate sign off the following:

- Serious Cases Reviews, Learning Reviews, Partnership Review, Rapid Reviews and improvement plans
- Multi-agency audits and the resulting improvement plans
- Single agency safeguarding audits on a rolling basis
- Section 11 reports

The Board will also discuss any significant organisation issues with an impact on safeguarding practice and delivery.

In addition, the Executive Board has oversight of the following contributory reports:

- LSCB Performance Report
- LSCB Budget
- LSCB Business Plan
- LSCB Annual Report
- Child Death Overview Panel Annual Reports (until new CDOP arrangements are in place)
- Local Authority Designated Officer (LADO) Annual Reports
- Private Fostering Annual Reports
- Serious Case Review recommendations and Action plans
- Child Sexual Exploitation and Missing Children Strategy and Action plans

**The framework that we now operate under – the new arrangements from 29 September 2019**

<b>Local Safeguarding Children's Board</b>		<b>Newham Safeguarding Children Partnership</b>
Independent Chair	→	Independent Chair
Director of Quality & Development NHS Newham CCG	→	Director of Quality & Development NHS Newham CCG
Head Teacher	→	Head Teacher
Principal Education Links	→	Principal Education Links
Borough Commander Met Police	→	Detective Superintendent Safeguard Lead North East BCU
Director of Service Improvement & Transformation	→	N/A
Director of Operations, Children's Social Care, Newham Council	→	Corporate Director, Children and Young People, Newham Council
Head of Social Work Improvement Principal Social Worker	→	N/A
Director of Nursing for Children	→	N/A
Borough Director Adults Mental Health	→	N/A

Assistant Director CAMHS & Children Services ELFT	→	N/A
Head of Youth Offending	→	N/A

### Core team supporting the partnership executive in the new arrangements

The Serious Case Review sub-group became the Safeguarding Practice Review group, to place the emphasis on the active reviewing of practice and the application of the learning from a culture of reviewing (see old and new structure below)

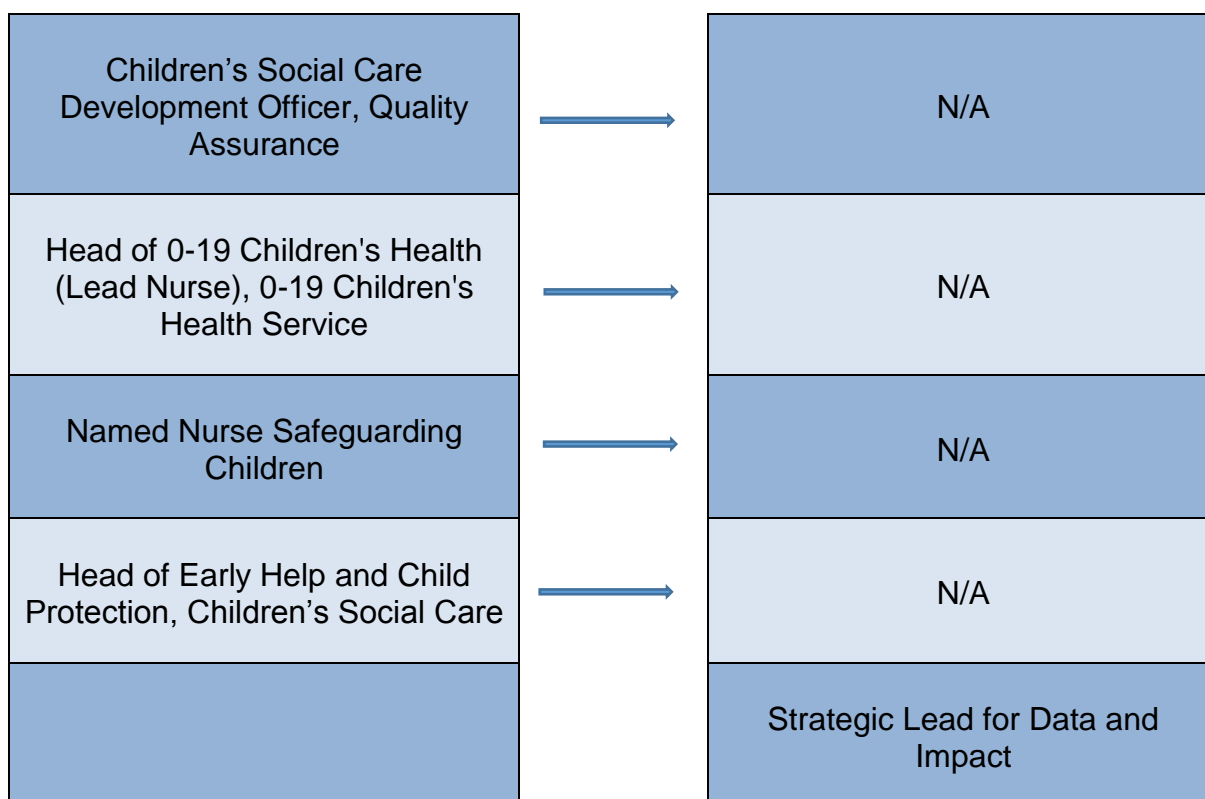
<b>Serious Case Review Sub Group</b>	→	<b>Safeguarding Practice Review Group</b>
Detective Chief Inspector – Chair	→	Inspector – Met Police Chair
Group Manager – Newham YOT Vice Chair	→	Principle Social Worker CHAIR
Named Nurse Safeguarding BARTS	→	Named Nurse Safeguarding BARTS
Designated Safeguarding Nurse Newham	→	Designated Safeguarding Nurse Newham
NSCB Business Manager	→	NSCP Business Manager
Partnership & Workforce Development Manager	→	N/A
Associate Director for Safeguarding Children ELFT	→	N/A

Head of Child Protection	→	N/A
Domestic & Sexual Violence Commissioner	→	N/A
Assistant Director CAMHS & Children Services ELFT	→	N/A
		Named Professional Safeguarding Children, Newham CAMHS & Community Health Teams
		Safeguarding & Development Officer for unregulated Education Settings Learning & Achievement Team

The Performance and Quality Assurance Group remained unchanged in its focus, so below is the old and new membership. This reflects the shift from a committee style and structure to a small team aiming at high impact and outcomes.

<b>Performance Quality &amp; Assurance</b>	→	<b>Safeguarding Practice Review Group</b>
Designated Safeguarding Nurse, Newham CCG – <b>Chair</b>	→	Assistant Director - CAMHS and Children's Services (Newham) East London Foundation NHS Trust – <b>Chair</b>
Head of Social Work Improvement/Principal Social Worker, Quality - <b>Vice Chair</b>	→	Head of Social Work Improvement/Principal Social Worker, Quality <b>Vice Chair</b>
NSCB Business Manager, Quality Assurance	→	NSCP Business Manager
		Safeguarding Development

Safeguarding Lead for Education	→	Officer for Unregulated Education Settings Learning and Achievement Team
Detective Inspector CAIT	→	Inspector – Met Police Chair
Associate Director for Safeguarding ELFT	→	Now Chair
		Designated Safeguarding Nurse, Newham CCG - Previously Chair
Head of Youth Offending, Safety & Resilience	→	N/A
Partnerships and Workforce Development Manager, Newham Children's Services	→	N/A
Head of Barking & Dagenham, Havering and Newham London Division National Probation Service	→	N/A
CRC Representative Area Manager, North East London	→	N/A
Specialist Midwife for Safeguarding Children	→	N/A
Acting Named Nurse for Safeguarding Children	→	N/A
Integrated Neighbourhood Service Manager – Early Years	→	N/A
Triage & EDT Service Manager	→	N/A



### The performance and quality assurance sub group (PQA)

1. The Child Protection Quality Panel was a multi-agency quality assurance panel, working to the PQA sub-group of the LSCB Executive. The remit of the Panel was to conduct 'deep dives' into a small number of child protection cases every year, to generate learning, especially about the application of thresholds and decisions taken within child protection plans and case conferences.
2. Repeat audits of a multi-agency discharge protocol showed that the protocol and ensuing training raised standards of support and care planning for vulnerable children discharged from hospital after attempted suicide or episodes of self-harming. Areas of good practice were the quality of assessments and the rigour of multi-agency working. The voice of the child came through strongly, including their involvement in the process. The professional network was high on challenge as well as support about each other's work, a healthy sign. Further work will be carried out to extend the depth of applied learning from the discharge protocol.

## **The child death overview panel (CDOP)**

Since 2012, the total number of child deaths for Newham is 164. Taken from the last 5 years the average number of Deaths for Newham per year is 32.8 per year. Established research suggests that about 4% of child deaths are safeguarding-related so the data puts Newham within average national parameters, though we do have one of the highest numbers of child deaths in London jointly with Barnet.

The CDOP in Newham has for many years worked to the LSCB and has overseen a great many of child death reviews and also the migration to an electronic database of child deaths – ectopy (from April 2018). We have also made the following improvements:

- Raised awareness about safe sleeping;
- Revised guidelines for flu vaccination in children with a severe disability;
- Raised awareness of good practice in the management of asthma, especially in schools.

The shift from the old to new arrangements features the following main changes:

- Establishment of joint responsibility for the CDOP process and Child Death Reviews between the local authority and the NHS
- CDOP is no longer accountable to the LSCB (now NSCP)
- New Child Death Review Panels must review a minimum of 60 deaths a year, which means that Panels must cover a large number of London Boroughs to be able to review the statutory minimum of child deaths.
- To achieve this, Newham will partner with Tower Hamlets, Waltham Forest and the City and Hackney for a joint CDOP. Progress has also been made towards establishing a joint neonatal CDOP with a neonatologist.

# Serious case reviews

## Summary of themes and learning 2018/19

The Newham LSCB completed 2 serious case reviews and 1 learning review in 2018/19. 3 Rapid Reviews so far have taken place within the new arrangements. The learning points from those will be set out in the next annual report of the Partnership due in the summer of 2020. Below are the key themes from the 2018/19 reviews.

### Chris SCR - published Oct 2018

Chris died of a fatal gunshot wound in September 2017 when he was 14 years old. The case sent shockwaves through the system. The review highlighted the need for a system-wide change by safeguarding partners in the way that they work with children and young people to help protect and safeguard them from criminal exploitation and other complex risks. The approach to Chris centred on enforcement rather than welfare. A key learning point is to think 'child first, offender second'.

### Child R – learning review, not published

Child R died as a result of fatal stab wounds in February 2018 when he was 17 years old. A rapid learning review was carried out by the independent reviewer for Chris's case.

A number of common themes were identified from the reviews of Chris and Child R combined:

- Vulnerability factors due to early childhood trauma with problematic substance misuse;
- Special educational needs and exclusion from mainstream education;
- Repeat referrals to Children's Social Care by other professionals;
- A multi-agency risk assessment and dynamic planning required;
- A key worker or lead professional was required;
- An over reliance on re-location as the primary risk management strategy leaving other risks not addressed.

### Child L - SCR published in March 2019

Child L is a child with complex health needs and multiple hospital admissions who relies on others for all her personal care needs. In 2018 when she was 8 years old, she suffered a potentially life-threatening injury when she became trapped under an adjustable bed. Luckily she made a full recovery from this incident. L and her siblings had been known to Children's Social Care for several years and she was previously subject to child protection and child in

need plans due to risks from domestic abuse and neglect. However, until the incident, L had not been referred to the Disabled Children's team which meant that she and her family were not accessing support services, nor did L have a lead professional responsible for co-ordinating her care.

The main themes from this review are:

- The need for a multi-agency approach to dealing with neglect over time;
- The need for a lead professional to oversee and co-ordinate services;
- The impact and implications of parental violence and aggression – father perpetrated domestic abuse in the home and mother was convicted of an aggravated racial assault on a neighbour;
- Commissioning, reviewing and maintaining specialist equipment for disabled children – delays in commissioning specialist equipment was a feature in a previous learning review;
- The voices of the children and their lived experience did not come through strongly – this was a theme in the Chris SCR and Child R learning review and in the SCR last year for Child J;
- Access to independent advocacy – this was a theme from previous learning reviews involving disabled children.

There is also a common theme in relation to the on-going management of risk when CSC step-down and or close a case.

### **A joint SCR with the London Borough of Hounslow underway**

This review was initiated after the attempted murder of an infant and her mother by a former partner of the mother. The family had been relocated to Hounslow from Newham to protect them from domestic abuse.

The early learning to date from this SCR which is yet to be completed and which does not as yet have an expected publication date includes the following:

- Seeking and sharing information appropriately between partner agencies;
- A query about the DASH form completed by different agencies which was not always shared;
- Risk assessment in DV cases - one of the questions in the discussions is: "why was there such a big difference between the DV risk assessed by different agencies?";
- Understanding the risk of DV after an experience of DV in a previous relationship;
- The role of MARAC especially for transient families;
- Risks generated by the immigration status of one of the partners (also a factor in Newham local domestic homicide reviews (DHR's));

## **Testing impact and learning from these reviews**

The Performance and Quality Assurance Sub-Group (now team) took the findings forward in the following ways:

- Using existing panels to track and quality assure practice e.g. Vulnerability and Exploitation; top 10; CP Quality panel;
- Patient Stories used by the Joint Health Safeguarding group;
- Sampling of cases stepping down from a statutory plan;
- A safeguarding task and finish group to improve outcomes for disabled children and young people.

## **Training**

The LSCB put on a comprehensive training programme in 2018/19 and this is set out in the table below. The courses were mostly extremely popular although more recently attendance has started to decline hence the training offer by the new Partnership will be reviewed with a view to starting again with a refreshed programme in April 2020.

### **Principles of LSCB Training**

The Performance and Quality Assurance sub-group agreed that all training provided by or on behalf of the NSCP should be governed by the following interagency principles.

All training should:

- place the child at the centre and
- promote the importance of understanding the child's daily lived experience;
- ascertaining their wishes and feelings;
- listening to the child and never losing sight of her or his needs.

All training should:

- create an ethos that values working collaboratively with others (valuing different roles, knowledge and skills);
- respects diversity (including culture, race, religion and disability);
- promotes equality;
- encourages the participation of children and families in the safeguarding processes.

All training is:

- regularly reviewed;
- evaluated and quality assured to ensure that it meets the agreed learning outcomes;
- has a positive impact on practice.

### Courses offered

32 courses were offered during 2019/19 with 110 sessions and 2119 delegates from all Newham agencies – see courses below.

	Course title	Course level
1.	Child Neglect: An Introduction	½
2.	Child Neglect: Assessing the Quality of Parental Care - GCP2	2/3
3.	Child Neglect: GCP2 Surgery – Beyond the Training	2/3
4.	Child Sexual Abuse	2
5.	Child trafficking and Modern-Day Slavery	TBC
6.	Complex Exploitation – Introduction and Tools	2
7.	Complex Safeguarding - Exploitation	½
8.	Complex Safeguarding – Understanding the impact of trauma on children and young people	2/3
9.	Creating Safer Organisations	3
10.	Criminal Exploitation Workshops	2/3
11.	Cultural Competence and Safeguarding	3
12.	Disabled Children and Safeguarding.	2/3
13.	Domestic Abuse and Child Protection	TBC
14.	Domestic Abuse: Risk Assessment & Safety Planning	3

15.	Early Help Framework and Team Around the Family	<b>2/3</b>
16.	Effective Engagement with Parents/carers	<b>3</b>
17.	Extremism: Understanding the Impact on Young People	<b>2/3</b>
18.	Fabricated or Induced Illness	<b>1</b>
19.	Female Genital Mutilation (FMG)	<b>2</b>
20.	Impact of Parental Mental Health on Children and Young People	<b>3</b>
21.	Introduction to Safeguarding	<b>1</b>
22.	Managing Allegations and the LADO Process	<b>2</b>
23.	Messages from Child Deaths & Serious Case Reviews	<b>3</b>
24.	Messages from Serious Case Reviews	<b>3</b>
25.	Newham Pre-birth Protocol	<b>2/3</b>
26.	Parental Substance Misuse & Children and Young People	<b>2/3</b>
27.	Perinatal Mental Health	<b>2/3</b>
28.	Protecting Children and young people on line	<b>2/3</b>
29.	Radicalisation Awareness Training - WRAP	<b>2</b>
30.	Self-harm, Suicide and Young People	<b>2</b>
31.	Working together: Child Protection and Conferences Group Meetings	<b>2/3</b>
32.	Working together to Safeguard Looked After Children moving away from home	<b>2</b>

### **The way in which training supported the board's priorities**

- The new **Complex Safeguarding** course, which provided a two-day session, catered for 277 delegates over the year. This course was initially commissioned for Children's Social Care and then jointly by the LSCB partners.

- **Criminal exploitation workshops** were attended by 122 delegates. The nature of a majority of our serious case reviews fell within this context.
- The **Graded Care Profile 2 (GCP2)** course which offers support for delegates regarding neglect was revamped at the beginning of January 2019. The half day reverted to a day session, and to support the one day training a monthly half day surgery for staff to embed the knowledge of the tool has been designed and offered. 133 delegates attended the half and one day session over this period.
- The half day **Radicalisation workshop** which was designed by the government was accessed by 158 delegates. It is supported by two on line e-learning sessions which should be accessed, one prior to the session and the other following attendance.
- **Serious Case Review Briefings** were offered in August and September (four sessions in total) which were attended by 112 delegates.
- **Introduction to Safeguarding** which provides the foundation in Newham to safeguarding for delegates across the partnership catered for 154 delegates. This course continues to be well attended.
- **Domestic Abuse: Risk Assessment and Safety Planning** was attended by 112 delegates over the sessions. This is another course which is always fully booked.

# The LADO process

## The LADO service 2018/2019

The Local Authority Designated Officer (LADO) oversees the handling of allegations against staff or volunteers who work with children.

The referral rate has steadily increased which mirrors the statistics from previous years, notwithstanding the slight dip in 2017/2018 stemming from an introduction of new procedures for the management of allegations in October 2017. The new procedures provided clarity on determining the difference between a 'concern' that can be managed internally by employers and an 'allegation' that would result in LADO oversight. Despite this, referrals and requests for consultations from the service remain at the 350 mark, an increase of 25 from the previous year. Early indicators for the 2018/2019 outline that this trend is likely to increase over the coming years.

Over this period, Newham Council has effectively managed some complex and high profile cases included some surfacing within the media.

Outreach to all sectors in Newham continues and this has been met with significant appetite by partner agencies and local organisations working with children and volunteers. Particular thanks goes to the NSCB and CCG for supporting close relationship building with Designated Health Professionals. This has resulted in LADO awareness being embedded in safeguarding training for GPs and practice managers.

Regional and national involvement has supported the pooling of resources and the development of regional and national strategies and procedures. This has resulted in policy amendments, additional governmental consultation and improved continuity across the country. The ongoing development of national agreed standards will help to support a more predictable approach for Local Authorities who report an inconsistent line of enquiry during inspections on the management of allegations by Ofsted.

The LADO service received positive feedback in the recent full inspection by Ofsted, citing the service as a strength, robustly overseeing allegations and challenging agencies and professionals at a senior level to ensure concerns are pursued with vigour. It further cited the provision of training to relevant agencies as being comprehensive and promoting timely and appropriate consultations and referrals. This process has also demonstrated that the complete review of the LADO process undertaken in Newham over 2016/2017 can be regarded as effective and that the change has been sustained.

The published Ofsted outcome has also seen an increase in other Local Authority's requests for peer audit and visits to explore how the management of allegations process is followed through. Ongoing engagement to learn from and support neighbouring LADOs continues to inform practice on both sides.

## PRIVATE FOSTERING

The Children Act 1989, states that a privately fostered child is a child who is under the age of sixteen (or eighteen if disabled) who is cared for, or proposed to be cared for and provided with accommodation by someone other than a parent or a close relative. Close relative is defined as step-parents, siblings, brothers or sisters of a parent or grand-parent). To foster a child privately means to care for and provide accommodation for the child for a period of 28 days or more.

The Local Authority's duties are outlined in the Children Act 1989 and reinforced and strengthened by the measures set out in the Children Act 2004 and The Children (Private Arrangements for Fostering) Regulations 2005. These include assessing the suitability of the proposed or actual private foster carer to look after the child, household members and their premises; to ensure the safeguarding and welfare of the child and to provide advice and support.

As set out in the dataset for this report, Newham remains one of the most diverse and transient populations in the United Kingdom. Our challenge is how to encourage parents and carers to notify the Local Authority of private fostering arrangements. It is also notable that whilst there are no financial benefits to the carer (or the parent) to notify the local authority of private fostering arrangements, notification is a legal requirement.

At the end of the period covered by this report, there were 18 private fostering arrangements (18 children). 5 cases are currently held by the private fostering team and 13 are held in the intervention and assessment services of Newham Council.

From April 2018, Newham's performance, whilst low in comparison to national figures, is comparable with other London Boroughs.

Local Authority	Number of PF Arrangements
Bromley	15
Hertfordshire	17
Waltham Forest	7
Lewisham	27
Lambeth	19
Croydon	20
Barking and Dagenham	8

There is a focus on changing the culture of front line services in regards to how private fostering assessments are undertaken. Once a notification is received by the MASH team, the private fostering team are alerted via a contact referral record or in most instances a telephone call or an email. This generates initial discussion prior to arranging the Reg. 4 visits and subsequent joint visit with the private fostering service in support of the single assessment process. This has worked particularly well because there is oversight from the Private Fostering social worker when the Private Fostering Assessment is completed. All assessments require Service Manager approval. This was identified as a gap in procedures during a recent Learning Review.

One significant current priority is to promote awareness of notification requirements through information sharing with professionals and to maintain a targeted awareness campaign for Newham's schools. Another priority is to develop a policy document covering all aspects of private fostering.

## GLOSSARY

BCU	Basic Command Unit
CAMHS	Child and Adolescent Mental Health Service
CCG	Clinical Commissioning Group
CDOP	Child Death Overview Panel
CSA	Child Sexual Abuse
CSC	Children's Social Care
DHR	Domestic Homicide Review
EHC	Education, Health and Care plan
ELFT	East London Foundation Trust
GCP	Graded Care Profile
ICPC	Initial Child Protection Conference
IMD	Index of Multiple Deprivation
LAC	Looked After Child/children
LADO	Local Authority Designated Officer
MARAC	Multi-Agency Risk Assessment Conference
MASH	Multi-Agency Safeguarding Hub
NSCP	Newham Safeguarding Children Partnership
PRU	Pupil Referral Unit
SCR	Serious Case Review
SENDIAS	SEND information and advice service (special educational needs and disability)
SN	Statistical Neighbours
UASC	Unaccompanied Asylum Seeking Children
UKBA	United Kingdom Border Agency
YTD	Year To Date