## Agenda Item No. 6

# CAMBRIDGESHIRE LOCAL SAFEGUARDING CHILDREN BOARD (LSCB) ANNUAL REPORT 2016-17

To: Health and Wellbeing Board

Meeting date: 21st September 2017

From: Russell Wate, Independent Chair, Local Safeguarding Children

**Board** 

Recommendations: The Health and Wellbeing Board is asked to:

a) acknowledge receipt of the LSCB Annual Report 2016/17.

	Officer contact:		Member contact:
Name:	Andy Jarvis	Names:	Councillor Peter Topping
Post:	Service Manager	Post:	Chairman
Email:	Andy.Jarvis@cambridgeshire.gov.uk	Email:	Peter.Topping@cambridgeshire. gov.uk
Tel:	01480 373582	Tel:	01223 706398

#### 1.0 PURPOSE

To present the Local Safeguarding Children Board (LSCB) Annual Report 2016-17 to the Health and Wellbeing Board (HWB).

- 1.1 The purpose of the LSCB Annual Report is:
  - to provide an outline of the main activities of the Cambridgeshire LSCB and achievements during 2016-17 against the objectives of the LSCB Business Plan;
  - to comment on the effectiveness of safeguarding activity and of the LSCB in supporting this:
  - to provide the public and partner agencies with an overview of LSCB safeguarding activity; and
  - to identify gaps and challenges in service development for the year ahead.
- 1.2 To identify shared priorities between the LSCB and the HWB strategic plans.

#### 2.0 BACKGROUND

- 2.1 The Cambridgeshire LSCB publishes an Annual Report as required by current statutory guidance, Working Together 2015.
- 2.2 "The Chair must publish an annual report on the effectiveness of child safeguarding and promoting the welfare of children in the local area. The annual report should be published in relation to the preceding financial year and should fit with local agencies' planning, commissioning and budget cycles. The report should be submitted to the Chief Executive, Leader of the Council, the local police and crime commissioner and the Chair of the health and well-being board.
- 2.3 The report should provide a rigorous and transparent assessment of the performance and effectiveness of local services. It should identify areas of weakness, the causes of those weaknesses and the action being taken to address them as well as other proposals for action. The report should include lessons from reviews undertaken within the reporting period..."Working Together 2015
- 2.4 The full Report is attached at Appendix 1.

#### 3.0 SUMMARY

#### 3.1 The Board

The Board has continued to operate effectively with high attendance levels at meetings and a successfully delivered Business Plan.

Over the year the Board has increased the level of structural and strategic coordination with Peterborough LSCB and moved to a position where all sub groups are joint with Peterborough LSCB. This is a key element in a wider review and amalgamation of Safeguarding Board functions. The Local Authority and its partner agencies are in a good position to respond to the anticipated requirements in the new Statutory Guidance,

replacing Working Together 2015, which will be published shortly for consultation.

## 3.2 How has the LSCB carried out its Functions?

- a. Coordinate what is done by partners to safeguard and promote the welfare of children and young people
  - Launched a Domestic Abuse Strategy
  - Launched a Neglect Strategy
  - Adopted the CSE Protocol
  - o Drafted, consulted and approved a new Threshold Document
- b. Ensure the effectiveness of what is done by each partner
  - Completed the Section 11 Action Plan
  - o Monitored Ofsted, HMIP, HMIC and CQC Inspection reports and action plans
- c. Demonstrate inclusion and co-operation
  - Built on the Inclusion project with the Eastern European communities.
- d. Undertake reviews of cases and practice
  - Undertaken Multi-Agency Audits on Domestic Abuse, Neglect, referral decision Threshold's and MASH processes
  - Undertaken four Multi-Agency single case reviews where learning was identified and used to promote improvement
- e. Monitor, evaluate and challenge—listen to feedback
  - Developed a new Dashboard and Dataset of performance information across agencies
  - Consulted children and young people with SEND
  - Heard from the Participation Service
  - Used service user feedback in the development of CSE provision
  - Challenge practice where issues are identified, such as children being held in cells and initial health assessments for looked after children.
- f. Maintain Learning and Improvement framework
  - o Revamped the Learning and Improvement Framework
  - Ensured learning turns into change
  - Mapped the evidence available on Safeguarding in Cambridgeshire to give a coordinated picture of what we know and any gaps
- g. Policy and procedures including thresholds, training, recruitment, supervision, allegations
  - Launched Threshold Document
  - Undertake a major review of LSCB multi-agency procedures
- h. Communicate and encourage to raise awareness
  - Provided a well-respected Website
  - o Developed use of social media and emails for communication
  - Delivered multi-media campaigns
  - Supported Local Practice Groups
  - o Ran training to over 2,000 professionals
  - Undertook a training needs survey

## i. Participate in planning of services

- o Chair MASH Governance Board and delivered new MASH arrangements
- o Participated in the MASH operational group
- Membership of Change Programme Strategic Boards
- Led work strands supporting the Children Service change programme

#### 3.3 How has the LSCB responded to the Safeguarding issues it identified?

ISSUE		RESPONSE
There is no evidence that Neglect is present in Cambridgeshire to a disproportionate extent but there is a high level of Neglect in the referrals and CSC caseload.	<b>→</b>	The LSCB has built on its Neglect Conference in 2016 and launched a Neglect Strategy, supported by an Action Plan and training programme to enable staff to be more effective. An audit of practice will follow in 2017/2018.
There is evidence of higher than national average figures for hospital admissions from self-harm and regional average for misuse of substances	<b>→</b>	A) There was a major, and successful, initiative to reduce waiting lists for specialist psychiatric services B) Health have embarked on the redesign of provision for young people and commissioned services for those who have emerging needs.
There remains a significant rise in CSC caseloads over the	<b>→</b>	Working with the LSCB the local authority has launched a major reorganisation to ensure that the right services are available to the right child at the right time.
Domestic Abuse and Parental Mental Health are the most significant factors in CIN and CP cases.	<b>→</b>	The LSCB has undertaken a major audit of Domestic Abuse cases, launched a Domestic Abuse Strategy, delivered training, and promoted good practice.

#### 3.4 **Priorities 2017-18**

- a. Ensure effective safeguarding of children against neglect
  - demonstrate the successful implementation of the neglect strategy
  - show that staff are equipped to make informed, consistent assessments of families where neglect is an issue using the graded care profile.

### b. Child sexual exploitation & missing

- continue the focus on ensuring that children who are vulnerable to exploitation are safeguarded
- ensure the risk and vulnerability of children missing from care, home and education has been effectively managed
- safeguard children from the risk of exploitation by gangs.
- o safeguard children from the risk of exploitation by extremism and radicalisation.

#### c. The voice of the child

 continue developments in obtaining the views of children and young people for decision making and identify the impact of those views.

### d. Enhancement of LSCB effectiveness in discharging its responsibilities

- o working together is being reviewed in the light of the social care act.
- the LSCB is re-structuring how it works to prepare for this change. It will continue to show it is effective, in line with statutory requirement and meets the needs of Cambridgeshire children.

## e. Developing and supporting effective workforce

- o to have in place
  - adequate resources and capacity to deliver or commission training.
  - policies, procedures and practice guidelines to inform and support training delivery in line with the learning and implementation framework
- undertake reviews of local training needs, taking into account research, national developments, learning from SCRs and child death reviews (not only those carried out locally), and board priorities.

## f. Developing Priorities for 2017-18

- Suicide and serious self-harm in children and young people
- Safeguarding within Faith Groups

#### 4.0 ALIGNMENT WITH THE CAMBRIDGESHIRE HEALTH AND WELLBEING STRATEGY

Health and Wellbeing Board Priority to May 2018	LSCB priority, function or activity	
Strengthen our multi-agency approach to identifying children who are in poverty, who have physical or learning disabilities or mental health needs, or whose parents are experiencing physical or mental health problems.	Neglect Strategy, supported by the development of tools for use by staff, training, monitoring and audit.  Parents with mental health or substance abuse issues remain a significant element in the context for many children subject to safeguarding. As such the work of adult facing services and enabling children services to understand and respond to the impact of parental mental health issues and substance abuse remain an important part of the LSCBs work.	
Develop integrated services across education, health, social care and the voluntary sector which focus on the needs of the child in the community, including the growing numbers of children with the most complex needs, and where appropriate ensure an effective transition to adult services.	The LSCB Independent Chair now chairs the MASH Governance Board. The LSCB remains central to the development of the MASH and the effectiveness of the integrated front door into children services.  The LSCB continues to have a responsibility for supporting, monitoring and improving multiagency Early Help provision.	

Health and Wellbeing Board Priority to May 2018	LSCB priority, function or activity	
-	The Board has worked with Health and other providers on the effectiveness of the transition of young people with safeguarding needs into adult services and compliance with the appropriate NICE Guidance.	
Support positive and resilient parenting, particularly for families in challenging situations, to develop emotional and social skills for children.	The LSCB continues to have a responsibility for supporting, monitoring and improving multiagency Early Help provision.	
	There is a shared concern to improve the resilience of children and young people.	
Promote sexual health, reduce teenage pregnancy rates and improve outcomes for teenage parents and their children.	The LSCB has a priority area in addressing Child Sexual Exploitation over and above its responsibility to ensure children are safeguarded from sexual abuse. A significant level of effort has been put into ensuring an effective response is in place for children at risk of abuse and exploitation.	
	The level of pregnancy and fatherhood among young people who are looked after by the Local Authority remains a priority area and work is being undertaken to ensure the children have parents who are able to meet their needs effectively.	
Work with partners to prevent domestic violence, raise public awareness especially amongst vulnerable groups, and provide appropriate support and services for victims of domestic abuse.	Following a multi-agency audit, the LSCB has a Domestic Abuse Strategy aimed at addressing the main concerns identified and improving existing strengths.	
Minimise the negative impacts of alcohol and illegal drugs and associated antisocial behaviour on individual and community health and wellbeing.	Parents with mental health or substance abuse issues remain a significant element in the context for many children subject to safeguarding. As such, the work of adult facing services and enabling children services to understand and respond to the impact of parental mental health issues and substance abuse remain an important part of the LSCBs work.	
Commit to partnership working, joint commissioning and combining resources in new ways to maximise cost-effectiveness and health and wellbeing benefits for individuals and communities.	This is a shared priority for all the Statutory Boards in Cambridgeshire and Peterborough.	
Identify sustainable, long-term solutions to manage the increase demand on health and social care services.	Responding to the growth of demand for health and social care services at a time when resources are under pressure is an issue under review by the Board.	
Encourage increase involvement of service user representatives and local groups in planning	The voice of the child: Continue developments in obtaining the views of children and young people	

Health and Wellbeing Board Priority to May 2018	LSCB priority, function or activity
services and policies.	for decision making and identify the impact of those views.
Recognise the importance of the Voluntary and community sector and their valuable contribution to implementing the strategy.	Safeguarding within Faith Groups: The voluntary sector provide key services. They have a representative on the Board and work is being done to create and maintain an effective support network.

# 5.0 SOURCE DOCUMENTS

Source Documents	Location
None	