

Briefing Note to the Children's Partnership Senior Officers Group

Title:	NCSCB Annual Report 2010 / 11
Date of meeting:	7 December 2011
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Summary (including background, proposals and benefits to customers/service users):	
<p>The NCSCB Annual Report fulfils the requirements of The Apprenticeships, Skills, Children and Learning Act 2009 to produce and publish an annual report on the effectiveness of safeguarding in the local area as detailed in Working Together 2010. In addition, the Governments response to the Eileen Munro review of safeguarding agreed that "accountability for the welfare of children must start with the most senior strategic local leaders and that the receipt of an annual report from the LSCB about the effectiveness of local early help and protective services is an important element of such accountability". In future it is expected the NCSCB Annual Report will be shared with the Chief Executive and leader of the Council, the local Police & Crime Commissioner and the Chair of the Health and Wellbeing Board.</p> <p>The NCSCB Annual report details the work of the safeguarding board in the last financial year in coordinating and monitoring the effectiveness of local work to safeguard children and young people. It provides specific information on the performance indicators for safeguarding processes and information from partner agencies on their safeguarding services and support. All work of the NCSCB (including training, Serious Case Reviews, Child Death Reviews, and Allegations Management) are also reported on.</p> <p>The information used within the NCSCB Annual Report is designed to support the Children's Partnership in reviewing the Children and Young People's Plan and enable to development and commissioning of services to children, young people and families in Nottingham.</p>	
Recommendations:	
1	The Nottingham Children's Partnership Board accept the NCSCB Annual Report 2010 / 11 and consider its impact on the development of the CYPP and services to children, young people and families.
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NOTTINGHAM CITY
Safeguarding
Children BOARD

**Nottingham City Safeguarding
Children Board (NCSCB)**

Annual Report 2010 - 11

NCSCB Annual Report 2010/11

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1. Chair's Foreword

- 1.1 We are pleased to introduce the Nottingham City Safeguarding Children Board's (NCSCB) Annual Report for 2010 - 11. The report provides an account of what has been done in the last year, to improve safeguarding services within Nottingham and to assess their effectiveness.
- 1.2 This has been another year of change for the NCSCB and all partner agencies with pressures of budget reductions; service and structure reviews and developments in national and local policy agenda's. As expected, all agencies have faced challenges in ensuring capacity and confidence within safeguarding services but have risen to these to continue to provide effective support to our most vulnerable children and families.
- 1.3 As these challenges continue, it is important that agencies continue to focus on the provision and performance management of safeguarding practice across the partnership, ensuring robust multi agency interventions are in place to ensure good outcomes for the children in Nottingham City.
- 1.4 Unfortunately Margaret McGlade was no longer able to continue with her role as Independent Chair of the NCSCB from September 2011 onwards and we are currently in the process of recruiting a new Chair. In the interim, we as the Vice Chairs are committed to supporting and participating in the continued work of the NCSCB.
- 1.5 We would like to thank the NCSCB staff and the managers and professionals from all agencies for their contribution to the Board's work and to the safety and wellbeing of children in Nottingham City.

Satinder Gautam (Nottingham City Council)

NCSCB Vice Chair

Sally Seeley (NHS Nottingham City)

NCSCB Vice Chair

Helen Chamberlain (Nottinghamshire Police)

NCSCB Vice Chair

2. Introduction

2.1 The purpose of this Annual Report is to:

- provide an outline of the main activity and achievements of the NCSCB during 2010 - 11
- provide an assessment of the effectiveness of safeguarding activity in Nottingham
- provide the general public, practitioners and main stakeholders with an overview of how well children in Nottingham are protected
- identify gaps in service development and any challenges ahead.

2.2 Nottingham City Safeguarding Children's Board was formally established in April 2006 in response to the requirements of the Children Act 2004 and its accompanying guidance 'Working Together to Safeguard Children' (2006). The scope and role of LSCBs encompass the broader remit of safeguarding and prevention in addition to child protection. The NCSCB also has a role in contributing to the commissioning, planning and delivery of children's services through the Children and Young People's Plan and Children's Trust arrangements.

2.3 The NCSCB has two objectives, as detailed in the Children Act 2004 and Working Together 2010 and this report details the progress against each of these objectives, as follows:

- to co-ordinate what is done by each person or body represented on the Board for the purposes of safeguarding and promoting the welfare of children in the area of the authority; and
- to ensure the effectiveness of what is done by each such person or body for that purpose.

2.4 This report is the Annual Review of the work of the Nottingham City SCB for the business year 2010 - 11. 'Working Together' 2010, states that each LSCB should have a clear work programme, including measurable objectives and a budget. This Annual Review reflects the priorities set within the NCSCB Business Plan for 2008-11, progress against these priorities, and areas for further development.

2.5 The report fulfils the requirements of the 'Apprenticeship, Skills, Children and Learning Act 2009' for LSCBs to produce and publish an annual report on the effectiveness of safeguarding in the local area and to ensure that the local Children's Trust receives a copy.

- 2.6 In addition, the final chapter of the report provides NCSCB commentary on the effectiveness of arrangements to safeguard children and young people in Nottingham during 2010/11.
- 2.7 We hope the public will find this Annual Report informative in understanding the role and work of the NCSCB and that stakeholders and their staff will be inspired to maintain the highest possible standards in the delivery of services for children and young people.

3. **Coordinating Local Work to Safeguard and Promote the Welfare of Children.**

3.1 **Key Priorities for 2010/11 were:**

3.2 Our priorities for 2010 – 11 in coordinating local work to safeguard and promote the welfare of children were to:

- Ensure that the views of children and young people are heard by the LSCB, in the development and delivery of its function
- To ensure timely completion, improved quality, effective dissemination of learning and monitoring of processes in respect of Serious Case Reviews.
- To ensure timely completion and effective dissemination of learning from child death reviews and the engagement of parents within this process.
- Contribute to the review and development of the Children and Young People's Plan and ensure robust links with the Children's Partnership Board.
- Safeguard young people and their families involved in gun and knife crime in Nottingham, including the development of practice guidance
- Review and develop Practice Guidance on Child Sexual Exploitation, Children from Abroad and E Safety
- Review, publish and deliver the updated NCSCB Training Programme

3.3 The NCSCB has made good progress against these priorities, including the following:

3.4 **Governance and Accountability**

3.5 The NCSCB constitution and structure were ratified at Strategic Board in March 2009 following the review of the governance and operational arrangements.

3.6 The NCSCB Strategic Board, Steering Group and each Panel / Policy, Task and Delivery Group have their own Terms of Reference, Annual Work Plans and reporting expectations. Each group is chaired by an agency representative, has multi agency membership and is supported by an NCSCB Officer and administration where possible. The NCSCB Independent Chair meets with the Chairs of the Steering Group and the Panels on a regular basis.

3.7 The NCSCB Strategic Board receives reports from the Steering Group, the Quality Assurance & Risk Management Group, Child Death Overview

Panel and Serious Case Review Standing Panel at each meeting and the Policy Task & Delivery Groups report by exception.

3.8 **Relationship to the Children's Trust Board**

3.9 The NCSCB activities are part of the wider context of children's trust arrangements and contribute to the wider goals of improving the wellbeing of all children in Nottingham. The Nottingham Children's Partnership Board (CPB) have continued to work to implement, review and develop the Nottingham Children and Young People's Plan and the services provided to all children and young people in the city.

3.10 The change in government in 2010 resulted in the Secretary of State removing the statutory standing of Children's Trusts and the following proposals:

- removing the duty on schools to co-operate through children's trusts via the Education Bill
- removing the requirement on local authorities to set up Children's Trust Boards and the requirement to publish a joint Children and Young People's Plan.

3.11 In Nottingham, however, it was agreed that the partnership would remain as the key mechanism to support all partners to work together to deliver a joined up vision for children, young people and families, through the continuation of the Children and Young People's Plan (CYPP).

3.12 The CYPP has been reviewed annually, setting out the collaborative work programme and priorities across all partners responsible for providing services to children, young people and families. All partners are accountable for the delivery of its priorities, objectives and specified targets. The Children's Partnership directs the required integrated working, joint planning, commissioning and resource allocation to achieve this.

3.13 The Strategic Priorities for the Children and Young People's Plan 2010 – 14 are:

- **Safeguarding and Early Intervention for Children** - Young people and families will benefit from early and effective support and protection to empower them to overcome difficulties
- **Strong families** – More families will be strong and healthy, providing an enjoyable and safe place for children to grow up
- **Healthy and positive children and young people.**- Children and young people will be healthier, fitter, more emotionally resilient and better able to make mature decisions
- **Achievement** - All children and young people will leave school with the best skills and qualifications they can achieve and will be ready for work or further learning

- **Economic well-being** - Child poverty will be significantly reduced.

3.14 In addition, a Year 1 Priority for 20010/11 was “**Stronger safeguarding** - With a key focus on ensuring that there are high standards of safeguarding across all agencies and that the Partnership takes a pro-active approach to the elimination of domestic violence.

3.15 The NCSCB and the Children’s Partnership Board (CPB - Children’s Trust Arrangement) are linked together through the Independent Chair of the NCSCB who reports twice yearly to the CPB on the work of the NCSCB and the work of the partner agencies in safeguarding children. The Chair will also present the NCSCB Annual Report to the Children’s Trust. The Independent Chair receives all minutes, agendas and papers for all meetings of the Trust and can make representation on matters arising. The Ofsted Inspection of Safeguarding and Looked After Services found

“Partnership working is well embedded and based on a history of effective joint collaboration on a wide range of projects. Representation from all sectors and professional groups is good, including on the NCSCB and subgroups, the Nottingham Children’s Partnership Board (NCPB) which acts as the Children’s Trust, and other local strategic partnerships. Strategic and business plans are of a good standard and demonstrate effective forward planning and resource utilisation. Strategic plans are well monitored and include clear performance targets based on national and locally derived indicators. There are clear communication lines between NCPB and NCSCB and accountabilities are explicit.”

3.16 The Director of Children’s Services is a member of the NCSCB and reports on CPB matters to all NCSCB meetings. The NCSCB seeks to provide challenge and scrutiny to the work of the CPB ensuring that in the commissioning, planning and delivery of services, the safeguarding of children is paramount in the Trust Board’s decision making.

3.17 The NCSCB has ensured there is a maintained focus on effective safeguarding in the delivery of its business and, has ensured as a formal consultee in the development of the Children and Young People’s Plan (CYPP), that this remains a priority within the children’s trust.

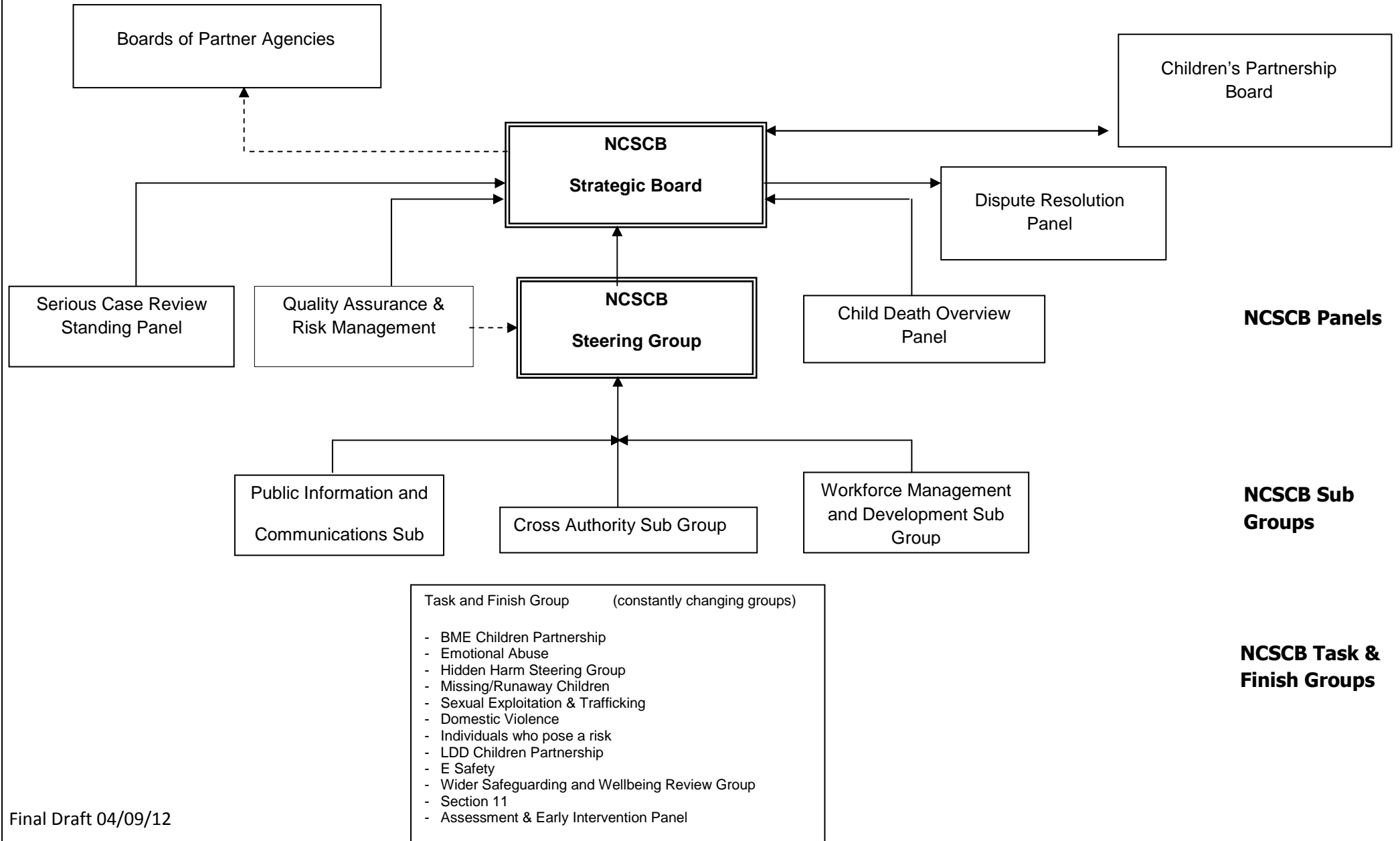
3.18 In addition, a protocol between the CPB and the NCSCB has been agreed to ensure clarity on the governance of work undertaken by both Boards in relation to groups of vulnerable children and young people.

3.19 **Participation of Children and Young People**

3.20 A Participation Strategy has been developed with Nottingham City Council and adopted by the NCSCB to work with existing groups to ascertain children and young people’s views on safeguarding. In the long term it is hoped this feedback will be used to develop the services provided by the NCSCB.

- 3.21 Current work on participation has included working with the Youth Council on “What does Safeguarding mean to you?”; launch of the Children and Young People’s and Parents and Carers Charters with Stay Safe as one of the priority areas and working with some children and young people accessing CAMHS services on “Do you feel safe here and in other places you go?”
- 3.22 Responses from these sessions have been positive with all the children and young people able to say what being safe meant to them, confirming that they felt safe in services they accessed and identified person(s) they would go to if they didn’t feel safe.
- 3.23 During 2011/12 work will be undertaken with the Primary Parliament, the Education improvement Clusters and Schools Councils, asking the following questions:
- What does being safe mean to you?
 - How safe do you feel at school, at home, in settings, the community etc?
 - Who would you talk to if you didn’t feel safe in any of the services you use?
- 3.24 In addition, all children and young people who are subject to child protection processes will be referred to the Advocacy Service run by Barnardo’s for support and advice. Barnardo’s will provide quarterly reports on the outcomes of this activity to enable the process to be developed as a result of the children and young people’s feedback.
- 3.25 A number of pieces of **Practice Guidance** have either been reviewed or developed in the year, including:
- **Safeguarding Children and Young People who may be affected by Gang Activity** – this is new practice guidance developed by the Crime and Drugs Partnership and ratified by the NCSCB and aims to ensure that practitioners consider the safeguarding needs of children and young people who are vulnerable in this area and use the safeguarding procedures where appropriate.
 - **Child Sexual Exploitation** – this practice guidance has been reviewed and updated with extensive multi agency consultation and now includes updated information, tools and guidance
 - **Children From Abroad** – this practice guidance has been developed to include updated legislation and practice requirements
 - **E Safety** – a new piece of practice guidance to support practitioners in working in the complex field of safeguarding in relation to ICT.

NCSCB Structure



3.26 **Membership**

3.27 The NCSCB membership list for 2010 - 11 can be found at **Appendix 1**. The membership of the NCSCB has been stable throughout 2010 but the impact of service re organisations and changes in budgets has begun to impact in 2011. This has been acknowledged at the NCSCB Strategic Board and within agencies, with contingency plans and support agreed.

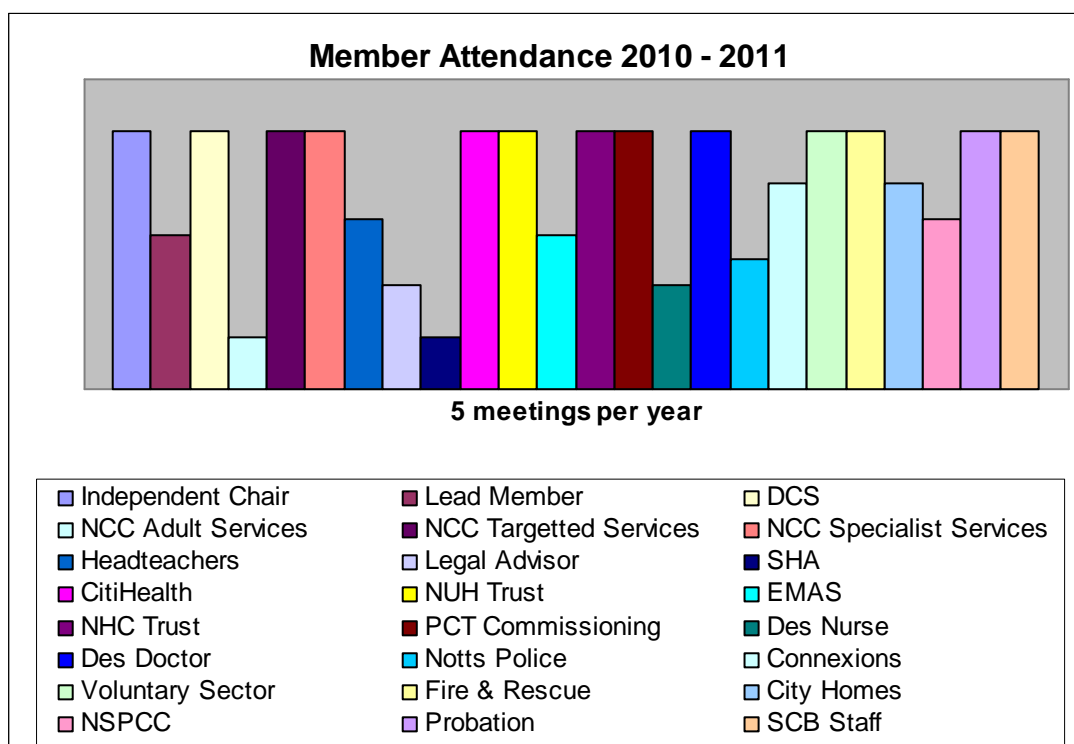
3.28 A Lay Member was recruited to the NCSCB in 2010 and attended the development session held in June 2011. Further work is planned to ensure the role is fully embedded into the work of the NCSCB.

3.29 **The Lead Member**

3.30 The NCSCB Lead Member is Councillor David Mellen who has been a regular attendee and contributor at the NCSCB Strategic Board.

3.31 **Meetings and Attendance Make a Difference.**

3.32 The NCSCB Strategic Board met five times between 01.04.10 and 31.03.11, including an Annual Meeting / Development Day in June 2010. Regular and consistent attendance at meetings is necessary and attendance is monitored throughout the year. Analysis of the data for 2010/11 indicates that membership attendance is good particularly across the key stakeholders, Health, Children’s Services and Police.



3.33 **Budget**

3.34 To function effectively the NCSCB needs to be supported by member organisations with adequate and reliable resources.

3.35 The total budget to support NCSCB activity in 2010/11 was £321,068. Partner agency contribution was made up as follows:

Probation	£3,030
Police	£18,190
Children's Services	£202,310
CAFCASS	£550
Connexions	£2,200
ASHH	£4100
Community/Culture	£8,220
PCT	£82,468
Total	£321,068

3.36 In addition the Child Death Manager and Administrator were funded by the Area Based Grant which for 2010-11 is £60,471.

3.37 Budget allocation for 2010-11 was:-

Administration	£67,863
Training	£81,771
Board Manager	£48,690
SCIMT	£121,676
Total	£319,973

3.38 In addition the Child Death Manager and Administrator were funded by the Area Based Grant which for 2009-10 was £57k.

3.39 Additional costs occurred in relation to undertaking of a Serious Case Review within this year have been funded by additional contributions from Children's Services, Nottinghamshire Healthcare Trust and Nottingham City PCT.

3.40 A funding formula for the future budget arrangements for the NCSCB is required to ensure the effective delivery of its core objectives. This work is to be carried forward into the 2010/11 business planning arrangements.

3.41 **NCSCB Effectiveness**

3.42 The table below provides a self assessment of the NCSCB using the model contained within the consultation document "Local Safeguarding Children Boards: Practice Guidance" published by the Department for Children, Schools and Families in March 2010.

3.43 Findings from the Ofsted Inspection of Safeguarding and Looked After Services in December 2010 are included in the table.

Effectiveness Factor	Effectiveness Indicator
Chairing, governance and accountability	
Strong Leadership of the independent chair	The NCSCB Independent Chair was recruited in 2007 and provides consistency, strong leadership, accountability and challenge to the work of the NCSCB. "The chair of NCSCB provides effective leadership and ensures that all agencies represented are fully engaged in the maintenance of effective safeguarding provision and processes" and she "ensures agencies meet their respective statutory responsibilities and achieve compliance with national safeguarding guidance."
Clarity of governance	The NCSCB Constitution provides a clear structure for the NCSCB Strategic Board, Panels, Sub Groups and Task & Delivery Groups. Lines of accountability and reporting are clear between all the groups as well between the Independent Chair, the Director of Children's Services and the Children's Partnership Board (CPB). "Partnership working is good. NCSCB fulfils its statutory duties and provides effective community and professional leadership in relation to universal, targeted and specialist safeguarding services. A good range of NCSCB subgroups focus on delivering the inter-agency work programme."
Understanding of roles and responsibilities of board members	The NCSCB Constitution provides clear terms of reference for the NCSCB Strategic Board and all panels and sub groups that make up the NCSCB structure. Induction packs for new NCSCB members are issued to all new members. The Independent Chair aims to meet with all new strategic board members prior to their first meeting as part of the induction process. All panels and sub groups of the NCSCB have representatives of partner agencies who are nominated by the strategic board representative and also receive the NCSCB Induction packs. As a result of service reviews and developments a number of new members will be joining the NCSCB in 2011 / 12 and work is planned to ensure strong safeguarding communities are maintained.

Structure & Membership	
Priorities & focus	The NCSCB priorities are detailed within the Business Plan 2008 – 11, based the LSCB objectives as detailed in Working Together 2006 and local priorities in relation safeguarding and vulnerable groups of children. The new Business Plan for 2011 – 14 has been developed from the NCSCB Strategic Board Development Session which set the strategic aims for the board as well as identified the priority areas for future work. The NCSCB was involved in the review of the Children and Young People’s Plan and the business plan is aligned to this. “Strategic planning through the various boards is decisive and forward-looking with good use of performance information to monitor agreed plans. Priorities have been honed to include all aspects of safeguarding and workforce planning, and commissioning arrangements are extensive and well focused.”
Clear planning and reviewing of work.	The annual Implementation Plan for the NCSCB Business Plan is regularly reviewed, updated and managed through the NCSCB Steering Group. Each of the panels and sub groups have Annual Work Plans for the delivery of their area of work and report through the NCSCB Steering Group or Strategic Board. Work is planned to be line with the NCSCB Strategic Objectives and to allow the NCSCB to respond to new areas of work that arise as a result of national or local change sin policy / legislation, Serious Case Reviews, Child Death Reviews, training or multi agency audits. “Strategic and business plans are of a good standard and demonstrate effective forward planning and resource utilisation. Strategic plans are well monitored and include clear performance targets based on national and locally derived indicators.”
Clarity of purpose, values and vision.	The NCSCB Constitution 2009 and the NCSCB Business Plan 2008 – 11 detail the vision, values and purpose of the safeguarding board and has been agreed by all NCSCB Members. These have been developed further with the development of a small number of strategic objectives, developed by the NCSCB Strategic Board, that all work priorities fall under.
Appropriate levels of	Members of the NCSCB Strategic Board are all

seniority.	senior managers within their agencies, with a lead for safeguarding. Membership includes the Director of Children's Services, the lead member for children, Medical Directors and Chief Officers of Health Trusts, Head Teachers from both Primary and Secondary schools and the Head of Public Protection from the Police. The NCSCB is also supported by a number of senior professionals who act in the role of advisors. "Leadership across the partnership to safeguard children and young people is good."
Stability of Board membership.	Attendance at the NCSC Strategic Board is stable (graph attached) and within the NCSCB Steering Group; Quality Assurance & Risk Management Panel; Serious Case Review Standing Panel; the Child Death Overview Panel and the Workforce Management & Development sub group. Budget cuts and service reviews undertaken in 2010/11 have begun to impact on the attendance of some partner agencies but contingency plans are in place during this period as well as plans to ensure full membership is resumed.
Communication	
Strong partnership exists between the LSCB and safeguarding operational teams.	The NCSCB has strong links with Children's Services Children's (Social Care / Family & Community Teams & Education), the Safeguarding Teams across all local Health Trusts and the Child Abuse Investigation Unit within the Police. Regular, open communication exists between the NCSCB and these colleagues to share information, provide advice, support and guidance and to share learning to develop services. Links between the NCSCB and the local Adults Safeguarding Board have been firmly established and further work is underway to review both boards sub structures.
Open communication and shared language between professionals.	The NCSCB promotes the use of a shared language through its safeguarding procedures and practice guidance; multi agency training and support for single agency training; and communications within the board structures and across partner agencies. The NCSCB has been fully involved in the development of the Family Support Strategy, which underpins the Safeguarding Children procedures in ensuring early intervention and prevention and an

	understanding of levels of need and appropriate levels of intervention. "The Board promotes safeguarding well"
Resources	
The LSCB has capacity to fulfil its responsibilities.	During 2010/11, the NCSCB had a Board Manager, a Performance Manager, a Child Death Manager, Training Coordinator and appropriate administrative support. In addition, the NCSCB hosts Safeguarding in Education and Safeguarding in Early Years and Child Care (0—19) Coordinators and their associated training programmes. As a result of a service review undertaken within the year a new staffing structure will be implemented from August 2011, which includes responsibility for both the adults and children's safeguarding boards. The volume of work generated and undertaken by the board is extensive.

3.44 **Safeguarding Training**

3.45 Working Together 2010 states "It is the responsibility of the LSCB to ensure that single agency and inter-agency training on safeguarding and promoting welfare is provided in order to meet local needs. This covers both the training provided by single agencies to their own staff, and multi-agency training where staff from more than one agency train together."

3.46 The NCSCB Workforce Management and Development Sub Group are responsible for fulfilling this and other functions in relation to safe working practices across all partner agencies. The Ofsted Inspection in December 2010 assessed that "The training delivered through the NCSCB is extensive and ensures staff in the partnership are well informed on all safeguarding matters."

3.47 During 2010/11, the NCSCB has continued to provide a full multi agency training programme but has also been developing a focus on quality assurance processes in relation to single and multi agency training. As a result, a Quality Assurance Strategy has been agreed and will be implemented during 2011/12 in order to report on the quality of both multi and single agency safeguarding training provided across the partnership and the impact of this on staff working with children and families. Participants continue to evaluate the training and seminars provided by the NCSCB as positive.

3.48 The following courses and seminars were provided by the NCSCB between 01.04.10 and 31.03.11:

Course Title	Number of Courses Delivered 10/11
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Introduction to Safeguarding Children	11
Safeguarding Children Update	5
Working Together	11
Domestic Violence & Safeguarding Children	3
Supervision & Risk Management	2
Safeguarding the Most Vulnerable Children	2
Assessment Skills	2
Rapid Response to Child Deaths	1
IMR Writing	1
Seminars	
Launch of the Updated NCSCB Procedures	2
Child Sexual Exploitation	1

3.49 The total number of people trained on NCSCB Courses during this period was 767 (a 13% increase from last year) and 200 attended the NCSCB Seminars. The breakdown of agencies attending training courses is provided in the table below.

3.50 Attendance at training is positive across most agencies, particularly the Voluntary Sector and the Family & Community Teams Directorate of Children & Families, however further promotion of NCSCB Training is required to increase attendance from other agencies.

Agency	Number of Staff Attended Training	
Nottingham City Council Children & Families	Schools & Learning	12
	Quality & Commissioning	3
	Safeguarding	7
	Family & Community Teams	242
	Young People, Learning & Skills	0
Health Trusts	CitiHealth	21
	NUHT	8
	NHCT	10
	EMAS	6
	NHS Nottingham City	8
Schools	Primary Schools	2
	Secondary Schools	5
	Academies	0
	Special Schools	0
	Independent Schools	0
Other Agencies	Probation	27
	Connexions	4
	Nottingham City Homes	1
	Police	50
	CAFCASS	25
	Fire & Rescue	6
	Further & Higher Education	12
	LMC	0

	Voluntary Sector	235
	Private	8
	Other	7
TOTAL		767

3.51 The NCSCB also hosts the Safeguarding in Childcare (0 – 19) and Safeguarding in Education Coordinators who deliver their own Safeguarding Training Programmes for the respective sectors. During the year, the following training was provided through them.

3.52 **Childcare and Early Years Settings:**

Course Title	Number of Courses	Number of Delegates
Introduction to Safeguarding	23	501
Allegations & Concerns Management	3	47
Role of the Designated Senior Person (DSP)	4	79
Safer Recruitment	1	28

3.53 **Schools and Education Setting:**

3.54 A total of 82 courses were provided for Schools and Academies in Nottingham, covering Basic Awareness, Introduction to Safeguarding, Designated Senior Persons, Safer Recruitment and training for Head Teachers. An additional 33 safeguarding courses were provided for Alternative Education providers and colleges. A total 2090 staff from the schools and education sector were trained in safeguarding issues.

3.55 Both Safeguarding Training Programmes for Schools & Education and for the Childcare Sector are being developed in 2011/12. This will enable a pool of trainers to support the delivery of introductory training in both sectors and also support the attendance of staff in both sectors to attend multi agency Working Together training provided by the NCSCB.

3.56 **Progress on Priority Areas**

3.57 The NCSCB has a number of Policy Task and Delivery Groups with work plans that are aligned to the NCSCB Business Plan priorities. These groups are chaired by representatives of partner agencies and report to the NCSCB Steering Group on a monthly basis. A brief summary of the work of each group is provided below:

3.58 Missing Children

- 3.59 Chaired by a representative of Children and Families supported by the NSPCC. Work Plan includes the creation of a Single Point of Contact to manage data in relation to missing children, the development of an Information Sharing Protocol, review of the Missing Children Practice Guidance and ensuring the views of children and young people are included within developments.
- 3.60 E-Safety
- 3.61 A cross authority group chaired by a representative of Children & Families. The E Safety Practice Guidance has been completed and the group will meet bi annually to keep up to date on developments and issues arising.
- 3.62 Human Trafficking and Child Sexual Exploitation
- 3.63 Chaired by a representative of Nottinghamshire Police. The Child Sexual Exploitation Practice Guidance has been reviewed and updated and will be implemented over the coming year. The work plan includes reviewing service provision for children and young people who are victims of trafficking or sexual exploitation and ensuring there are robust links between agencies; developing mechanisms for recording children who are at risk of sexual exploitation; and ensuring adequate training provision across agencies.
- 3.64 Domestic Violence
- 3.65 The Domestic Violence Steering Group is chaired by a representative of Children & Families and has prioritised the implementation and performance management of the Domestic Violence Practice Guidance and the DASH Risk Assessment Forms; working with schools, universal and targeted services to ensure that children who experience domestic violence are supported to achieve their potential; performance managing the use of CAF in domestic violence cases; and working with NDVF to raise awareness of domestic violence issues and healthy relationships in schools.
- 3.66 Hidden Harm
- 3.67 The Hidden Harm Group is chaired by a representative of the Crime & Drugs Partnership, supported by the Hidden Harm Implementation Manager from Children and Families. The work plan for 2010/11 includes work to understand the number of children affected by parental drug and alcohol use and raising awareness on these issues; the development of strategies to strengthen working relationships between adult and children's services; reducing the harm to children who's parents/carers use substances; supporting parents/carers who use substances and considering the needs of the whole family; and ensuring "think family" is embedded within adult treatment commissioning processes. The National

Treatment Agency supported by the Department for Education has released a document providing supporting information for the development of joint protocols between drug and alcohol services and children and family services. Half of the practice examples cited in the documents relate to the work being undertaken in Nottingham City.

3.68 Multi Agency Forum for Emotional Abuse

3.69 The multi agency forum for emotional abuse is chaired by a representative from Nottinghamshire Healthcare Trust and this year the group has concentrated on a review of membership, the Terms of Reference, Work Plan and Practice Guidance. The forum also provides consultations to practitioners working with emotional abuse cases in order to support interventions and planning.

3.70 Prevent

3.71 Prevent is a partnership approach to preventing violent extremism and building resilience within communities across Nottingham, and reducing the risk of people becoming or supporting terrorists or violent extremists. The Prevent Steering Group provides strategic leadership and direction on the agenda locally and plans to implement the revised national strategy.

3.72 The NCSCB Performance Manager became a member of the Prevent Steering Group during 2010 to strengthen the links between the Prevent agenda and safeguarding issues relating to both children and vulnerable adults. A presentation was made to the NCSCB Steering Group in March 2011 about the governance of the group and it was agreed that quarterly reporting within the NCSCB structure to further develop links and understanding.

3.73 The priorities for the Prevent Steering Group in the last year have been to continue to build trust, confidence and credibility with communities and in particular Muslim communities, to identify places and people vulnerable to radicalism and violent extremism, and providing support, preventing potential acts of terrorism.

3.74 As part of this work, the Channel Project coordinates work with individuals to help them resist activity likely to expose them to violent extremism, or prevent them becoming further involved on a pathway likely to lead to violent extremism. They also facilitate effective referral processes based on Risk Assessments to ensure appropriate statutory or community based diversionary activities.

3.75 Private Fostering

3.76 A private fostering arrangement is one that is made privately (i.e. without the involvement of a Local Authority) for the care of a child under the age of 16 (under 18 if disabled) by someone other than a parent or close relative for 28 days or more.

3.77 Nottingham City Safeguarding Children Board has a responsibility to oversee private fostering arrangements within Nottingham and monitor the Local Authority's compliance with their duties and functions. In discharging this responsibility, an annual report is presented to the NCSCB Steering Group by the Local Authority Officer with lead responsibility for private fostering.

3.78 The figures in the table below show the Nottingham City figures for Private Fostering for the last 3 years:

	2008/09	2009/10	2010/11
Number of new Private Fostering arrangements	23	36	38
Number of cases where visits were within Private Fostering Regulation 4 requirements	23	35	3
Of these, the number of cases where this action was taken within 7 working days of receipt of notification of the Private Fostering arrangements	18	26	2
Number of new arrangements that began during the year	21	30	37
Number of PF arrangements that ended during the year	20	28	35
As at 31st March - Number of children under Private Fostering arrangements	12	19	23

3.79 The number of new Private Fostering Arrangements reported to Social Care is slightly higher than last year with an increase of 23% in the number of new arrangements beginning in the year and 25% more arrangements ending.

3.80 The significant drop in the number of cases where visits were within Private Fostering Regulation 4 Requirements is due to a change in the way data is collected. This figure now represents only those cases that are reported to Social Care prior to the Private Fostering Arrangement starting (Regulation 4) rather than including those where Social Care were informed after the arrangements had started (Regulation 7) as has been included previously.

3.81 **Allegations Management**

3.82 Working Together 2010 (Page 199) states that "LSCBs have responsibility for ensuring there are effective inter-agency procedures in place for dealing with allegations against people who work with children, and monitoring and evaluating the effectiveness of those procedures".

3.83 The framework for managing cases where allegations have been made against people who work with children is wider than those situations where there is a reasonable cause to believe that a child is suffering, or is likely to

suffer significant harm. It also caters for cases of allegations that might indicate that a perpetrator is unsuitable to continue to work with children in his or her present position, or in any capacity. The procedures are adhered to in those cases where it is alleged that a person who works with children has:

- behaved in a way that has harmed, or may have harmed, a child
- possibly committed a criminal offence against, or related to, a child or,
- behaved in a way that indicates that he/she is unsuitable to work with children.

3.84 All partner agencies of the Nottingham City Safeguarding Board have a Named Senior Officer with responsibility for dealing with allegations. In addition, the Local Authority Designated Officer (LADO) manages and oversees all individual cases. The LADO provides advice and guidance in relation to allegations as well as monitoring the progress of cases to ensure that they are dealt with as quickly and consistently as possible. In addition, the Safeguarding in Education and Childcare (0-19 years) Coordinators who sit within the NCSCB undertake some LADO responsibilities particularly in relation to schools and childcare settings. This includes supporting those settings with the development of policy, practice and training that arise as a result of an allegation or concerns.

3.85 The Local Authority Designated Officer (LADO) managed 89 allegations / concerns in relation to people who work with children between 1st April 2010 and the 31st March 2011. This is 1 less allegation than was managed in the previous year. In addition 63 cases were closed which is an increase of 38.7% from last year.

3.86 These staff worked in a variety of different roles across a number of agencies, as detailed below:

Agency	Number of Allegations
Children and Families (inc internal Residential)	10
Private Residential	12
Education (including teaching assistants, teachers)	26
Foster Carers	11
Health	6
Police	2
Faith Groups	3
Childcare Sector (including Childminders)	11
Voluntary Sector	6
Other	2
TOTAL	89

3.87 The above allegations were categorised as follows:

Category of Abuse	
Physical Abuse	46
Sexual Abuse	22
Emotional Abuse	8
Neglect	2
Online	2
Restraint	3
Other (including conduct, substance use)	6

3.88 Of the 63 cases closed within the period 01.04.10 to 31.03.11, 33.3% were resolved within a month (up 8% on last year's figures), a total of 79.3% were resolved within 3 months and 20.6% took up to a year to resolve.

3.89 Working Together 2010 states "it is reasonable to expect that 80% of cases should be resolved within one month, 90% within three months and that all but the most exceptional cases should be completed within 12 months, although it is unlikely that cases that require a criminal prosecution or a complex police investigation can be completed in less than three months." The complex nature of the allegations received has meant time is needed to ensure thorough investigations with the police; the employing agency and Children's Social Care are undertaken. This results in the majority of cases being resolved within 3 months.

3.90 The outcomes of all concluded cases were:

Outcome	Number of Cases
No Further Action	16
Unfounded	2
Unsubstantiated	19
Suspended pending Investigation	24
Subject to Disciplinary Procedures	15
Dismissed	13
Resigned	2
Received written warnings	5
Attended Training	6

4. Monitoring the Effectiveness of Local Work to Safeguard and Promote the Welfare of Children

4.1 Key priorities for 2010/11 were to:

- Review and develop the quality assurance processes undertaken within the board
- Continue to implement a Monitoring Effectiveness Strategy and Framework for the NCSCB, including the development of a programme of multi agency audits
- Develop the Section 11 Self Assessment process across all agencies
- Monitor the outcomes of Serious Case Reviews and the Child Death Overview Panel to ensure actions are delivered and outcomes are improved.

4.2 The Quality Assurance and Risk Management Panel (QARM)

4.3 The role of the Quality Assurance and Risk Management Panel is to develop and deliver the Monitoring Effectiveness Strategy and Report and provide assurance on the quality and effectiveness of safeguarding practice in Nottingham to the NCSCB, the Children's Partnership Board and key stakeholders. In addition, the panel also takes responsibility for the implementation of an effective Risk Management Strategy.

4.4 The Monitoring Effectiveness Strategy includes the following components:

- Analysis and reporting on performance management data
- Annual safeguarding reports from partner agencies
- Section 11 self assessments
- Effectiveness of NCSCB processes, including Serious Case Reviews and Child deaths
- Implementation of action plans arising from reviews commissioned by the NCSCB
- Quality assurance activity, including multi agency audits.

4.5 During 2010/11, the Quality Assurance and Risk Management Panel prioritised a full review of their aims, processes and membership. This was undertaken through a development session, liaison with the NCSCB Independent Chair and full discussion with all agencies.

4.6 The outcome of this review is that the Quality Assurance and Risk Management Panel will develop and maintain a focus on the quality of services and ensuring learning from all board business, including SCRS, Child Deaths and Allegations Management and is used to influence this.

4.7 Audits

4.8 The NCSCB has developed a programme of multi agency audits as the key process to assure the quality of safeguarding practice. This process was developed through 2010 and will be implemented from April 2011.

4.9 The Quality Assurance and Risk Management Panel drives the multi agency audit process, which includes the setting of priorities for the programme of audits, supporting the gathering of information within agencies, ratifying the outcomes of the audits and reporting to the NCSCB Strategic Board.

4.10 The process of multi agency audits involves:

- the random selection of children who are subject to child protection plans and who are looked after to be subject to audit
- collation of files and information from all agencies who have had contact with the child or their family
- a multi agency pool of auditors who examine and assess support and services provided by other agencies
- a multi agency discussion and agreement on the key safeguarding concerns; significant events and decisions; adherence to policy, procedures and legislation; and good practice / areas for development
- the development of a multi agency combined chronology and an anonymised report with recommendations and action plan.

4.11 This process was used to undertake the case audits required by Ofsted in preparation for their Inspection of Safeguarding and Looked After Services in November 2010. Ofsted commented that “this was an extensive and thorough process which identified that children and young people are safe.”

4.12 Within this process, Ofsted identified four Looked After Children and four children who were subject to child protection plans and the audits were completed on a multi agency basis within a week.

4.13 The following themes arose from the audits:

4.14 Strengths

- All children subject to Child Protection Plans were considered to have a plan that reflected their current level of risk and the plan for all looked After Children was appropriate and their outcomes were considered to have significantly improved by virtue of them being looked after.

- Overall processes had been adhered to in a timely manner, particularly PEPS and Health Plans were in place and LAC reviews had been held within timescale
- Inter-agency communication and working was generally strong and evidenced within the files
- Families were offered a great deal of support via the inter-agency network. Practical support in particular was seen as strength in minimising the risk to children.
- There was clear evidence of children being afforded a level of security within their family and school placement
- Good recognition of ethnicity, religious and cultural issues including the appropriate use of interpreters
- Robust, child-centred contact arrangements have been put in place and the recording of these appropriately focussed upon the impact upon the child.

4.15 **Areas for Development**

- There was a focus upon the current incident and insufficient attention paid to the history of the case and previous patterns of parenting
- The purpose of the intervention is not always clear and sufficiently robust to focus upon the risk factors. Conference recommendations need to be SMARTer to assist workers in their focus.
- Children's Child Protection Plans were not always individualised and risk factors are seen to apply to all children within the family group.
- The use of the Common Assessment Framework was not routinely considered as a tool to bring together an inter-agency assessment prior to specialist service intervention or as part of a de-escalation process.
- The use of intelligence and research in respect of the trilogy of risk factors needs to be more embedded in practice.
- Concerns in relation to the adults often became the focus of the intervention without an effective analysis of how this impacted upon the parenting they afforded their children.
- There was a lack of evidence of supervision on the Social Care files and management oversight was not always clear

- The transfer of cases had an impact in terms of service delivery as the significance of key historical information was not always realised
- There were some gaps in statutory visiting for Looked After Children and what action was required within visits to comply with statutory guidance.

4.16 The context within which agencies have been working was acknowledged as part of the multi agency audit process. Services have been delivered in a context of increasing front-line staffing pressures within Social Care, Health Visiting Services and the Child Abuse Investigation Unit of the Police. At the Safeguarding Children Board in June 2010 the Director of Children's Services notified partners that capacity in Social Care was significantly reduced and could impact on the timeliness and quality of safeguarding interventions, particularly in relation to Initial and Core Assessment timescales, Section 47 Enquires and timeliness of Looked After Children Reviews and Child Protection Reviews. Similar concerns were expressed by the strategic safeguarding lead for the PCT and Nottinghamshire Police.

4.17 In order to mitigate against these identified risks from directly impacting on services to children, comprehensive action plans were put in place within all three agencies and these have been subject to ongoing scrutiny/oversight by the Strategic Safeguarding Board. Included within this action plan was the decision to raise these challenges with Government Office. The outcome of this was that weekly meetings were established between representatives from Government Office and Senior Managers within the local authority (Chaired by the Director for Children's Services) in order to utilise best practice strategies from across the region.

4.18 Some of the issues that arose within these audits directly correlated to these staffing pressures. Three of the cases selected were being worked within the same team. This team has experienced particular difficulties in relation to consistent management and gaps in social work staff. Robust performance management processes have been out in place across the City to ensure that any issues of this nature are both identified and acted upon in a timely manner.

4.19 Following the multi agency audits, the auditors unanimously supported the need to undertake similar case based analysis on an inter-agency basis through the NCSCB in the future. Although it was acknowledged that the process had been both time consuming and challenging it was felt that the outcome in terms of an independent analysis in relation to the impact of agency service delivery warranted this kind of approach. It also enabled a quick response to be made when any management or safeguarding issues

emerged. The use of staff that have an 'expert' knowledge in relation to the trilogy of risk factors also benefited the process.

4.20 There were added benefits of the process in relation to gaining insight into how other agencies operate and improving own agency practice through good practice learning which consequently will improve the interventions for other children and their families. The entire audit group valued the opportunity to undertake an in depth case analysis and reflection of this nature.

4.21 Staff Survey

4.22 In early 2011, the Quality Assurance and Risk Management Panel agreed to undertake a multi agency staff survey to assess the level of safeguarding knowledge and confidence across partner agencies. It has been proposed that this is undertaken annually in order to highlight areas for development and the first year is acknowledged as a bench marking exercise.

4.23 The survey was undertaken electronically, circulated to colleagues at all levels within partner agencies. A total of 727 responses were received with the following results:

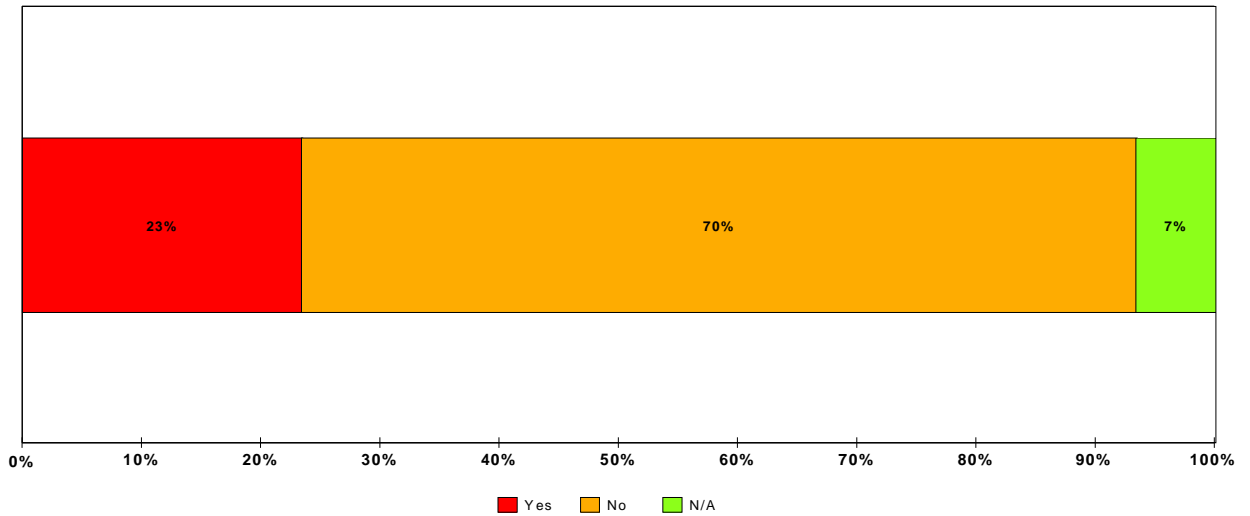
Agency	Number of Responses
NCC Children & Families	166
Health	342
Schools	16
Police	35
Crime & Drugs Partnership	14
Probation	27
Connexions (Nottingham Futures)	53
CAFCASS	1
Fire & Rescue	2
Nottingham City Homes	4
Private Sector	8
Voluntary Sector	59
Total	727

4.24 Of these responses, 6.9% described themselves as Strategic Leads, 22.3% as Managers and 70.2% as practitioners. Six volunteers responded.

4.25 In relation to the Common Assessment Framework(CAF), over 60% of respondents said they were fully aware of the CAF and how it is used within their agency however only 41% of practitioners who responded had ever undertaken a CAF.

4.26 Of practitioners who responded, 70% had never undertaken the role of Lead Professional and less than half felt confident in undertaking this role.

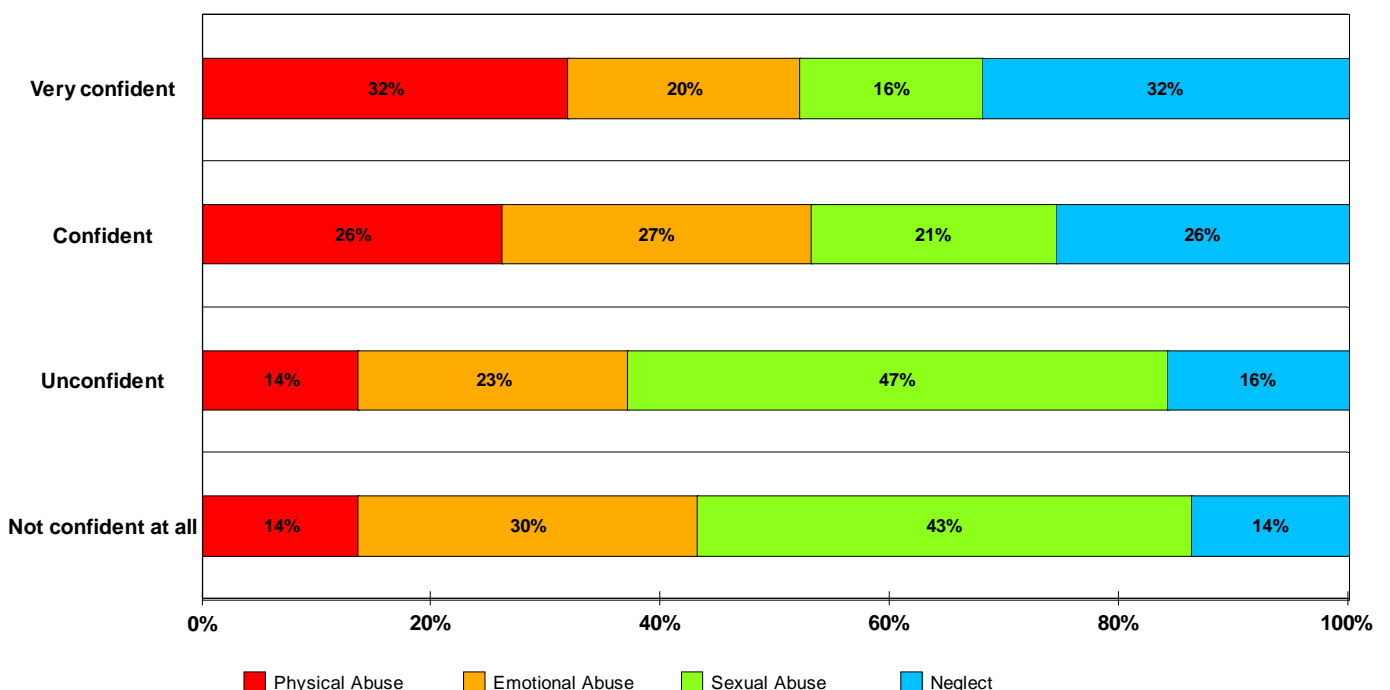
Responses for: Have you ever undertaken the role of Lead Professional?



4.27 Only 4.9% of people said they weren't aware of the NCSCB Safeguarding Procedures and how these impact on their work and 80% said they were fully aware of their own agency safeguarding procedures and how these related to their work.

4.28 The majority of people receive updates on safeguarding issues and policies from their line managers or through team meetings and 18% of respondents said they liaise with other agencies on safeguarding issues daily.

4.29 The survey asked colleagues to state how confident they were in recognising and responding to abuse. The results below show that practitioners are more confident in recognising Physical Abuse and Neglect and much less confident in recognising Sexual Abuse.



4.30 The vast majority (98.4%) of people were aware of what action should be undertaken if they have identified abuse and 92.1% said they felt confident in their role in safeguarding children.

4.31 The comments made by respondents show the majority are clear about their role, for example:

“I do not have direct contact with children but I am aware that safeguarding children is everyone's responsibility.”

“The safety of the child is and will always be paramount and whilst performing my duties I should be child centred/focused.”

“My role is to consider and be aware of the potential for safeguarding issues, to report appropriately and to raise concerns, to take immediate action where appropriate and required. To liaise with other members of the multidisciplinary team and the family involved”

“As a midwife, I am first in line to identify children or unborn babies at risk”

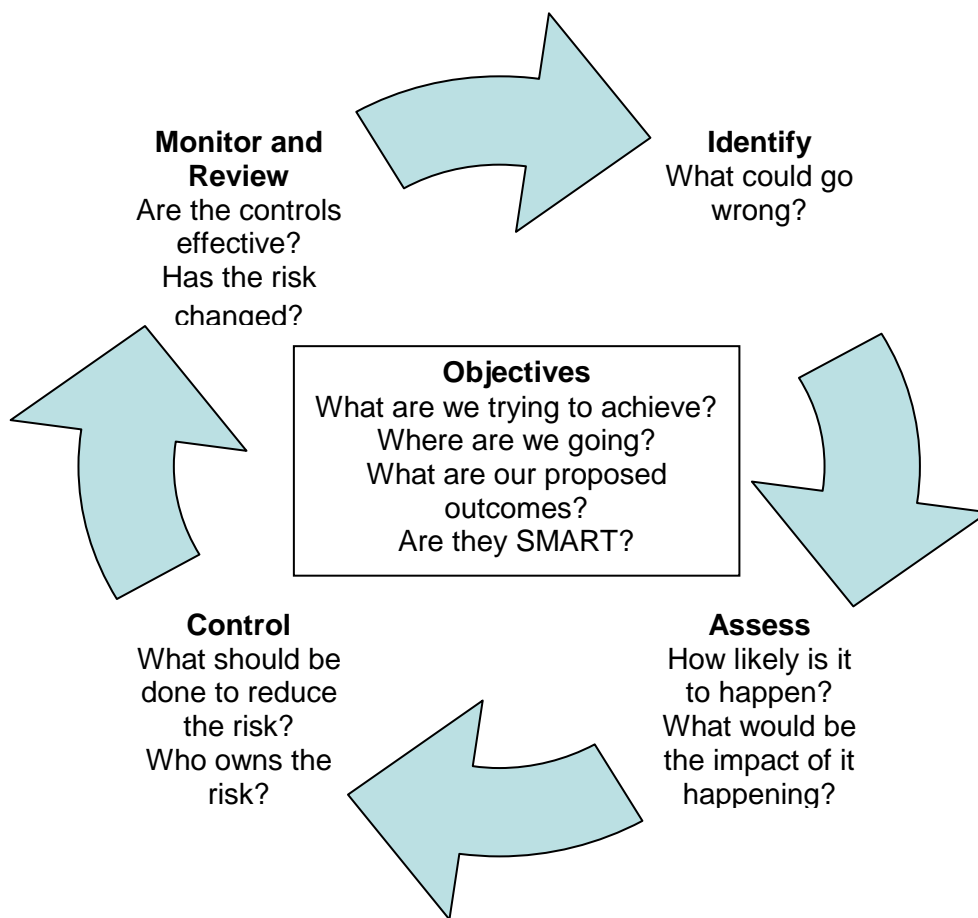
4.32 In a very small number of cases, the need for ongoing awareness raising about safeguarding both within work settings and in the community was highlighted, for example:

“I have very little interaction with the public during my working hours. My only role in safeguarding children would be recognising it in the street but would fail to know what to do in that instance.”

4.33 **Risk Management**

4.34 Risks identified within the NCSCB Risk Register are managed through the Quality Assurance and Risk Management Panel and owned by the NCSCB Strategic Board, who receive quarterly updates.

4.35 A Risk Management Strategy, based on the model below, has developed this year to ensure all NCSCB Boards, Panels and Sub Groups will be able to manage their own risk, highlighting any exceptions through the Quality Assurance and Risk Management Panel.



4.36 The Strategic Risk Register is managed as a dynamic process with identified actions in place to mitigate against each risk.

4.37 **Serious Case Review Standing Panel (SCRSP)**

4.38 Chapter 8 of Working Together 2010 details the purpose of a Serious Case Review and the circumstances under which the NCSCB must undertake one, or consider undertaking one. Referrals for consideration of a Serious Case Review can be made by any agency through their NCSCB Strategic Board representative and are presented to the Serious Case Review Standing Panel for consideration. The decision to undertake a Serious Case Review is the responsibility of the NCSCB Independent Chair.

4.39 The Serious Case Review Standing Panel is responsible for the commissioning, management and quality assurance of Serious Case Reviews and ensuring this is compliant with the expectations of Working Together 2010, including the use of independent authors and chairs.

4.40 The Serious Case Review Standing Panel is also responsible for the quality and implementation of strategic action plans produced following an SCR,

and requires panel members to submit evidence to demonstrate that actions have been completed.

- 4.41 Between 01.04.10 and 31.03.11 one Serious Case Review has been initiated but has yet to be completed due to the complexities of the review. In addition, the NCSCB is contributing to 2 Serious Case Reviews being undertaken in other local authorities.
- 4.42 In addition a Reflective Learning Event, a Root Cause Analysis Report and Individual Management Reviews have been undertaken. The themes arising from these include the identification and management of sexual abuse; understanding the implications of cultural issues and learning disabilities on parenting and the need for all agencies to be aware of escalation policies and practice.
- 4.43 **Child Death Overview Panel (CDOP)**
- 4.44 NCSCB has had a Child Death Overview Panel (CDOP) since 1st April 2008 and, since September 2008, effective arrangements in place for the Rapid Response required following a child's unexpected death. The CDOP reviews *all* deaths of children resident in the NCSCB area, as required by chapter 7 of Working Together 2010.
- 4.45 The purpose of the Child Death Overview Panel is to ensure that through a process of multidisciplinary review of child deaths, the Nottingham City Safeguarding Children Board will better understand how and why children in our local authority area die.
- 4.46 For Nottingham City Safeguarding Children Board CDOP, the primary functions are interpreted as being:
- to review all deaths of children normally resident within Nottingham City;
 - to overview deaths of children not normally resident in Nottingham City but who die within the City boundary
 - to quality assure the Rapid Response Process in relation to unexpected deaths of children;
 - to identify potentially preventable deaths.
- 4.47 The CDOP meets monthly and is accountable to NCSCB Strategic Board. Six monthly Cross Authority CDOP meetings are held with Nottinghamshire safeguarding Children Board to develop practice and procedures, share learning and compare data.
- 4.48 NCSCB employed a full time Child Death Manager to support the child death review processes, along with a part time CDOP administrator, both funded through the Child Death Grant until March 2011.

- 4.49 Nottingham University Hospitals (NUH) NHS Trust employs the City Designated Paediatrician for Unexpected Deaths (DPUD) for 6 hours per week with help from the Designated Doctor for Safeguarding. Also employed is an Administrator for 22 1/2 hours per week which has been covered on a temporary basis as post is vacant. This post is shortly going out to advert for 30 hours a week. A Specialist Death Nurse for Child Death Review is employed for 37 hours per week.
- 4.50 The NCSCB submitted an annual statutory return to the Department for Education in respect of the Preventable Child Death Data Collection as required in relation to the 33 deaths reviewed in the year. Of these 33, 15 children died in the previous year, 18 died in the current year and there are 13 reviews not complete on 31.03.11.
- 4.51 Of those 33 deaths reviewed between 01.01.11 and 31.01.11, 10 deaths had modifiable factors and 14 were unexpected 19 of the deaths were expected.
- 4.52 In relation to the children whose deaths were reviewed, 42% were under 27 days old; 70% were under a year old and 21% were aged 10 – 18 years old. Just over 51% of the children were boys, the majority (60%) were White British, 12% were of Asian or Asian British/Pakistani background and 12% were of Black African or Caribbean background. These numbers are similar to last years with no significant differences.
- 4.53 In relation to timescales, 67% of deaths were reviewed and ratified at CDOP in less than 6 months and another 27% of deaths were reviewed and ratified at CDOP within a year.
- 4.54 The more complex cases take more time within the CDOP process to ensure all information is gathered and considered and an appropriate plan devised to ensure that CDOP is assured that changes have taken place. One case reviewed during the last year involved several agencies who had been involved in the care of a child with complex needs. There were multiple learning points and recommendations and in order to be effectively assured of change, an extraordinary panel was convened to hear the evidence. This was evaluated as an effective process by participants who appreciated the opportunity to evidence the implementation of recommendations and the support the panel afforded them in working with the family.
- 4.55 **Increasing Parental Involvement** - during the last year, the NCSCB Parents' leaflet that explains the child death review processes has been given to bereaved parents at the hospital at the time of their child's death. The professional's leaflet has also been in wide circulation and is now available to professionals attending case discussions. As a result of this, there is an increased awareness of the process amongst professionals and evidence of increasing parental involvement in the process particularly after an unexpected death. Parents are raising questions with professionals attending the case meetings and receiving feedback afterwards.

- 4.56 **Neonatal Death Review Group** involving Nottingham City / Nottingham University Hospitals Trust and Kings Mill Hospital health professionals has met quarterly to examine all neonatal deaths and identify patterns locally. As a result, it has been identified there is a local increase in deaths relating to herpes in babies and children which has led to the development of herpes guidance for medical teams. A Neonatologist now attends the NCSCB / NSCB Cross Authority CDOP on an annual basis to present data and provide information on infant deaths to enable the panels to plan appropriate public health campaigns
- 4.57 The CDOP focus for 2011/12 is to ensure that learning from the child death reviews is embedded into practice. To achieve this, the CDOP will focus on creating strategic objectives and SMART actions from all reviews; ensuring evidence is in place that reflects changes in practice; and developing formalised pathways into the governance processes of partner agencies.
- 4.58 In addition, whilst there is no national mechanism in place for systematically analysing, collating and disseminating local learning on child deaths (Munro 2011) the Child Death Overview Panel will lead collaborative working with neighbouring panels covering the East Midlands. A Summit on Child Death is planned for later in the year to network; share good practice, identify trends and plan for effective public health campaigns.
- 4.59 **Annual Partner Agency Safeguarding Reports**
- 4.60 The Monitoring Effectiveness Strategy 2010/11 details the expectations for partner agencies to complete annual Safeguarding Reports, including a self assessment of the Section 11 requirements of the Children Act 2004, reports on progress in relation to safeguarding, safe recruitment and any safeguarding inspections or audits undertaken.
- 4.61 The Annual Partner Agency Safeguarding Reports were received this year into the Quality Assurance & Risk Management Panel to enable an assessment of agencies contribution to safeguarding. This was the first time this process had been undertaken and it was evaluated by the QARM members as being a useful contribution to the development of the NCSCB's assessment of safeguarding practices across Nottingham.
- 4.62 Section 11 assessments have been completed by partners each year since 2007 and over that time have shown a positive and improving picture. In 2010/11 all partner agencies of the NCSCB completed Section 11 assessments. Work has also begun in relation to supporting voluntary sector agencies to contribute to this process. The findings of the annual reports and Section 11 audits indicate a positive picture regarding local practice. In the small number of cases where action was required to achieve compliance with Section 11, action plans were in place to address this. A number of agencies have undertaken work to revise and update their framework of policy and procedure to ensure that staff have access to

clear guidance. Training programmes have been updated and revised, in part in relation to the findings of local serious case reviews. Many agencies have processes for capturing feedback from service users, although not all of this feeds back comments specifically on safeguarding issues. The key challenge identified by agencies for this year was the need to maintain capacity, particularly of experienced staff. This issue was identified by a number of agencies in light of efficiency measures and re-structuring in certain organisations.

4.63 Specific strengths identified within the reports include:

- A Screening and Duty Service is now in place within Children's Social Care which gives a commitment to undertaking an Initial Assessment if three referrals have been received over a 12 month period in relation to the same child or family. This should result in a more effective response to mounting concerns and repeated contact with Children's Social Care. In addition, a "Heat Map" being developed by the Social Care Performance Team to identify and support families where there is a high level of referrals.
- The Nottingham Family Support Strategy that has been developed by the Nottingham Children's Partnership and ratified by the NCSCB and is intended to address issues including early intervention and integration of services and referral pathways. The Family Support Pathway (outlined in the Family Support Strategy) provides clear guidelines for thresholds of intervention, particularly for children and families requiring additional or extensive support or protection.
- 91.7% of child protection investigations undertaken by the Nottinghamshire Police (Prosecution, caution or NFA) were completed within 90 days
- Nottinghamshire Police undertook an audit of attendance at ICPC's and found they had attended 94½% in Nottinghamshire and are planning to develop data collection to be able to show specific figures for Nottingham City. This is a significant improvement
- A Victim Information Pathway has been developed by Nottinghamshire Police in conjunction with other agencies. This allows victims child victims of sexual assault a full assessment of needs and signposting to appropriate support agencies for
- The Sexual Exploitation Investigation Unit has been allocated 5 additional Detective Constables to deal with increased demand in relation to internet related offending

- Nottingham University Hospitals Trust (NUHT) had an unannounced visit from the Care Quality Commission (CQC) in September 2010 and received compliance with Section 7 Safeguarding
- Increased referrals to the Safeguarding Team at NUHT, including from those teams that work with adults, as a result of safeguarding training and awareness raising
- A fully integrated Child Death Review Team is operational within NUHT with nurse and doctor leads.
- The NSPCC offered 100% of children who went missing a Return Interview (for those who were eligible as defined by NI71 and not open to Social Care) and 79% of these were completed (others weren't due to lack of consent or moved from the area).
- Nottinghamshire Probation Trust received a report from the HMIP Offender Management Inspection in February 2011 which noted very good performance and commented on the use of NCSCB Safeguarding Procedures in the management of risk to harm from others
- Nottinghamshire Connexions have developed into Nottinghamshire Future and have ensured that's safeguarding is central to the these developments, by updating policy and procedure, providing clarity on expectations, implementing a system of case file audits and ensuring inductions cover safeguarding
- There was significant assurance to the Strategic Health authority that all the provider Health Trusts had robust safeguarding arrangements
- The CQC assessed the health contribution to safeguarding Services within the Ofsted Inspection of Safeguarding and Looked After Services and reported that strong, visible, strategic health leadership and management in place and a long history of effective joint working and commissioning
- Increase in funding for health visitors has been agreed and recruitment is underway to ensure the additional 26 full time equivalent posts are filled
- The Family Nurse Partnership, working with first time teenage parents has been extended to be able to reach 25% of the eligible population

- An audit of safeguarding supervision provided by the Safeguarding Team in the City Care Partnership (to Health Visitors and Safeguarding Children Nurse Specialists) found that out of 1,640 files audited, 71% of supervision dates were within 3 months as expected (recorded as 34.9 % historically)
- City Care Partnership achieved 100% compliance with the CQUIN target to ask women using services about their experience of domestic violence, where this was safe and appropriate to ask
- Co location of community health services in Children's Centres and Safeguarding & CAF Leads within the Social Care Screening and Duty Service have led to significant improvements in information sharing and joint planning of safeguarding work

4.64 Area's for development:

- Joint visually recorded Video Interview are still being undertaken mainly by the Police as a single agency and further work is required within Nottingham Children and Families to improve this
- Within the re organisation of health trusts, a number of staff have transferred to Nottingham University Hospitals and Nottinghamshire Healthcare Trust and the arrangements in relation to safeguarding inductions and training must be managed
- Full participation of children within child protection conferences to ensure their voices are heard
- Increased management involvement and oversight is required within safeguarding cases (Nottinghamshire Probation, Children's Services)
- Implementation of the Domestic Violence, Crime & Victims Act 2004 which requires the Community Safety Partnership to consider a review if a person aged 16 or over has died as a result of violence, abuse or neglect. This will need to be considered alongside relevant safeguarding reviews
- The merging of adults and children's safeguarding responsibilities in a number of organisations must be managed appropriately to ensure efficiencies whilst maintaining expertise and quality
- The development of the NHS Commissioning Board, the Health and Well Being Board and the GP Consortia will require strong governance, leadership and strategic plans to ensure safeguarding is maintained as a priority

- Full implementation of the Common Assessment Framework and the Family Support Strategy / Pathway is required across all agencies to ensure children and families are supported at the earliest opportunity without the need for specialist services unless required
- 4.65 Further development of the Annual Safeguarding Report process is required to ensure partner agencies are able to fully report on safeguarding activity. This will include the development of local and national indicators in line with the expectations of the Munro Review of Safeguarding; further development of quality assurance processes to ensure the Section 11 Self Assessments are robust; development of the template for reports to ensure they are appropriate for all agencies and reflect the learning from SCRs, Child Deaths and Multi Agency Audits; and full consideration within the NCSCB processes to ensure compliance is fully understood and assessed.
- 4.66 **Monitoring Effectiveness Through External Inspections**
- 4.67 Ofsted undertook their Inspection of Safeguarding and Looked After Services between 29 November – 10 December 2010 and the resulting Report was published on 24th January 2011. The full report is available at www.ofsted.gov.uk
- 4.68 During the inspection period, the inspectors evaluated evidence presented to them in a variety of forms, including:
- discussions with children and young people receiving services, front line managers, senior officers including the Director of Children's Services and the Chair of the Local Safeguarding Children Board, elected members and a range of community representatives;
 - analysing and evaluating reports from a variety of sources including a review of the Children and Young People's Plan, performance data, information from the inspection of local settings, such as schools and day care provision and the evaluations of a serious case review undertaken by Ofsted in accordance with 'Working Together To Safeguard Children', 2006;
 - interviews and focus groups of front line health professionals, managers and senior staff from NHS Nottingham City, CitiHealth Nottingham, Nottingham Community Health and Nottingham University Hospital NHS Trust;
 - a review of 28 social care and health records for children and young people with a range of needs. This provided a view of services provided over time and the quality of reporting, recording and decision making undertaken;
 - the outcomes of the most recent annual unannounced inspection of local authority contact, assessment and referral centres undertaken
- 4.69 The inspectors noted the demographic make of Nottingham City, particularly in relation to the number of pupils for whom English is a second language (20%), the number of children and young people who come from

minority ethnic groups (40.7%) and the fact that 64% of children are classified as living in poverty. They also assessed that the partnership and those agencies working with children and families understand these issues and the impact they have on service provision.

4.70 The Ofsted Inspection evaluated that the Overall Effectiveness of Safeguarding services and the Capacity for Nottingham City to Improve as being “Good”, because “Statutory requirements in respect of safeguarding are met and the partnership is able to demonstrate continuous improvement in service provision as the result of audits, inspections and user feedback.” In addition, the inspectors drew attention to the following areas of good practice:

- Effective quality assurance processes that are used to strengthen services
- Strong leadership across the partnership
- Strategic plans ensure safeguarding is a priority
- Extensive training provided by the NCSCB and clear lines of accountability between the NCSCB and CPB
- Good involvement of the voluntary sector in service provision
- Robust workforce planning and clear commissioning arrangements
- Outstanding developments early intervention and increased use of the Common Assessment Framework (CAF)
- Effective monitoring of local and national performance indicators

4.71 The overall findings of the Ofsted Inspection are recorded below:

Safeguarding Services	
Overall effectiveness	Good
Capacity for improvement	Good
Safeguarding outcomes for children and young people	
Children and young people are safe and feel safe	Good
Quality of provision	Adequate
The contribution of health agencies to keeping children and young people safe	Good
Ambition and prioritisation	Good
Leadership and management	Good
Performance management and quality assurance	Good
Partnership working	Good
Equality and diversity	Good
Services for looked after children	
Overall effectiveness	Good
Capacity for improvement	Good
How good are outcomes for looked after children and care leavers?	
Being Health	Good
Staying Safe	Good
Enjoying and achieving	Good
Making a Positive Contribution	Good
Economic Well Being	Adequate

Ambition & Prioritisation	Good
Leadership and management	Good
Performance management and quality assurance	Good
Equality & Diversity	Good

4.72 There were 12 recommendations arising out of the inspection and an Action Plan has been devised to ensure implementation of these, monitored through the NCSCB Steering Group.

4.73 **Safeguarding Performance Data**

4.74 The analysis of the effectiveness of safeguarding is set against a context of increasingly limited resources across all agencies with responsibility for safeguarding and child protection; a national focus on child protection, learning lessons from Serious Case Reviews and improving practice along with new national practice guidance and a global economic downturn affecting families and services locally.

4.75 **Demographic Data for Nottingham City**

4.76 Approximately 60,920 children and young people live in Nottingham, 50,089 of whom are aged between 0 and 15 years of age. The proportion of the population who are 5 -15 is lower than the national average whereas the numbers of children who are 0 – 5 are in line with the national average.

4.77 The city's population is becoming increasingly diverse. The Black and Minority Ethnic (BME) percentage for under 16s is currently 27% (2007) but is projected to be at least 33% by 2017.

4.78 Nottingham is ranked the 20th most deprived local authority area in England in the 2010 Indices of Multiple Deprivation (IMD) - an improvement on the 13th ranking in the 2007 IMD. Deprivation and underachievement are deeply entrenched in many parts of the city with many children not growing up in safe, happy and fulfilled childhoods, nor are they achieving their potential. Some have complex needs and many will pass on the same challenges to their own children.

4.79 In relation to safeguarding and the increased focus on early intervention, many of our children are born into difficult and challenging family situations, for example:

- nearly 41,420 children and young people live in households dependent on state benefits for their income. This compares to 42.8% in England. Most of these households have incomes below
- it is estimated that 7,000 to 10,000 children and young people are living with domestic violence at home

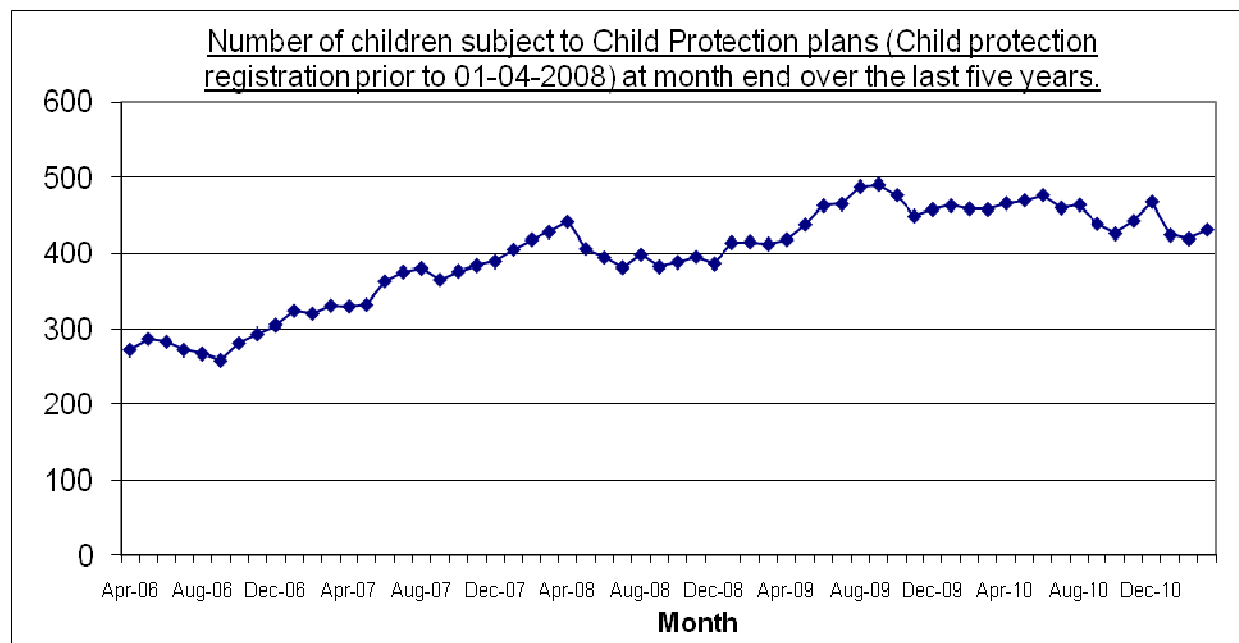
- the number of children with Child Protection Plans today decreased slightly from the previous year resulting in 412 children. This figure is broadly the same as ten years ago. Referrals of families to Children's Social Care are consistently higher than its statistical neighbours. Almost 50% of nearly 5,000 initial referrals each year come from just five of our twenty city wards
- it is estimated that there may be approx 3,700 young people under the age of 18 regularly using Class A drugs, although the number directly involved in substance abuse today is likely to be significantly higher. The proportion of young people drinking alcohol has not risen in recent years, but the amount consumed has doubled in the last twenty years, with more young people 'drinking to get drunk'
- a larger number of children and young people are affected by the substance or alcohol abuse of their parents or carers. Over 4,500 children under the age of 19 may be affected by problematic drug use of heroin or crack by their parents or carers, with a larger number affected by the abuse of other drugs. Estimates of children affected by parental alcohol abuse vary from 10,000 to 20,000
- the last Census in 2001 identified nearly 1350 young people aged 19 or under providing care for siblings or adults. Given the number of parents with substance or alcohol dependency, this could be much higher, with some estimates putting the figure at closer to 10,000
- there are five hundred and three children in care today, with many leaving care with no or minimal qualifications. Half of all girls who leave care become mothers within a year. Children in care or leaving care are particularly vulnerable to poor mental health, homelessness, substance misuse, offending and unemployment
- over a quarter of pupils in City schools (11,334 children) have some form of Special Educational Need, with one third of these (3,519) requiring active support. This figure has been rising. Over 4,000 children and young people aged 18 or under have disabilities, of which almost 900 have severe and lifelong disabilities, a number that has also been rising in recent years. A relatively high proportion of our children also have mental health issue.

4.80 The Children's Partnership Board (CPB) and the NCSCB have a good understanding of the level and nature of needs within Nottingham and are working within the Children and Young People's Plan to address these.

4.81 Both Boards and all partner agencies are aspirational for children and young people in the city but also acknowledge the impact of this level of need on service provision and commissioning requirements.

4.82 Safeguarding Activity

- 4.83 The number of children subject to Child Protection Plans has increased steadily over the last five years, peaking at nearly 500 in August 2009 and remaining above 400 in the last year, although showing a downward trend.



Numbers of Children Subject to Child protection Plans 2010 / 11

April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March
466	470	477	460	464	439	426	443	468	424	419	439

4.84 **Category**

4.85 Neglect remains the biggest category of registration for children subject to Child Protection Plans which has been consistent for a number of years. This is linked to the large numbers of under 5s who are subject to plans where there are adult issues relating to substance misuse, mental health and learning difficulties. The consistently low numbers of children subject to a plan in relation to sexual abuse has been acknowledged locally and nationally. The NCSCB Has prioritised Neglect and Sexual Abuse within its Business Plan for 2011/12 to ensure practitioners are confident and skilled in identifying and managing these cases.

4.86 The second largest category is the combined Emotional/Physical Abuse, followed by Emotional Abuse, which is a reversal of the previous year. There is a close correlation between these categories and domestic violence, with assessment of harm and risk relating to different categories due to the individual circumstances and age of the child.

Category of abuse	31st March 2010		31st March 2011	
	Children	Percent of total	Children	Percent of total
Emotional abuse	62	13.5%	45	10.4%
Emotional/Physical abuse	81	17.7%	98	22.7%
Emotional/Sexual abuse	6	1.3%	19	4.4%
Neglect	148	32.3%	131	30.4%
Neglect/Emotional abuse	47	10.3%	30	7.0%
Neglect/Physical abuse	20	4.4%	15	3.5%
Neglect/Physical/Sexual abuse	1	0.2%		0.0%
Neglect/Sexual abuse	19	4.1%	14	3.2%
Physical injury	40	8.7%	25	5.8%
Physical/Emotional/Neglect	6	1.3%	24	5.6%
Physical/Emotional/Sexual abuse	3	0.7%	5	1.2%
Physical/Sexual abuse	10	2.2%	8	1.9%
Sexual abuse	15	3.3%	16	3.7%
Physical			1	0.2%
Total	458		431	

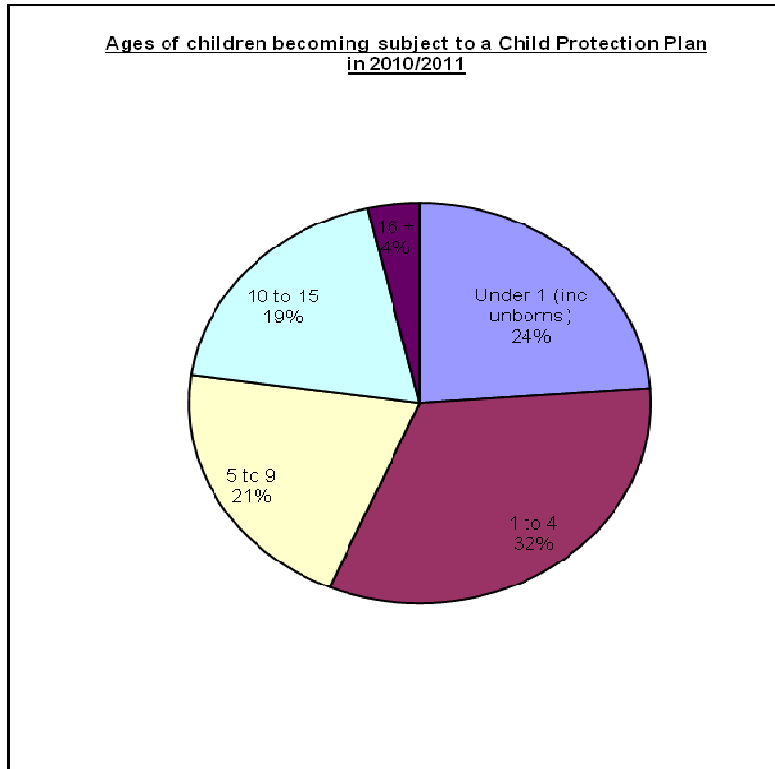
- 4.87 There has been an increase in the number of children subject to Child Protection Plans under multiple categories and it is thought this is due to the complexity of cases and inter relation of safeguarding issues (for example substance use, domestic violence and learning difficulties which may impact on the physical and emotional safety of a child, as well as give rise to concerns in relation to Neglect.)

Category	31st March 2010		31st March 2011	
	Children	Percent of children	Children	Percent of children
Multiple	193	42.1%	213	49.4%
None multiple	265	57.9%	218	50.6%

4.88 **Age**

- 4.89 The largest group of children subject to Child Protection Plans is the under 5's and this has been consistent over a number of years.

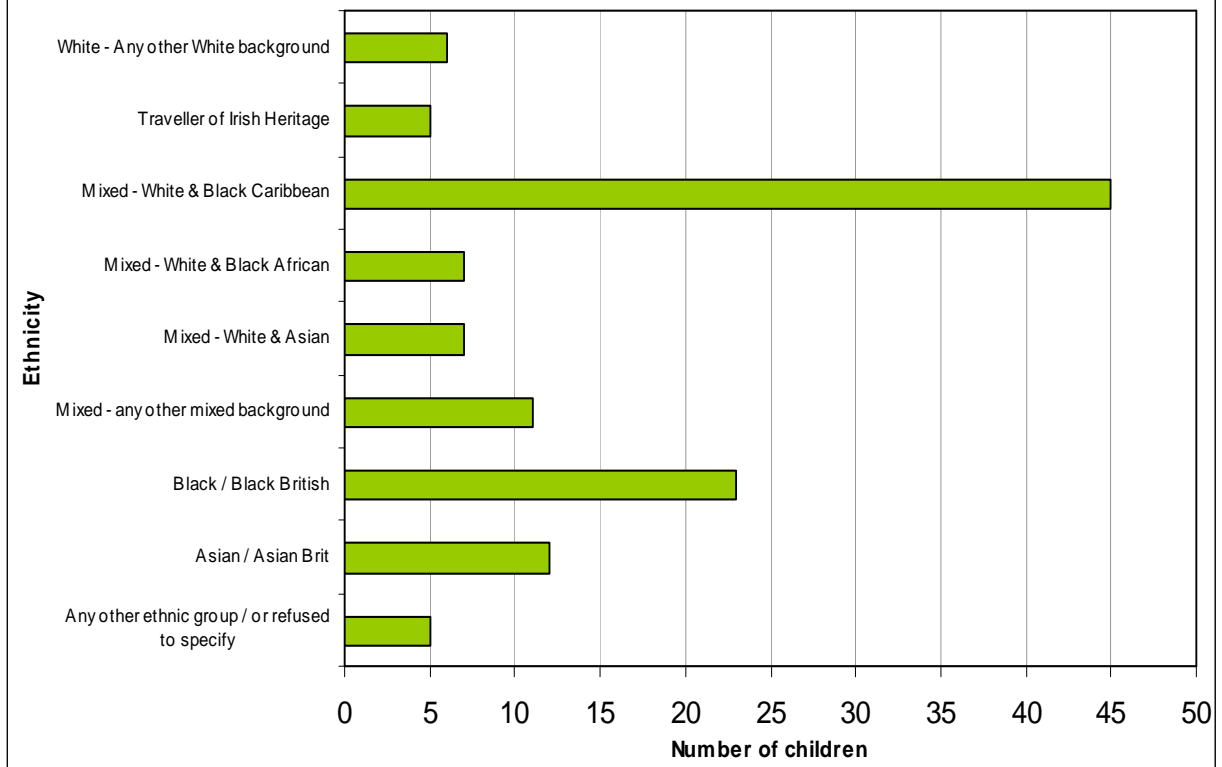
Age range	Children
Under 1 (inc unborns)	112
1 to 4	153
5 to 9	98
10 to 15	90
16 +	17
Total	470



4.90 Ethnicity of Children Subject to a Child Protection Plan on 31.03.11

Ethnicity	Children	Percent of total
Any other ethnic group / or refused to specify	5	1.2%
Asian / Asian Brit	12	2.8%
Black / Black British	23	5.3%
Mixed - any other mixed background	11	2.6%
Mixed - White & Asian	7	1.6%
Mixed - White & Black African	7	1.6%
Mixed - White & Black Caribbean	45	10.4%
Traveller of Irish Heritage	5	1.2%
White - Any other White background	6	1.4%
White British	310	71.9%

Ethnicity of none White British children that have a Child Protection Plan on 31st March 2011



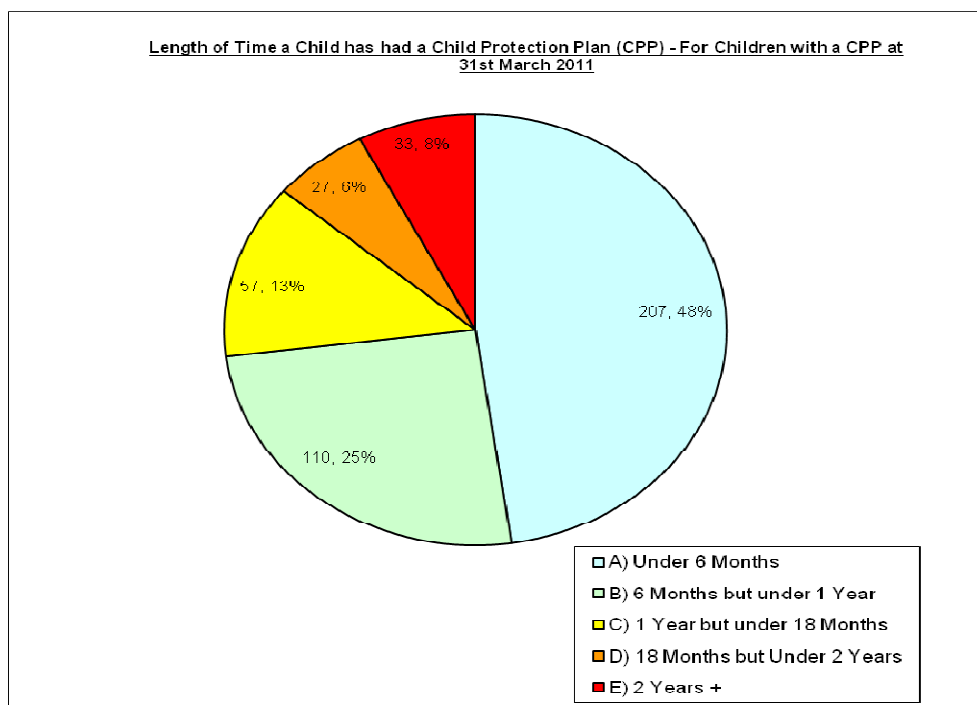
4.91 The percentage of children subject to a Child Protection Plan who are White British has increased by 5% to 71.9%.

4.92 Children who are of Mixed White / Black Caribbean or White / Black African descent and are subject to a Child Protection Plan has decreased from 18.9% last year to 12% but the percentage of mixed White / Black Caribbean is still high at 10.4%.

4.93 Length of Plans

4.94 The pie chart below details the length of time children are subject to Child Protection Plans. This shows that a large majority of Child Protection Plans, 73% (compared to 66% on 31.03.10) last up to a year and 12% (a reduction of 4% from the same period last year) last for longer than 2 years.

4.95 The reduction in the number of plans lasting for longer than 2 years is due to the strong performance management strategies that have been put in place in relation to this indicator, including the discussion of exit strategies at 12 months duration and the trigger at 15 months to Legal Planning Meeting to consider the threshold for Care Proceedings.



4.96 Between 1.04.10 and 31.03.11, 507 children were subject to an Initial Child Protection Conference (ICPC) which is an increase of 8.8% on last year. There were 17% more ICPC's (from 239 to 280) and 1 more Child Protection Review held (666 to 667). Throughout the year, there were 1538 Children in Care Reviews, with 195 children having their first review and 63 Foster Care Reviews for 68 Foster Carers.

National Safeguarding Indicators

31.03.10 – 01.04.11

Key Performance Indicator		Outturn 2009 / 10	Outturn 2010/11	Statistical Neighbour Data
NI 032	Repeat Incidents of Domestic Violence	22.0%	17.0%	
NI 048	Children killed or seriously injured in road accidents	-20.3% (2006 - 2008)	-15.3% (2007 - 2009)	8.6% (2007 – 09)
NI 051	Effectiveness of child and adolescent mental health (CAMHS) services	16	16	15 (2009 – 10)
NI 058	Emotional and behavioural health of looked after children	15.0	16.5	14.3 (2008 – 09)
NI 059	Initial assessments for children's social care carried out within 7 working days of referral	68.2%	55.4%	71.5% (2009 – 10)
	Initial assessments for children's social care carried out within 10 working days of referral		77.2%	76.9% (2009 – 10)
NI 060	Core assessments for children's social care carried out within 35 working days of their commencement	85.0%	79.8%	69.3% (2009 – 10)
NI 061	Timeliness of placement following decision of PFA	69.0%	93.3%	68.5% (2009 – 10)
NI 062	Placement Stability: number of placements	9.9%	10.0%	11.2% (2009 – 10)
NI 063	Placement Stability: length of placement	63.9%	62.3%	65.4% (2009 – 10)
NI 064	Child Protection Plans lasting 2 years or more	18.1%	11.7%	8.2% (2009 – 10)
NI 065	Children becoming the subject of Child Protection Plan for a second or subsequent time	17.3%	16.6%	14.1% (2009 – 10)
NI 066	Reviews to timescale	85.9%	85.0%	86.0% (2009 – 10)
NI 067	Child protection cases which were reviewed within required timescales	97.4%	97.8%	97% (2009 – 10)
NI 068	Referrals to children's social care going on to initial assessment	60.9%	78.1%	69.0% (2009 – 10)
NI 070	Hospital admissions caused by unintentional and deliberate injuries to children and young people	135.7 (Estimate)	No new figure	140 (2008 – 09)
NI147	Care leavers in suitable accommodation	91.4%	82.0%	89.9% (2009 – 10)
NI148	Care leavers in EET	72.4%	54.1%	64.3% (2009 – 10)

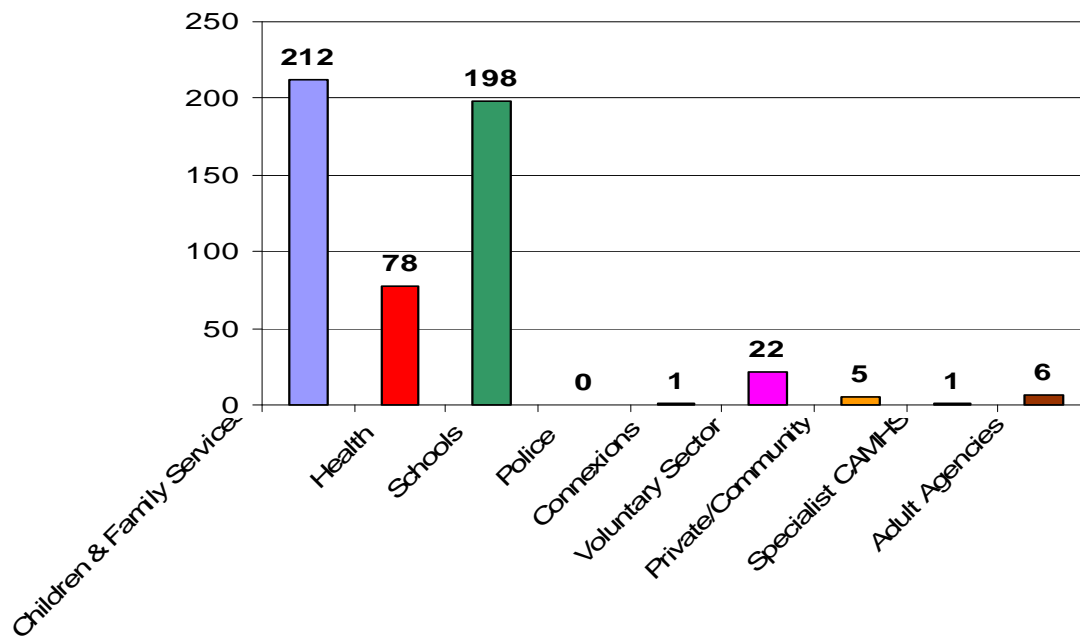
Local Safeguarding Indicators

31.03.10 – 01.04.11

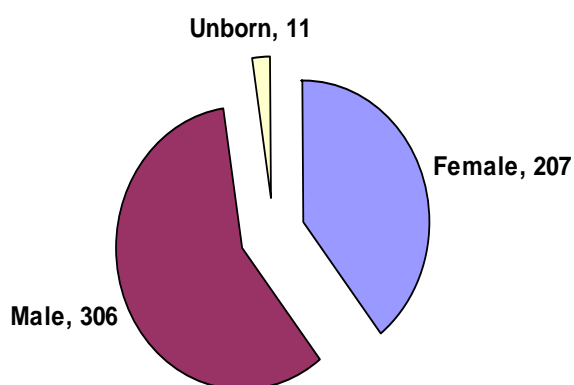
Local Indicators	Outturn 2009/10	Outturn 2010/11	Statistical Neighbours Data
	Number of Children subject to a Child Protection Plan (per 10,000)	471 84	436 78
Number of Looked After Children (per 10,000)	517 92.5	524 94	743 97
Number of Section 47 enquiries initiated (per 10,000)	782 139.9	847 151.5	850
Number of Referrals (per 10,000)	5804 1038.2	5509 985.5	-
Number of Re-referrals	1290	1624	-
Number of children subject to an Initial Child Protection Conference (per 10,000)	473 84.6	510 91.2	-
% ICPC's held within 15 days of Section 47 enquiries	82.2%	90.2%	-
Number of CP Measures commenced	433	470	-
Adoptions of Children in Care (including SGO's)	12.5%	10.4%	-
Participation at Reviews	74.3%	71.1%	-
% Children on CPP not allocated to a social worker on 31st March	0.6%	0.2%	-
Representation of BME children on CPP(at 31st March) to City BME population	7.7%	1.8%	-

Number of Common Assessment Frameworks (CAFs) Initiated: 523 (compared to 528 last year)

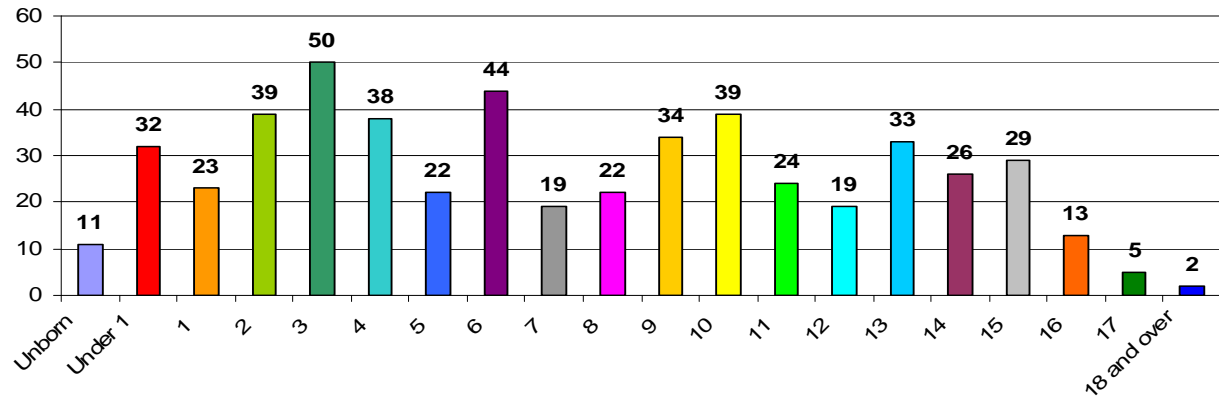
Number of CAFs initiated by agency detailed below:



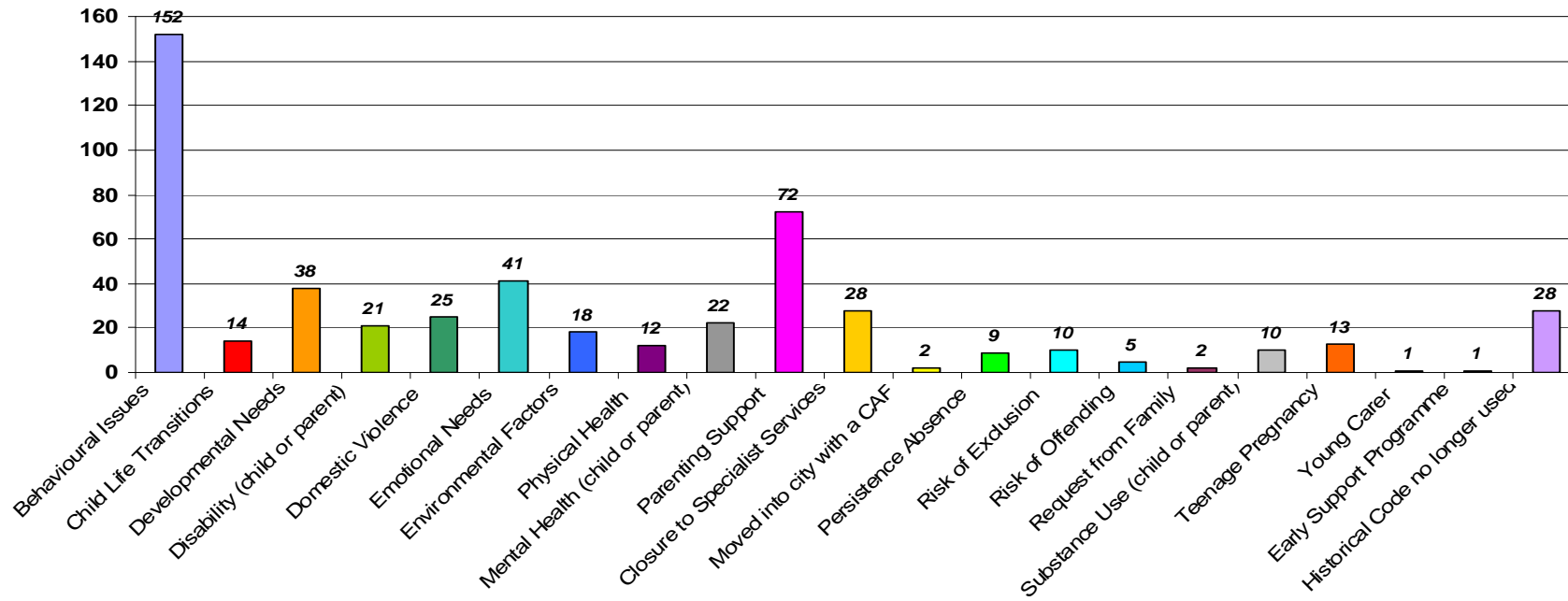
CAF's initiated by gender of child:



CAFs initiated by Age of Child:



Reasons for Initiating CAF's:



4.97 **Analysis of Data**

- 4.98 Nottingham has achieved one of the highest levels of reporting in the country in regards to domestic violence. Whilst this is a positive outcome and something that the partnership will look to maintain, it does create a problem in regards to NI 32. Essentially Nottingham's repeat rate is artificially low due to the competition between new emerging cases and revisiting existing cases at the MARAC. Therefore the repeats are below the target level but we know that the rate is low because of high demand and activity has been focused on striking a balance between seeing new cases and revisiting cases where necessary. In summary, NI 32 is not a very good measure of positive outcomes for survivors of Domestic Violence.
- 4.99 The performance indicator in relation to the timeliness of completion of Initial Assessments has changed from 7 days to 10 days. Good performance in this area is closely linked to maintaining adequate numbers of experienced staff within Children's Social Care. This is a pressure in the demanding environment of duty and is under continuous review. In addition, high numbers of contact and referrals also results in dips in timeliness. There has been a high demand on this service in the last 12 months and initial assessments completed have risen by 37%. Performance in relation to the completion of Core Assessments in timescales has the improved and is in line with statistical neighbours. **Areas for Focus:** Team managers and Service Managers are using weekly performance reports to manage timeliness of assessments. The development of Family and Community team locality points, the implementation of the Family Support Strategy and greater use of the CAF should reduce the demand within the safeguarding service by providing support to families at an earlier stage. **Overview of performance:** Performance has been managed to meet the targets set whilst meeting additional demand.
- 4.100 Nottingham continues to have higher numbers of children who are the subject of Child Protection Plans compared with our statistical neighbours but the direction of travel is encouraging. There has been a significant reduction in the number of Child Protection Plans lasting 2 years or more but improved performance management processes are planned to ensure the sustainability of this improvement over time. **Area of focus:** Work with Social Care staff to embed the use of chronologies, develop more robust plans and ensure there are clear contingency arrangements is underway. The establishment of the Children in Care Teams will assist with driving improved performance in respect of child protection work. The de-escalation panel has been addressing individual cases where Child Protection Plans have lasted longer than 18 months and earlier Review Conferences are arranged to review if the plan is still required. Action learning sets following the de-escalation panel are to address themes with a view to adopting more robust planning to reduce risk - the overall aim is to reduce the numbers of children subject to plans. **Overview of performance:** Performance has significantly improved reducing from a year end figure of 18.1% in 09/10 to a provisional year end performance of 11.7% this year. The target has been slightly exceeded.

- 4.101 High numbers of children requiring a Child protection Plan for a second or subsequent time demonstrates that the professional networks being put in place after the Child Protection Plan has ended are not sufficiently robust to manage the case within a Children in Need framework. **Areas for Focus:** A specific Action Learning Set has been set up for the IROs to look at the quality of planning, ensuring the sustainability of plans and establishing robust links with Family Support Services preventing cases escalating back through child protection processes. **Overview of performance:** Due to two poor months of performance in February / March 2011 the year end target has not been met. Performance has only slightly decreased since the outturn for 09-10 but clearly improvements are required.
- 4.102 If children's plans are not reviewed within timescale, the potential for drift is increased and the Child Protection Plan is potentially undermined. Reviewing children's plans in a timely manner is critical to ensuring that their safeguarding needs are being addressed and scrutinised. **Areas for Focus:** Analysis has taken place in relation to those cases that have been reviewed out of timescale and actions put in place to mitigate from this being repeated in the future. The Head of Safeguarding is to meet individually with IROs when reviews occur out of timescale and individual performance targets will be established in all of the IROs appraisals. **Overview of performance:** Performance has shown a downturn over the past year. This reduction in performance relates to 7 reviews {15} children being held out of timescale out of the 667 CP Reviews that took place in 2010/11.
- 4.103 Performance in relation to the number of referrals to Children's Social Care going on to assessment is above the target figure and that of statistical neighbours. This is either indicative of social care assessing more families than it should or that the needs of those being referred are high. The Ofsted Safeguarding Inspection reviewed a large number of cases in duty and generally found that the correct families were being assessed but also identified the need to embed the Family Support Strategy and Pathway to ensure families are supported at an earlier stage. In addition, the numbers of Section 47 Enquiries has increased and continues to be high. Family Support Workers are being transferred from safeguarding to support services, to ensure that children do not need to access the safeguarding service to receive help. Further work is also underway with the Screening Team to work in partnership with Family and Community Teams to address the levels of continued high demand. **Areas for Focus:** A number of de-escalation panels and multiagency forums are operating to ensure that children receive an appropriate service and that all teams work in partnership to manage and respond to the support and safeguarding needs of our communities. The first tranche of this work is being formalised in an action learning set to drive good practice across the service.
- 4.104 Risks remain in relation to agencies not fully embedding the Common Assessment Framework (CAF) within their processes and replacing existing assessment and recording processes. A Performance Monitoring Framework has been established but requires implementation across all agencies. **Areas for Focus:** Quality remains a priority, including: CAFs being completed;

improving the experience and participation of families and promotion of quality assurance tools. Vulnerable groups have been identified and agreed by the Children's Partnership Board and work has been undertaken with the commissioning teams to ensure CAF is included in all Service Level Agreements and contracts with guidance. **Overview of performance:** 152 CAF were initiated in Q4, an increase of 30 on Q3 but not enough to match or improve on last year's outturn figure. There were 326 closures in 2010/11 with 15% closed as part of the data cleansing activity, 51% due to positive outcomes needs met / reduced to single agency support or supported transitions out of the city and 19% transferred into statutory or specialist services (17% to Social care.).

5. **The NCSCB Commentary on the Assessment of the effectiveness of safeguarding arrangements in Nottingham.**

As a result of the Ofsted Inspection of Safeguarding and Looked After Services, the annual partner agency Safeguarding Reports (including Section 11 self assessments), the Performance Data for 2010/11 and the work undertaken by the NCSCB in relation to coordination and quality assurance of safeguarding work across Nottingham, the NCSCB is in a strong position to assess the effectiveness of safeguarding arrangements for 201/11.

The Ofsted Report states “The overall effectiveness of the council and its partners in safeguarding and promoting the welfare of children in Nottingham is good. Statutory requirements in respect of safeguarding are met and the partnership is able to demonstrate continuous improvement in service provision as the result of audits, inspections and user feedback. Quality assurance processes are effective and being used systematically to strengthen joint services. Leadership across the partnership to safeguard children and young people is good. Strategic plans are in place which explicitly highlights safeguarding as a top priority, suitably underpinned by joint resources.”

During the process of preparation of the Annual Report, Ofsted undertook their Annual unannounced inspection of contact, referral and assessment arrangements within Nottingham City Council children’s services on 16th and 17th August 2011. Whilst this falls outside the remit of the annual report, the NCSCB is assured that no areas for priority action were found; a strength in relation multi disciplinary working with children with disabilities was recorded and there are many areas where practice meets requirements. Specifically, the recommendations from the safeguarding and looked after children inspection 2010 were noted to have been delivered or are on track to be completed within timescale’.

Partner agency compliance with the expectations of Section 11 of the Children Act 2004 and the Annual Safeguarding Reports show robust mechanisms for managing safeguarding both within and across agencies. Further developments in relation to evaluation of the impact of interventions on children and young people and meeting the challenges of projected budget cuts and service reviews are required to maintain and develop this further.

The Child Death Review processes highlights area’s of good practice in relation to the multi agency response to child deaths as well as the collation of learning to develop services for children and families, particularly in relation to public health messages.

Serious Case Reviews, Alternative Reviews and Reflective Learning Sessions commissioned by the NCSCB highlight practice developments required, mainly in relation to domestic violence; sexual and emotional abuse; the for management oversight and supervision and ensuring policy and procedures are followed. The challenge for the NCSCB is to ensure learning from these processes is used to develop practice and improve outcomes for children and young people.

The NCSCB Multi Agency Audit process is gathering emerging themes and evidence of good practice in information sharing; multi agency work; and adherence to child protection policy, procedures and timescales. Developments in the consistency of assessments; use of chronologies and other safeguarding tools and recording across agency records are also needed.

Having considered all the information gathered, the NCSCB believes that Nottingham City has good safeguarding services for children and families and as a result of strong leadership; robust partnership and planning arrangements and the commitment of all agencies, there is the capacity to further improve these. The implementation of Eileen Munro's Review will support the development of "A Child Centred System" nationally and the NCSCB is responding by prioritising the development of early help for children and families; embracing the need to ensure a learning system is embedded within safeguarding practice and considering the most appropriate ways to measure performance and impact.

In addition, the Quality Assurance Strategy for Social Care focuses on the key requirements placed upon both operational staff within Social Care and the Safeguarding Service to satisfy themselves that service delivery is of an acceptable standard. It contains a full programme of audits throughout the year with priorities detailed in relation to children who have been re subjected to a Child protection Plan and those re referred to social care; children accommodated for more than 12 months who are not the subject of legal proceedings and those that remain accommodated for longer than 3 years who are not the subject of a legal order, children in need and recording practices. Case Audit Panels will be held to enable practitioners to reflect on their case and provides an opportunity for an interactive process for audit and service development. This process will be managed through the Safeguarding Directorate heads of Service and the Children and Families Leadership Team with an expectation that feedback will be provided to staff leading to the development of Team Action Plans. Findings from the audits will also be included within the Children and Families Annual Safeguarding Report to the NCSCB.

For 2011 / 12 onwards there remain ongoing developments and challenges for the NCSCB and partner agencies as identified below.

- The expectation of a revised Working Together 2010 and the potential impact of this on the work of the NCSCB, particularly in relation to Serious Case Reviews and quality assurance processes. Alongside this are the implementation of the IRO Handbook and the development of services for Looked After Children.
- The full implementation of the NCSCB Business Plan, the Munro Review and the Action Plans relating to the Ofsted Unannounced Inspection, along with the Family Support Strategy / Pathway

- The current political and financial context and the impact of this on public sector services, commissioning and service reviews.

In the light of the above challenges, the NCSCB has developed a focused Business Plan for 2011 – 14 alongside the Nottingham Children and Young People's Plan for the same period. The following work has been prioritised for 2011/12:

- Develop joint working with Adults Safeguarding Protection Board (ASPB) and NCSCB
- Ensure Sexual Abuse is effectively managed by partner agencies,
- Domestic Violence
- Ensure all planning and commissioning of services for children and young people in the area takes into account the need to safeguard and promote the welfare of children and young people
- Embed service user perspective in the work of the NCSCB
- To monitor the development of early help for children and families and quality assure the effectiveness of this.
- To develop a learning system within the NCSCB and across partner agencies

NOTTINGHAM CITY SAFEGUARDING CHILDREN BOARD

Membership Details

Agency	Role	Name
Independent Chair		Margaret McGlade
Nottingham City Council	Lead Member	Cllr David Mellen
Children's Services	Corporate Director	Ian Curryer
Children's Services	Director of Safeguarding	Satinder Gautam
Children's Services	Director Family Community Teams	Mark Andrews
Schools - Primary	Headteacher	Sue Hoyland
Schools – Special	Headteacher	Tracey Ydlibi
Schools - Secondary	Head Teacher	Carol Fearria
CitiHealth NHS Nottingham	Interim Chief Operating Officer	Lyn Bacon
NHS Nottingham (Commissioning)	Board Nurse	Dee Sissons
Nottingham University Hospitals Trust (NUHT)	Medical Director	Dr Stephen Fowlie
Nottinghamshire Health Care Trust (NHCT)	Medical Director	Dr Peter Miller
NHS Treatment Centre	Lead Doctor and Clinical Chairman	Dr Roddy Nash
East Midlands Ambulance Service		Wendy Hazard
Nottinghamshire Police	Head Of Public Protection	Adrian Pearson
Nottinghamshire Police	Divisional Officer	Simon Alexander
Nottinghamshire Probation Service	Deputy Chief Executive	Sheila Wright
Connexions	Operations Director	Tony Graham
CAFCASS	Regional Manager	Neville Hall
Adult Safeguarding Board	Adult Safeguarding Development	Julie Sanderson

	Manager	
Adult Directorate	Director, Adults Community Inclusion	Helen Jones
Crime and Drugs Partnerships	Director, Nottingham Crime and Drugs Partnership	Peter Moyes
NSPCC	Service Manager	Liz Tinsley
Voluntary Sector	Chief Executive	Janet Lewis
Nottingham City Homes	Policy and Partnership Officer	Stuart Smith
Nottinghamshire Fire and Rescue	Head of Community Safety	Mary McEvoy
Head of Safeguarding and Quality Assurance		Dorne Collinson
Designated Doctor for Safeguarding	Consultant Community Paediatrician	Dr Lizzy Didcock
Designated Nurse for Safeguarding	Consultant Nurse	June Dickens
Nominated Solicitor		Claire Knowles
NCSCB	Board Manager	Janet Castillo
NCSCB	Administrator	Maureen Elliott
GOEM	Regional Advisor	Kay Childs
SHA Authority	Workstream Lead for Children	Jane Appleby