#### CHILDREN, YOUNG PEOPLE AND FAMILIES PARTNERSHIP

Venue: Town Hall, Date: Wednesday, 18th September,

**Moorgate Street**,

Rotherham. S60 2TH

Time: 3.00 p.m.

2013

#### AGENDA

1. Apologies for Absence.

#### For Decision:-

- 2. Minutes of the Previous Meeting (herewith) (Pages 1 - 6)
- 3. Matters Arising.
- 4. Issues and Concerns (Pages 7 - 9)
  - LAC Council
  - Youth Cabinet

#### For Discussion:-

- 5. Implications of New Multi-Agency Framework
  - Presentation by Sue Wilson, Performance and Quality Manager
- Annual Local Safeguarding Children's Board Report and Business Plan (Pages 6. 10 - 51)
- 7. YH HWB Improving Health Outcomes for Children (Pages 52 - 55)
- 8. Any Other Business.
- 9. Date and Time of Future Meetings
  - 20<sup>th</sup> November, 2013
  - 22<sup>nd</sup> January, 2014 19<sup>th</sup> March

  - 21<sup>st</sup> May
  - 16<sup>th</sup> July

All meetings will be held at 2.00 p.m. in the Rotherham Town Hall

# CHILDREN, YOUNG PEOPLE AND FAMILIES PARTNERSHIP Wednesday, 17th July, 2013

Present:- Joyce Thacker (in the Chair); Tracy Blakemore, Clair Pyper, Karen Etheridge, Sara Graham, Jason Harwin, Alan Hazell, Shona McFarlane, Rachel Nicholls, Dr. John Radford, Janet Wheatley, Sarah Whittle, Sue Wilson and Chrissy Wright.

Apologies for absence were received from Councillor Lakin, Martin Kimber, David Polkinghorn, Susan Skalycz, Dorothy Smith and Karen Smith.

Councillor Pickering was also in attendance at the invitation of the Chair.

#### 220. MINUTES OF THE PREVIOUS MEETING HELD ON 22ND MAY, 2013

The minutes of the meeting held on 22<sup>nd</sup> May, 2013, were considered and approved as a correct record.

Further to Minute No. 208 (Sexual Exploitation), it was reported that Barnardos will soon be part of the multi-agency team.

Further to Minute No. 209 (Eleven Million Take Over Day), Jason Harwin reported that he had attended the last Youth Cabinet meeting. There was a joint project with the Police around safety issues at the Transport Interchange.

Further to Minute No. 212 ('Once upon a School' Project), work was ongoing in trying to find town centre premises for the Project.

Further to Minute No. 216 (Disabled Children's Charter), the Parent and Carers Forum had its own Charter which was recommended as national good practice. It was felt not to be necessary to sign another Charter at this stage.

#### 221. ISSUES AND CONCERNS

#### Looked after Children's Council

- They had conducted a survey, to which 40 responses had been received, as to what the children thought was good about being in care, what was not so good and any other comments. The 40 had said they loved being in care
- Launch of DVD on 24<sup>th</sup> July produced by 1 of the care leavers

#### **Youth Cabinet**

 Had received an update on the Anti-Bullying Scrutiny Review at its last meeting. The recommendations would go to school leaders etc. and feed back to the Youth Cabinet

- Discussed the Eleven Million Take Over Day. Some young people had visited the Transport Interchange and met with staff to look behind the scenes. They felt it had made a difference in terms of their relationship with the Interchange and the Police
- An invitation had been extended to take part in the Police and Crime Commissioner's Planning Event in August. Unfortunately it was the same day as GCSEs results were issued but hopefully some would be able to attend
- Invitation to the official opening of Eric Manns Building on 24<sup>th</sup> July where the Integrated Youth Service were based
- Attendance at a regional transport summit in Sheffield

Resolved:- That an invitation to the launch of the Integrated Youth Service be extended to the Partnership.

#### **Parent and Carers Forum**

- Sitwell Infant School was the first school to be awarded the Gold Standard for the Charter
- The Chair of the Forum had been personally invited and attended a seminar held in London to represent the region

#### 222. ANNUAL LCSB REPORT AND BUSINESS PLAN

Alan Hazell, Independent Safeguarding Board Chairman, presented the draft Rotherham Local Safeguarding Children Board's annual report 2012-13. He asked for any comments to be submitted to him by the end of July so that it could be published by 1<sup>st</sup> September, 2013.

The report contained sections relating to:-

- Rotherham Children and Young People in context
- Governance and Partnership arrangements
- Progress on Board priority areas and the Business Plan
- Performance and Quality Assurance Sub-Group
- Serious Case Review Sub-Group
- Child Death Overview Panel
- Policy and Procedures Sub-Group
- Exploitation Sub-Group
- Learning and Development Sub-Group
- Lav Members' Report
- Rotherham's Challenges and Priorities for 2013-16

Discussion ensued the report with the following issues particularly highlighted:-

#### CHILDREN, YOUNG PEOPLE AND FAMILIES PARTNERSHIP - 17/07/13

- Multi-agency audit of Serious Neglect Cases
- Section 11 Assessment and Assurance
- Serious Case Reviews
- Home Affairs Select Committee recommendations
- New Inspection regime

Resolved:- That any comments be conveyed to Alan Hazell by the end of July, 2013, for inclusion in the final document.

# 223. MEMORANDUM OF UNDERSTANDING BETWEEN LSCB, HEALTH AND WELLBEING BOARD AND CYP&F PARTNERSHIP)

Joyce Thacker presented a draft protocol between the Local Safeguarding Children Board and the Health and Wellbeing Board, including the Partnership, outlining and confirming the functions and responsibilities of Rotherham's key children's strategic partnership, planning/commissioning forms and the relationships between them.

Discussion ensued on the draft protocol with the following issues raised:-

- Although it clarified the relationship between the Safeguarding Board and the Partnership there was confusion with the Health and Wellbeing Board
- Need to explicitly state where the highest levels of priority were and where they belonged
- Governance and the Health and Wellbeing Board's Terms of Reference
- What it meant for people on the ground
- Clarity on accountability
- No Police representation on the Health and Wellbeing Board
- Health and Wellbeing Board was responsible for the Health and Wellbeing Strategy not operational delivery

Resolved:- That a further report be submitted to the September meeting.

# 224. COMMISSIONING/DELIVERY OF EMERGENCY HORMONAL CONTRACEPTION TO YOUNG GIRLS AGED 14-16 YEARS

Dr. John Radford presented a report on the above provision.

The current Public Health Service's contract in relation to Emergency Hormonal Contraception (EHC) with Pharmacists operating in Rotherham specified that they provide the service free of charge to females over the age of 16 years. This was an alternative choice of provision to that offered by GPs etc.

Females under the age of 16 years were not able to obtain EHC at pharmacies under the contract at present due to the lack of a robust care pathway in relation to safeguarding issues. This meant that a vulnerable group of young people were denied a valuable service choice based in the community. However, it was acknowledged that by extending the service to the younger age group, the service providers needed to be especially vigilant in relation to any safeguarding issues which may arise.

It was proposed in the report that the contract be renegotiated to allow for an extended service to females over the age of 14 years and that a care pathway be introduced for females between 14 and 16 years of age to address any safeguarding issues which may arise.

Discussion ensued on the proposal with the following issues raised:-

- Should not assume that any child under the age of 13 years having/had sexual intercourse was being sexually exploited – Safeguarding Team should be involved initially
- If children thought they were going to be referred through to Social Services would it deter them from seeking contraception? Increase in teenage pregnancies?
- The referral would be to the Integrated Youth Support Service which had a nurse working in partnership with Youth Workers who would make an assessment as to whether it was a child abuse issue
- Needs careful contract monitoring to ascertain what issues were emerging and appropriate support available
- What was happening elsewhere in the country?
- More work to be done looking at the pathways and support/referral mechanisms

Resolved:- (1) That the report be received and welcomed.

(2) That further work take place on the pathways and support and taking into consideration what was taking place in other areas of the country and a further report brought back in November.

#### 225. CHILDREN AND YOUNG PEOPLE'S SERVICES ACTION PLAN

In accordance with Minute No. 211, Sue Wilson (Performance and Quality manager) and Tracy Blakemore (Corporate Improvement Officer), presented the latest version of the Action Plan which incorporated comments received since the last meeting.

It was noted that the final version of the Plan would include a "monitoring" column to enable to see if the actions had been achieved.

Comment was made that under Priority 2 "we will engage with parents and families), there should be reference to the Health and Wellbeing Board and what its role was.

Resolved:- (1) That, subject to the comments above, the action plan be approved.

(2) That the action plan be updated twice a year, the first update being submitted to the November meeting of the Partnership.

#### 226. ANY OTHER BUSINESS

#### A. Child Sexual Exploitation

**Governance** – The Safeguarding Board had discussed sub-structures. There were already Gold and Silver and it had now been agreed that the Gold Group be sub-group for CSE for the Safeguarding Board but there would still be that tactical group underneath it. The support at sub-group level was very good and challenging and had wide/appropriate representation able to respond to what was happening locally and nationally.

There were still some issues around performance management – the "so what" question.

**Ongoing Investigations** – There were 34 ongoing investigations ultimately relating to a small number of individuals. There were currently 8 people on bail from Court for over 40 offences. At the tactical group information was shared with regard to the location of individuals paying attention to the requirement for confidentiality.

**Home Affairs Select Committee Report** – The report had been considered as a Partnership and commissioning action plan. The action plan for CSE was a living document and would change. Work was being undertaken around training/induction of staff.

**Away Day** – Discussion had taken place with regard to E-learning which was being developed and looked to be Gold Standard. Officers were currently exploring the e-learning package. It had been a recommendation of the Home Affairs Select Commission that all Council and health frontline staff should be trained.

#### B. CAMHS

The organisation was changing its method of working and improving their service. A meeting with the CCG had been held and agreed to share the Improvement Plan. The Council was now involved and a joint improvement plan would be produced around the issues that come forward.

#### C. Self-Harm and Suicide

Officers had been involved in looking at the above in a school setting and a template produced for a community action plan which could be used by other school/areas if something similar occured. A 'lessons learned' review would be undertaken by an independent author.

# D. Welfare Reform (and the impact on children and families) Resolved:- That this issue be included on the November Partnership meeting agenda.

#### E. Crime Figures

There had been an 11% increase in demand for Police in Rotherham. Some of the calls were linked to domestic violence, people in crisis but there was a need to understand it. Was it linked to Welfare Reform or other issues?

#### F. Fostering Inspection

The inspection took place at the beginning of July and lasted 4 days. The outcome was expected very shortly.

#### G. Section 11

The Consortium had held a couple of workshops organised to support Members. There was a safeguarding toolkit which was a condition of membership for the Consortium.

**H. Terminology** – Use "learning providers" rather than "schools" " in the CYPP action plan.

#### I. Service Transformation Work

The transformation work would have implications for services going forward. The whole of the public service had massive budget restrictions and a number of officers were engaged in looking at service transformation.

Feedback on the consultation carried out with user groups was due back shortly. There would be a second phase of consultation with focus groups looking at a variety of services.

Initial proposals had to be ready by 23<sup>rd</sup> August and would then go through the Council's decision making process.

#### 227. DATE AND TIME OF NEXT MEETING.

Resolved:- That a further meeting be held on Wednesday, 18<sup>th</sup> September, 2013, commencing at 2.00 p.m.

#### ROTHERHAM BOROUGH COUNCIL - REPORT TO MEMBERS

1.	Meeting:	Children, Young People & Families Partnership
2.	Date:	30th August 2013
3.	Title:	Looked After Children's Council (LACC) Update
4.	Programme Area:	IYSS - Youth Service

## **Summary:**

The Looked After Children's Council (LACC) are currently meeting for Voice & Influence training and development sessions every fortnight at the MyPlace Building Rotherham. However, more commonly the LACC are meeting weekly holding additional meetings on weekends and evenings to prepare presentations, and complete high profile project work. This month the LAC Council have welcomed an additional member of the staff team Janet Stanley to support the delivery of the group alongside Susan McBride and Lisa Du-Valle. Up to 20 young people may attend LACC sessions at any one time.

Over the past three months the LACC have been meeting weekly and engaged in a rich variety of Voice & Influence Sessions, these have included 'Chill & Chat' days held over the Summer Holidays, Life Story Work, Arts & Crafts, team building exercises, worked on self awareness and self-esteem, represented looked after and leaving care young people at the Rotherham Youth Cabinet, were supported in positively engaging with Ofsted inspectors, engaged in the interviewing process, lead on young people's peer consultations around re-commissioning of leaving care, and engaged in South Yorkshire Police and Crime Commissioner Youth Planning day.

Dream Big DVD Launch – The LAC Council supported Aaron Wildman in meeting and greeting his guests at the launch of his 'Dream Big' DVD at Myplace on 24<sup>th</sup> July. The LACC enjoyed the opportunity to share the evening with Aaron and talk about their aspirations from a LAC perspective with guests such as Rotherham's Lord Mayor, Cllrs Paul Lakin and Roger Stone and SY Police Supt Jason Harwin, and of course their very dear friend Joyce Thacker. A wonderful evening was had by all.

Articulation Residential – At the beginning of the Summer Holidays members of the LAC Council went on a 3 day residential staying at Manchester University Campus in Crewe. The theme of the residential was 'Campaign! don't Complain', and young people actively engaged in a variety of activities across the 3 days including, Lyric & rap, African Drumming, Visual Arts, Street Dance, Singing and Drama Sessions. The residential culminated in everyone taking part in putting on a show in the Axis Theatre, expressing through the medium of drama, music and dance issues they would like to raise and campaign about. This residential was a fantastic opportunity for young people to meet other looked after and leaving care young people from across Britain and share experiences. In addition, staying

in the University campus rooms helped to raise awareness and potential aspirations for some Rotherham looked after young people who were surprised at how informal and welcoming the University surroundings were.

**Summer Holidays – Chill & Chat Days** – The LAC Council chose to hold three 'Chill & Chat' days over the Summer Holidays, where they engaged in social and team building activities including console games, singing, arts & crafts activities, nail art, banner & bunting making and future planning for the LAC Council.

**Councillor Pickering Visits the LACC** – The LACC invited Cllr Dave Pickering and his wife to the LAC Council on 26<sup>th</sup> June to present Cllr Pickering with a framed copy of the poem 'Goodbye Mr Mayor' which they had penned for his leaving ceremony. Cllr Pickering said he was moved by the poem which meant a lot to him.

Leaving Care Re-commissioning – The LAC Council formed a sub-group of leaving care young people who received basic peer consultation training and were supported in the design, development, delivery and analysis of feedback from Rotherham young people. This group held workshops and 1to1 peer consultations with leaving care young people by visiting residential accommodation across the borough, semi-independent accommodation and Connexions Employment open day at RCAT. Feedback from this consultation has gone to inform the commissioning of future leaving care services.

Consultation Projects. In addition to the leaving care re-commissioning, The LAC Council has been called upon to give their voices to a number of consultations over the past 3 months this has included the Health and Well Being consultation around the young person's pledge card and the South Yorkshire Police and Crime Commissioner Survey which was followed by a regional Youth Planning Day to feed ideas around perceptions of safety to our Commissioner Shaun Wright, alongside young people from Sheffield, Barnsley and Doncaster at the Lifewise Centre in Hellaby.

Interviewing C&YPS Staff – Members of the LAC Council engaged in the interview process by taking part in the interview panel alongside RMBC staff for the new Service Manager, Family Placement & Residential Services. Although this was a little nerve racking, the young people held their own asking important and somewhat challenging questions on behalf of looked after children. Their feedback and marking for the candidate mirrored that of RMBC panel members although looked after young people had the extra quality of observing that;-

'He looks nice and cuddly.... I think that is important in a worker!'

# **Future Projects**

**International LACC Visit** – The LACC received confirmation from Joyce that funding has been made available to embark on an International Visit. This news was met with great excitement squeals and a few tears. The LACC have

begun their project to research potential destinations, accommodation, places of interest and are also exploring avenues of additional fund raising to support the visit. This will be an ongoing project. Currently the group hope to be visiting Spain in the Easter holidays 2014.

Rotherham Show 2013 – Looked After and Leaving Care young people will be working alongside the Rotherham Youth Cabinet and UK Youth Parliament at the Voice & Influence mobile bus at the up and coming Rotherham Show in September. The group have made banners and bunting to decorate their spot and draw in other young people over the weekend.

**LACC Staffing** – The LAC Council have recently welcomed an additional member of the staff team to support the delivery of the LACC, namely Janet Stanley from IYSS. Due to increased attendance at the group by young people with multiple and complex needs, we urgently required additional dedicated staffing to support the LAC Council and cover annual leave and sickness periods. Janet will join Susan McBride and Lisa Du-Valle.

Contact Name: Lisa Du-Valle

Voice & Influence Team

Looked After Children's Council Integrated Youth Support Service Tel:- 07748143388 or (01709) 760817 Email:- Lisa.duvalle@rotherham.gov.uk

# ROTHERHAM BOROUGH COUNCIL – REPORT TO CHILDREN, YOUNG PEOPLE AND FAMILIES PARTNERSHIP

1.	Meeting:	Children, Young People and Families Partnership
2.	Date:	18th September, 2013
3.	Title:	Rotherham Local Safeguarding Children Board Annual Report 2012-13
4.	Directorate:	Rotherham Local Safeguarding Children Board

## 5. Summary

Since April 2010, Local Safeguarding Children Boards (LSCBs) have been required to publish an annual report on the effectiveness of safeguarding children in the local area. This report introduces the 2012-13 Rotherham LSCB Annual Report and offers background information to it.

#### 6. Recommendations

• That the Children, Young People and Families Partnership receive this report as an introduction to the 2012-13 Rotherham LSCB Annual Report (separate report).

#### 7. Proposals and Details

The requirement for LSCBs to produce and publish and annual report on the effectiveness of safeguarding children in the local area is mandated in the Children Act 2004 (S14a) as amended by the Apprenticeships, Skills, Children and Learning Act 2009.

Under the recently revised statutory guidance, Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children (HM Government March 2013), the annual report should:

- provide a rigorous and transparent assessment of the performance and effectiveness of local services. It should identify areas of weakness, the causes of those weaknesses and the action being taken to address them as well as other proposals for action. The report should include lessons from reviews undertaken within the reporting period
- 2. be published in relation to the preceding financial year and should fit with local agencies' planning, commissioning and budget cycles. The report should be submitted to the Chief Executive, Leader of the Council, the local police and crime commissioner and the Chair of the health and wellbeing board.
- 3. list the contributions made to the LSCB by partner agencies and details of what the LSCB has spent, including on Child Death Reviews, Serious Case Reviews and other specific expenditure such as learning events or training. All LSCB member organisations have an obligation to provide LSCBs with reliable resources (including finance) that enable the LSCB to be strong and effective. Members should share the financial responsibility for the LSCB in such a way that a disproportionate burden does not fall on a small number of partner agencies.

**Key priorities for Rotherham LSCB** - highlighted in the 2012-13 Annual Report, being progressed through 2013-16 RLSCB Business Plan and the work of its Sub Groups

#### These include:

- A multi-agency local protocol (framework) for the assessment of children
- A performance and quality framework to measure the effectiveness of Early Help Services on outcomes for children and their families
- A Learning and Improvement Framework to enable lessons learned to be translated into improved outcomes for children
- Revised protocols for effective governance and partnership arrangements within the borough (for example between the LSCB and Health and Well Being Board)
- An updated LSCB constitution and revisions to its Sub Groups so that they can deliver the work and priorities of the board
- Ensure that the Child Sexual Exploitation Service, including other partners, are responsive to the need of young people involved in or vulnerable to CSE, through the implementation of the CSE Strategy and delivery of the CSE Action Plan
- Continue to develop the importance of understanding the child's voice and journey through services, in particular the child protection process

• Ensure that children subject to Child Protection Plan receive thorough multiagency assessments of need and risk, effective care plans that address these and review them well.

#### 8. Finance

The LSCB has its own budget financed by member agencies, the key agencies for such financing being Children's Social Care Services, Children's Health Services, and the Police. A budget statement is included in the RLSCB Annual Report.

#### 9. Risks and uncertainties

The revised Ofsted framework for the inspection of services for children in need of help and protection, children looked after and care leavers is due to be implemented nationally from November 2013. Rotherham LSCB is working with partner agencies to assess and prepare the evidence of positive outcomes for children that will be required when the inspection is undertaken in Rotherham.

## 10. Policy and performance information

The LSCB Annual Report, in terms of the effectiveness of the LSCB, its partners, and outcomes for children, should inform local policy and commissioning priorities relating to safeguarding children and young people, and also informs the regulatory inspection of children's services from Ofsted and other inspectorates.

#### 11. Background Papers and Consultation

The Children's Safeguarding Performance Information Framework 2012 Apprenticeships, Skills, Children and Learning Act 2009

Working Together to Safeguard Children - A guide to inter-agency working to safeguard and promote the welfare of children: HM Government 2013

Rotherham LSCB Annual Report 2012 - 13

Rotherham LSCB Business Plan 2013-16

Proposals for the inspection of services for children in need of help and protection, children looked after and care leavers: Ofsted 2013

#### **Contact Name:**

Steve Ashley, Independent Chair of Rotherham LSCB

Phil Morris, Business Manager, Rotherham LSCB 01709 254925 phil.morris@rotherham.gov.uk



# Rotherham Local Safeguarding Children Board



**Annual Report 2012 – 2013** 

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# Page 15 1. Introduction from the Independent Chair of Rotherham's Local Safeguarding Children Board (RLSCB)

I'm pleased to introduce the Rotherham Local Safeguarding Children Board's (RLSCB) 2012-13 Annual Report and 2013-16 Business Plan. The report is intended to provide an assessment of how effective local arrangements are to safeguard and promote the welfare of children in Rotherham. It recognises the achievements and progress made in the past year, but also seeks to offer a realistic assessment of the challenges which remain and how the board will respond to these, primarily through its Business Plan.

The Business Plan which accompanies this report is a living document, and hence its content represents a "snapshot" picture of current priorities and areas of work rather than necessarily incorporating all the issues raised in this report.

In addition to its publication on the Board's website, this report and will be submitted to the Chief Executive and the Leader of Rotherham Council, the South Yorkshire Police and Crime Commissioner and the local Health and Well-Being Board.

The past year has been a particularly challenging year not least because of the media attention given to the issue of Child Sexual Exploitation which has seen its profile and public awareness increase nationally; and subsequent evidence provided to the Home Affairs Select Committee, which has now reported it findings. The enquiry into the Jimmy Savile allegations has also reminded organisations that their safeguarding children arrangements should always remain a priority and there is no room for complacency. I am pleased to say that Rotherham LSCB is and will continue to keep Child Sexual Exploitation as a high priority. To support the excellent work already undertaken in this area of protecting children the Board has introduced a revised Child Sexual Exploitation Strategy and Action Plan to support multi-agency working which is founded on the latest research and best practice from across the country.

The inspection of child protection services by Ofsted in July 2012 did raise some concerns that some children in the borough may be being seriously neglected for too long and that the multiagency response to this was not as effective as we would want. The LSCB in conjunction with its partner agencies undertook some evaluation of this area of safeguarding and reported its findings to the Rotherham Children's Improvement Panel. Ofsted have announced that from October 2013, it will be undertaking inspections of child protection and children in care at the same time.

The new statutory guidance for safeguarding and promoting the welfare of children, Working Together 2013, although shorter and more succinct, does introduce some future areas of development for the Board and its partners, including the development of a new local protocol for assessing children in need or at risk of harm, new approaches to undertaking Serious Case Reviews, and the requirement for LSCBs to monitor and evaluate the effectiveness of Early Help services for children and their families.

A revision of the Board's Constitution in the light of the new statutory guidance must now be undertaken as a matter of some urgency. This will include a review of the remit of the Board's Sub Groups – these are the "engine room" of the LSCB and it has recently become clear that these should be made more fit for purpose for current requirements.

The Board's role continues to be to ensure that, despite the challenges above and those identified within this report, services and communities can continue to work together effectively to protect and safeguard the children and young people of Rotherham. The Board will endeavour to provide regular feedback on whether this is the case and will encourage and coordinate collaborative working to improve outcomes for children and young people who must continually be at the centre of all that we do.

Alan Hazell

Independent Chair

Rotherham Local Safeguarding Children Board

# Page 17 2. Rotherham Children and Young People in Context

#### 2.1 Population

The most recent population estimate (2011) shows that there are approximately 62,400 children and young people, aged 0-19, living in Rotherham - this represents 24.2% of the borough's total population. The gender split for children and young people in Rotherham has remained constant at 51% male, and 49% female (2011).

Local birth statistics show that live births in Rotherham increased from 2,527 in 2000/01 to 3,381 in 2006/07. Births then fell and levelled off at 3,111 in 2009/10, 3,198 in 2010/11 and 3,057 in 2011 (calendar year).

### 2.2 Ethnicity

In the 2011 Census, 64% of Rotherham's Black and Minority Ethnic (BME) population was concentrated in four central wards: Boston Castle, Rotherham East, Rotherham West and Sitwell – a distribution which has changed little since 2001. In Rotherham South Area Assembly (Boston Castle, Rotherham East and Sitwell), there is a large and growing BME population, based on school pupil data (2005 compared to 2012). The link between family size and BME population is also shown in 2011 Census data, where Rotherham East and Boston Castle wards have the highest percentages of both families with three or more children and BME school pupils. Since 2004 there has been a significant increase in the arrival of EU migrants to the borough although the numbers have reduced in recent years. In the 2008/9 school year, there were 375 new arrivals of school age children from overseas, 56% (209) of whom were from Slovakia or the Czech Republic (mainly of Roma heritage). School registration data shows that 451 children arrived in 2009/10 but the numbers fell to 284 in 2010/11. Czech and Slovak children (mainly Roma) made up 68% (307) of new arrivals in 2009/10, but this fell to 49% (139) in 2010/11.

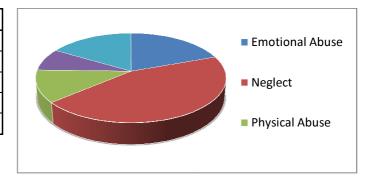
### 2.3 Areas of Deprivation

Deprivation in Rotherham is increasing according to the Indices of Deprivation produced by *Communities for Local Government*. Rotherham was ranked as the 68th most deprived district in England in the 2007 Index of Multiple Deprivation (IMD), and is now ranked 53rd in the 2010 IMD. Rotherham remains amongst the 20% most deprived districts in England. 21% of Rotherham children aged 0-15 live in areas which are within the 10% most deprived in England, and 43% of Rotherham children who live in low income households live in the 10% most deprived areas nationally (based on the *Income Deprivation Affecting Children Index (IDACI)* 2010).

# 2.4 Children on a Child Protection Plan (as at 31st March 2013)

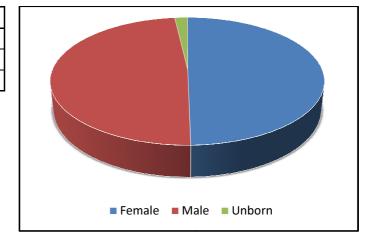
### Number of Children on a Child Protection Plan

Child Protection Category	Number	%
Emotional Abuse	65	19%
Neglect	148	44%
Physical Abuse	39	12%
Sexual Abuse	27	8%
Multiple Categories	55	16%

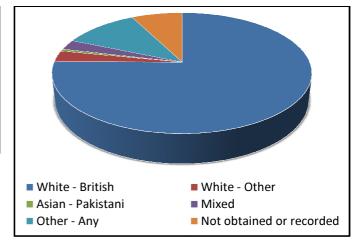


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Gender Number		%
Female	166	50%
Male	162	49%
Unborn	6	2%

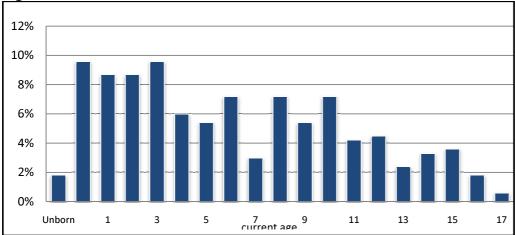


Ethnicity	Number	%
White - British	251	75%
White - Other	10	3%
Asian - Pakistani	2	1%
Mixed	9	3%
Other - Any	37	11%
Not obtained or recorded	25	7%









# 3. Governance, Partnerships and Service Arrangements

#### 3.1 Governance and Partnership Arrangements

Working Together (2013) sets out that the LSCB should work with the Local Family Justice Board (in relation to children in care proceedings) and the local Health and Well-Being Board, the latter established in Rotherham in September 2011. The Health and Well-Being Board develops the Joint Strategic Needs Assessment, from which key commissioning activity should be derived, and the LSCB within its remit should both inform and draw from this in relation to vulnerable children. The relationship between these groups requires greater clarification, and a protocol is therefore currently under discussion to formalise the governance and arrangements between the Health and Well-Being Board, the Children, Young People and Families Strategic Partnership and the LSCB.

#### 3.2 Key roles within Rotherham Local Safeguarding Children Board

There are some key roles on RLSCB some of which are set out and described in the *Working Together* (2013) guidance. These are:

#### 3.2.1 Independent Chair

It is expected that all LSCBs appoint an Independent Chair who can bring expertise and focus to ensure that the LSCB fulfils its roles effectively. Crucially, the Independent Chair provides the separation and independence required from all the agencies which provides a balance in influence and decision making. The Chair is subject to an annual appraisal, to ensure the role is undertaken competently and that the post holder retains the confidence of the RLSCB members. The Independent Chair should work closely with all LSCB partners and particularly the Director of Children's Services.

#### 3.2.2 Director of Children's Services

The Director of Children's Services (known in Rotherham as the Strategic Director of Children and Young People's Services) has the responsibility within the local authority, under section 18 of the Children Act 2004, for improving outcomes for children, local authority children's social care functions and local cooperation arrangements for children's services.

#### 3.2.3 Local Authority Chief Executive Officer

Though not a member of the Board, ultimate responsibility for the effectiveness of the RLSCB rests with the Chief Executive of Rotherham Metropolitan Borough Council who also has the responsibility to appoint or remove the LSCB Chair with the agreement of a panel including LSCB partners and Lay Members. The Director of Children's Services reports to the Chief Executive of the Council.

#### 3.2.4 Lead Member

The elected councillor who has responsibility for children and young people in the borough is known as the Lead Member, and sits on RLSCB as a 'participating observer'. This means that the Lead Member is able to observe all that happens and can contribute to discussion, but cannot participate in any voting. This allows the Lead Member to scrutinise RLSCB and challenge it if necessary from a political perspective, as a representative of elected members and Rotherham communities.

#### 3.2.5 Lay Members

Lay members are full members of the Board, participating on the Board itself and relevant Sub Groups. Lay Members should help to make links between the LSCB and community groups, support stronger public engagement in local child safety issues and an improved public understanding of the LSCB's child protection work.

#### 3.2.6 All Board Members

Members of an LSCB should be people with a strategic role in relation to safeguarding and promoting the welfare of children in their organisation and should be able to speak for their organisation with authority; commit their organisation on policy and practice matters; and hold their own organisation to account and hold others to account.

#### 3.3 Financial Arrangements

#### Rotherham Local Safeguarding Children Board - Budget 2012/13 Outturn

Income: £284,662 Expenditure: £277,722

Overall expenditure for the year 2012/13 was within budget.

A surplus of £6,940 was carried forward £841 of which to be earmarked for learning and development activity and the remaining £6,099 will part fund the 2013/14 budget.

Invoices have been raised for all agency contributions for 2012/13. The contributions from South Yorkshire Probation Trust and CAFCASS have been set in accordance with the respective regional and national arrangements. The difference between the contributions received and the funding formula is reflected in the accounts as an under-recovery of income from CAFCASS and an over recovery from South Yorkshire Probation.

The accounts reflect full income recovery for all other contributions. For further detail, see Appendix 3. Child Death Review administration costs of £14,427 are included in these accounts

The Board has an agreement in place for two thirds of the cost of any Serious Case Review Overview Reports to be funded by RMBC and one third to be funded by the NHS in Rotherham. In 2012/13 no such expenditure has been incurred.

# 4. Progress on Board priority areas and the 2012-15 Business Plan

Some of the key areas of progress during this past year are that the Board has:

- Submitted partner agencies to a rigorous evaluation of their safeguarding children arrangements under Section 11 of the Children Act 2004
- Supported the Voluntary and Community Organisations Sector to self-assess safeguarding arrangements
- Contributed to commissioning and service specifications for new and future contracts
- Through its Child Death Overview Panel has reviewed all child deaths in the borough.
   This has resulted in:

- More detailed scans on unborn babies following any scan anomalies
- New care pathways for children and young people with diabetes
- The introduction of a safe sleeping assessment for all new-born babies
- Has introduced a Child Sexual Exploitation (CSE) Strategy and developed a Multiagency Action Plan, reflecting the learning from local and national cases
- o Has developed a Multi Agency Support Hub with the CSE Team at its heart
- Provided learning for partner agencies from the detailed review of serious neglect cases resulting from the Ofsted Inspection of Child Protection Service.
- Implemented a focussed Quality Assurance programme for children at risk of significant harm, which has resulted in:
  - Improved assessment and care planning tools for professionals to use where children are subject to a Child Protection Plan
  - Improved participation by GPs in the Child Protection process
  - The development of multi-agency threshold descriptors and a practice resolution protocol for resolving differences of professional opinion in children's cases
  - increased scrutiny and challenge to agencies on the quality of practice and outcomes for children and young people
- Supported the development of a local Early Help Strategy, and commissioned learning and development activity to support the implementation of the strategy.

# Page 23 5. Performance and Quality Assurance Sub Group

#### 5.1 Performance against National Safeguarding Indicators

This performance report relates to performance data as at the end of the 2012/13 reporting year. It includes performance against ex-National Indicators and a selection of key local indicators and should be read in conjunction with the data tables provided in Appendix A.

The service uses the national average as the minimum standard whilst striving for continuous improvement and maintaining its high performing areas. Therefore some targets are set in line with the National average and some are significantly higher.

A Red/Amber/Green (RAG) status has been applied as follows;

Green - on/above local target <u>and</u> on/above national average

Amber - below local target <u>but</u> on/above national average

Red - below local target <u>and</u> below national average

Where ever possible analysis is given by local targets, direction of travel and National benchmarking data.

# Performance by RAG Status

RAG STATUS:	GREEN

# NI 64 – Percentage of Child protection plans, which have ceased, that lasted 2 years or more

2011/12	2012/13 Performance	Local Target	National Ave (min standard)	Stat Neighbour
2.2%	3.8%	4%	5.6%	6.1%

Good performance for this measure is low

Of the 395 child protection plans that have ceased in the current year 15 had lasted for over 2 years. This equates to a performance figure of 3.8% and remains better than national and statistical neighbour averages.

#### NI 68 - Percentage of referrals to children's social care going on to initial assessment

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 2011/12
 2012/13 Performance
 Local Target
 National Ave (min standard)
 Stat Neighbour

 93.9%
 91.9%
 74.6%
 74.6%
 77%

Good performance for this measure is high

Measured by the number of children referred to children's social services departments during the financial year against the number of initial assessments completed within the financial year.

A total of 3833 referrals were received and 3521 initial assessments completed over the year placing performance at 91.3%. Although dropping by 2% in the last 12 months, performance remains high and well above local targets and benchmarking averages.

# NI 67 – Percentage of child protection cases which were reviewed within required timescales

2011/12	2012/13 Performance	Local Target	National Ave (min standard)	Stat Neighbour
100%	100%	99%	90.5%	92.0%

Good performance for this measure is low

238 child protection conferences took place in 2012/13. All were within timescales.

RAG STATUS: AMBER	RAG STATUS:	AMBER
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#### NI59 - Percentage of Initial Assessments carried out within 10 working days of referral

2011/12	2012/13 Performance	Local Target	National Ave (min standard)	Stat Neighbour
86.6%	78.2%	86%	77.4%	83.1%

Good performance for this measure is high

2901 of the 3521 initial assessments completed in 2012/13 were completed within 10 working days. Performance has therefore dropped since the previous year however remains above the national average. We have now slipped below Statistical Neighbour averages.

NI 62 – Percentage of looked after children which had 3 or more placements within the year (Stability of placement: Moves)

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 2011/12
 2012/13 Performance
 Local Target Standard)
 National Ave (min standard)
 Stat Neighbour

 10.2%
 9.9%
 9.5%
 10.7%
 9.8%

Good performance for this measure is low

In 2012/13 39 of our 392 children had three or more placements within the year, equating to a performance of 9.9%. This is off target but shows an improvement on the previous year and compares well with national averages.

### NI 66 - Percentage of Looked After Children cases reviewed within timescales

2011/12	2012/13 Performance	Local Target	National Ave (min standard)	Stat Neighbour
98.0%	96.1%	97.5%	90%	92%

Good performance for this measure is high

346 of the 360 Looked After Children included within this indicator had their cases reviewed within required timescales resulting in a performance of 96.1%. This is a drop in performance and is below local targets however remains above national and statistical neighbour averages therefore is rated Amber.

RAG STATUS:	RED

#### NI 60 – Percentage of Core Assessments completed within 35 working days Status Red

2011/12	2012/13 Performance	Local Target	National Ave (min standard)	Stat Neighbour
69.4%	71.1%	75.1%	75.5%	84.8%

Good performance for this measure is high

1148 of the 1614 assessments completed in 2012/13 were finished within 35 working days placing performance at 71.1%. This is an improvement on the previous year however remains below target and benchmarking averages.

# NI 61 – Timeliness of placements of looked after children for adoption following an agency decision that the child should be placed for adoption

2011/12	2012/13 Performance	Local Target	National Ave (min standard)	Stat Neighbour
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		Page 26		
50%	61.1%	74%	74%	75.1%

Good performance for this measure is high

36 children were adopted in 2012/13 which is 10 more adoptions than in 2011/12. 22 of these were within 12 months of the decision the child should be placed for adopted resulting in a performance of 61.1%. This remains significantly below target and benchmarking data.

# NI 63 – Percentage of long term Looked After Children who have been in the same placement for at least 2 years (Stability of Placement: Length)

2011/12	2012/13 Performance	Local Target	National Ave (min standard)	Stat Neighbour
64.2%	62.2%	68.8%	68.6%	65.5%

Good performance for this measure is high

Long term Looked After Children have been looked after for at least two and a half years. Of the 148 children who fell into this category, at the end of 2012/13, 92 had been in the same placement for at least 2 years resulting in a performance of 62.2%.

# NI 65 – Children becoming subject to a child protection plan for a second or subsequent time

2011/12	2012/13 Performance	Local Target	National Ave (min standard)	Stat Neighbour
11.8%	16.3%	13.3%	13.8%	14.0%

Good performance for this measure is low

319 children became subject to a plan in 2012/13, of these 52 had been subject to a previous plan placing performance for this measure at 16.3%. This is a drop in previous performance and places Rotherham below national and statistical neighbour averages.

#### 5.2 Quality Assurance

The P&QA Sub Group has responsibility for monitoring performance in relation to safeguarding children and young people, and for reviewing and commissioning relevant quality assurance work.

To manage its performance management remit, the Sub Group has routinely reviewed the National Safeguarding Children Performance Indicator Report. However, the Group has now extended this and has requested members to consider which key performance metrics they

believe would be the most appropriate data from their own agency. The expectation is that this approach will be helpful as part of overall assessment of performance across the multi-agency spectrum. Likewise, the Group has extended the remit of reviewing the annual Complaints and Comments report of Children and Young People's Services, and has now begun to receive customer feedback and complaints analysis from other agencies in order to capture specific themes and trends.

### Safeguarding Assurance (Health Trusts) resulting from the Jimmy Savile enquiry

Following serious and significant allegations against 3 NHS organisations across the country about whom allegations of abuse have been made, the Department of Health instigated a review into Jimmy Savile's role within the health system, and the Secretary of State has appointed a barrister to provide assurance that the Department of Health and relevant NHS organisations are following a robust process aimed at protecting the interest of patients. Sir David Nicholson requested that NHS provider Chairs, Chief Executives and their Boards, took the opportunity to reflect upon their safeguarding arrangements and practices relating to all vulnerable people. They were asked to focus on access to patients, including that afforded to volunteers and/or celebrities; and to consider how effective they are at listening to and acting on patient concerns. A report was presented to the Performance and Quality Sub Group that synthesised the work of local Health Trusts to provide assurance of policies and practices within their organisations in the light of the Savile media reports and subsequent enquiry.

#### **Audit Work undertaken**

This is an area that has improved rapidly during the past year, and which allows the group to be assured of agencies' work, focus and improvement across the arena of safeguarding. The details below outline some of the key audit activity of the past year:

### **GP participation at Child Protection Conferences**

The audit, undertaken twice in 12 months, reflected that GP participation at Initial Child Protection conferences needed to be greatly improved. With the assistance of the named GP for Safeguarding, the findings of the audit were reflected back to the GP community in conjunction with a Conference Report template for their use. The impact of this is that participation rate in Initial Child Protection Conferences has increased from 30% to 64%.

### Agency referrals to the Social Care Contact and Referral Team (CART)

This audit area was recently embedded within the CYPS Quality Assurance Framework. Initial findings indicate that there are several areas for improvement, including the need for improvement in referral quality from non-social care professionals/agencies, more robust

screening by social care, and consistent application of thresholds by all agencies. To enable and support improvements in this area of practice, the development of Multi-Agency Threshold Descriptors, a Multi-Agency Referral Form and a Practice Resolution Protocol have all been implemented.

## **Multi-Agency Audit of Serious Neglect Cases**

The requirement to undertake this work arose from the Ofsted unannounced inspection of child protection in July 2012 and the consequent action plan, monitored by the Rotherham Children Improvement Panel. A shortlist of cases was prepared using parameters which included, for example, children being on a Child Protection Plan under the category of Neglect for more than 15mths. Social Workers for these cases were requested to undertake an assessment using the Graded Care Profile – a tool to assist those working with neglect cases to understand the quality of care a child is receiving. From a further shortlist, two cases were identified for an indepth multi-agency audit. These cases were prepared into case studies for presentation to and discussion at the Improvement Panel and other forums.

Themes arising from the case studies included:

- An over reliance on evidence from parents who self-report on the progress and outcomes
  for their child. This indicates that some parents present "disguised compliance" with
  professionals and requires professionals to adopt and approach of "respectful
  uncertainty"\* in their practice (Laming 2003).
- Inconsistency of Child Protection Conference chairs, resulting in poor continuity for
  families and front line professionals through the Child Protection Planning process.
   Further analysis (fig 1) of this issues identified that historically this was indeed an issue,
  but significant progress has since been made, with further plans within the safeguarding
  unit to improve this area of practice.

Fig 1.

	Chairing Consistency Child Protection Conferences  (% of families with same chair person)
2010-11	11.5%
2011-12	21.4%
2012-13	55.5%

- Inconsistent and weak planning/review in relation to Child Protection Plans, resulting in the activity with and on behalf of the family not being translated into positive outcomes for the children.
- Assumptions were made that the parents had the capacity to change without a fuller assessment and understanding of their true capacity to do so.

The above themes resulted in drift and delay for the children in the case studies in terms of their outcomes and long term care, either to remain at home, kinship care in the wider family being an option, or care proceedings being initiated.

#### **Case Review Group**

The Case Review Group has received fewer referrals to consider during 2012/13. In part, this was as a result of Child Protection Conference chairs better exercising their judgement and independence when decisions are made about whether children should be subject to a Child Protection Plan; it was also as a result of audits, and an escalation protocol which enables them to raise case work issues with social care services directly. This area is to be evaluated by the P&QA Sub Group later in 2013. This will also provide the capacity for the Case Review Group to focus on other multi-agency areas of practice relating to child protection activity.

#### **Section 11 Assessment and Assurance**

Organisations are required to have robust safeguarding arrangements as set out in S11 of the Children Act 2004. As part of the scrutiny of these arrangements, RLSCB held a series of challenge meetings with individual organisations in April 2013 and a report indicating trends and principles was presented to the June 2013 Board Meeting.

#### Audit Plan 2013-14

One of the main priorities for the Sub Group is to formulate an annual audit plan. Given that audit work can be resource intensive, it is important that each area identified for auditing has a justified rationale and links to key priorities and themes. Some of the areas identified for audit in 2013-14 are:

- Child Sexual Exploitation
- Child Protection Planning outcomes
- The effectiveness of Early Help to children and families
- Quality of referrals to social care services and the application of thresholds

• Engagement in multi-agency working of substance misuse and mental health services

The Board recognises the importance of quality assurance in relation to services to safeguard and promote the welfare of children and the appointment in 2011 of a dedicated Quality Assurance Officer has provided increased effectiveness of the scrutiny of partnership arrangements, multi-agency working and outcomes for children.

#### 5.3 Management of allegations against Professionals, Foster Carers and Volunteers

RLSCB is pleased that central government decided to maintain the role of the Local Authority Designated Officer (LADO) in the revised Working Together (2013) statutory guidance for this important area of safeguarding children.

In Rotherham, the LADO role is embedded within the Safeguarding Children Unit and its head has responsibility for oversight and coordination of all allegations that fall within the remit. The LADO has responsibility for convening and chairing strategy meetings where necessary and liaising with partner agencies to discuss and agree the most appropriate way forward on specific cases. Planning includes appropriate action in relation to the adult concerned and safeguarding plans for any children involved.

The work requires effective collaboration with all partner agencies, including the voluntary and private sector, human resource departments, the police and professional regulatory organisations.

#### Referrals to the LADO 2012-13

Alleged person by Employment Type	Number
Child Minder	1
Faith Group	3
Foster Carer	5
Nursery	2
Primary Education	10
Secondary Education	8
Special Education	1
Support Worker	1
Voluntary Youth Organisation	1
Social Care	1
Residential Carer	2
Total	35

Outcomes from the above referrals to date are that 6 referrals were substantiated and 13 were not substantiated. Given that enquiries and investigations involving these cases can be complex and take some time to conclude, including being taken forward to the following year, ie 2013 – 14, it is not possible at the time of publishing this to report on outcomes for all referrals. Progress, however, on every case is closely monitored on a month by month basis. A separate report is submitted to the RLSCB in September annually and this report will be updated accordingly.

## 6. Serious Case Review (SCR) Sub Group

The Serious Case Review (SCR) Sub Group meets to consider any cases that have been referred to it against the criteria for a Serious Case Review, to make recommendations on any other appropriate lessons learned reviews and to monitor action plans arising from case reviews.

As part of South Yorkshire Probation Trust's procedures, any serious further offence committed by an offender under supervision triggers a Serious Further Offence Review by the Trust. If the case involves a child or young person, the Probation Trust is required to notify the LSCB for it to consider the need for a Serious Case Review. Two such cases were referred to the Serious Case Review Sub Group in 2012-13, neither case meeting criteria for a SCR, and Rotherham Probation undertook the Serious Further Offence Review.

In 2012 a baby died unexpectedly at home, due to Sudden Unexpected Death in Infancy Syndrome (SUDI). The siblings had previously been subject to a Child Protection Plan and there were significant historical concerns relating to parental alcohol use and neglect. The case was referred to the SCR Sub Group by the Child Death Overview Panel and the case was considered against SCR criteria. The case did not meet the criteria for a Serious Case Review. Public Health and the RLSCB are supporting awareness raising and learning fro parents and practitioners in relation to safe sleeping, and an audit has been commissioned for autumn 2013 by the Rotherham Foundation Trust into safe sleeping advice, guidance and assessments.

#### Child S Serious Case Review.

Following the initial publication of the overview report into this case in May 2012, the Department for Education requested that RLSCB consider publication of a version of the report with less redacted details. RLSCB undertook the revision of the report and published this final version on 19 June 2013.

The new central government's (DfE) statutory guidance, Working Together (2013), was published in April 2013. The LSCB has considered the implications on the new guidance, and is developing a learning and improvement framework that incorporates Serious Case Reviews and other lessons learned reviews.

# 7. Child Death Overview Panel (CDOP)

The role of Rotherham's Child Death Overview Panel (CDOP) is to review the deaths of all children resident in Rotherham. The purpose of this is to establish patterns, identify modifiable factors, and promote messages to prevent future death. The panel has a multi agency membership, including the introduction in 2011 of a lay member. Rotherham CDOP has referred deaths to the Serious Case Review Sub Group for consideration where appropriate. The panel is also an active member of the South Yorkshire CDOP, which meets regularly to share information and best practice.

#### Data relating to child deaths in Rotherham 2012-13

Cause of Death	Number of Deaths
Deliberately inflicted injury, abuse or neglect	0
Suicide or deliberate self-inflicted harm	0
Trauma and other external factors	0
Malignancy	5
Acute medical or surgical condition	1
Chronic medical condition	1
Chromosomal, genetic and congenital anomalies	5
Perinatal/neonatal event	5
Infection	2
Sudden unexpected, unexplained death	2
Total	21

#### **Gender of Children**

Gender	Male	Female	Total
Number of Children	11	10	21

### Age of Children

Age of Child	0-27 days	28 days- 364 days	1 year -4 years	5-9 years	10-14 years	15-17 years	Total
Number of Children	9	3	1	2	4	2	21

Time taken from death of child to review	Under 6 months	6 or 7 months	8 or 9 months	10 or 11 months	12 months	Over one year	Total
Number of Deaths	2	2	6	4	2	5	21

#### **Challenges and Lessons Learned**

#### **Learning from Case 1**

Under section 43 of the coroner's rules, the coroner wrote to the Walk in Clinic to advise that their procedures needed to be reviewed to ensure that patient questionnaire assessments carried out by the nurse were routinely seen by doctors before the patient is reviewed. This followed the death of a child who showed signs of chicken pox but then displayed new symptoms - this procedure had not occurred, and signs of the seriousness of the child's illness were missed. At Rotherham General Hospital a Departmental review regarding the level of seniority of medical involvement after admission to the Children's Assessment Unit was carried out. Where discharge home after observation is undertaken, new arrangement are now in place specifying a minimum of registrar review within 4 hours of admission and/or registrar review before discharge home (in this case, review was by a junior doctor). Had the appropriate treatment been instituted on any of the three occasions he attended the Walk-in clinic or Accident and Emergency, it is possible his death could have been prevented.

#### **Learning from Case 2**

A 13 year old child with insulin dependent diabetes died from diabetic ketoacidosis a treatable complication of diabetes (this can cause severe metabolic upset and death). Overall control of his diabetes was poor, he had difficulties in school, his compliance with treatment was far from idea,I and he had repeat episodes of ketoacidosis. Repeated attempts were made to gain greater compliance with his care in a multidisciplinary setting. Discussions with the paediatric endocrinologists responsible for the care of children in Rotherham have increased awareness of the need to intervene more assertively in such cases and have resulted in new care pathways for children and young people with diabetes.

### Learning from cases 3 and 4

Two children died from Sudden Infant Death Syndrome (SIDS) aged under 6 months, both sharing beds with their parents, were not breast fed, and where there had been parental alcohol consumption and associated smoking. The review of some of these and other SIDS cases has highlighted the requirement to raise the awareness of safe sleeping for babies. In addition to the

individual health trusts, the RLSCB and Public Health are promoting the importance of safe sleeping advice in all training for professionals and those involved in the care of young children and families, including the training of foster carers in the near future. This includes the use of a safe sleeping assessment by midwives and health visitors, and key messages using TV screens in hospital, GP surgeries and council buildings.

#### Learning from cases 5, 6 and 7

Three children died from childhood cancers. All were in receipt of care from Bluebell Wood Hospice and all received palliative care of a high standard. The CDOP panel has developed joint review with midwifery and obstetrics of intra-partum and congenital abnormality deaths. One child died in Leeds from complications of transposition of the great vessels. This was detected at antenatal scan by a sonographer but this was "overruled" by an obstetrician. After intervention by CDOP, it has been agreed that all anomalies suspected will result in more detailed scanning.

One of the three children who died from congenital abnormality died from a specific inherited genetic condition. Prenatal diagnosis with first trimester chorionic sampling makes it possible to detect this condition and to offer parents termination (this carries a significant risk of miscarriage to the pregnancy) and is not culturally sensitive to some families.

# 8. Policy and Procedures Sub Group

The maintenance of Multi-Agency Safeguarding Children procedures is a key function of the LSCB. The Policy and Procedures Sub Group has worked closely with the external provider of the procedures manual to ensure that all the procedures are up to date and fit for purpose and includes any new procedures or protocols required for Rotherham. The following procedures have been reviewed and implemented by the Sub Group since April 2012:

- Surrogacy (new)
- Hidden Harm (revised)
- Fabricated illness (revised)
- Safe Sleeping (new)
- Child Sexual Exploitation Procedures (revised)
- Multi-Agency Threshold Descriptors (new live from 4<sup>th</sup> April 2013)
- Practice Resolution Protocol (new live from 4<sup>th</sup> April 2013)
- Procedures for allegations against staff, carers and volunteers (amended re Disclosure and barring service)
- Family CAF (new)

 Cross (International) Border cooperation in Chid Protection Cases (new – live from April 2013)

#### End user statistics.

The data which enables some understanding of the frequency of use of the procedures is generic (in relation to which professional groups or agencies are accessing and using the procedures) and does not allow these groups to be identified as professional groups. However, the data does enable a general overview of the most utilised procedures, the most frequently used ones between July 2012 and January 2013 being:

- Referring Concerns to Children's Social Care or the Police
- Safeguarding Children form Sexual Exploitation
- Managing Adults who pose a risk to Children and Young People
- Domestic Abuse protocol

#### Working Together (2013) Statutory Guidance.

A priority for the Sub Group in 2013 will be to ensure than any necessary revisions are made to procedures and protocols as a result of the new Working Together (2013) guidance, published recently, and effective from April 15<sup>th</sup> 2013.

### 9. Exploitation Sub Group

## 9.1 Child Sexual Exploitation

Child Sexual Exploitation (CSE) is and will continue be a priority for RLSCB.and its member partners. Earlier in 2013, based on research, national and local learning, RLSCB implemented its CSE Strategy and Action Plan:

#### Rotherham CSE Strategy 2013-16 PREVENT - PROTECT - PURSUE

**PREVENT** children becoming victims of CSE through education and awareness raising and assuring local communities that agencies take the issue seriously.

**PROTECT** children and safeguard them from risk of harm from CSE.

**PURSUE** the perpetrators of CSE, and ensure appropriate multi-agency plans are in place to support victims and to enable them to disclose the abuse safely and provide the evidence to prosecute offenders.

CSE is recognised nationally as one of the most important challenges facing agencies today. It is therefore one of RLSCB's key priorities. We recognise the serious long term and lasting impact CSE can have on every aspect of a child or young person's life, including their health, physical and emotional wellbeing, educational attainment, personal safety, relationships, and future life opportunities. The impact of CSE on family life can be significant, placing considerable strain on all family member, and can ultimately lead to family breakdown.

Due to the very nature of CSE, and its emotive nature, there has been national media attention. Rotherham has featured in this from both positive and negative perspectives. In 2010, the media praised Rotherham agencies for the way that five men were prosecuted following Operation Central, with reports that "this case shows how seriously South Yorkshire Police and Rotherham Council treat the issue of child sexual exploitation". By contrast, there is also the potential for highly negative press where failings are found. This has been seen in Rotherham in the months following the publication of articles in The Times in September 2012. Since then, Council and South Yorkshire Police senior representatives have been required to attend and answer to the Home Affairs Select Committee and the findings have been published in the national press.

The role of the local community in Rotherham is vital in sharing information, and identifying area of concern. Local residents are very often the eyes and ears of the community, and have a duty to pass on any concerns to any of the partner agencies. Part of the work of the CSE Service is to raise professional and public awareness. This is being undertaken through the delivery of multi-agency training for professionals, briefings to elected members, development of leaflets for children and young people, parents and carers, targeted consultation and community engagement activity, as well as a positive working relationship with the local media.

On 1st October 2012, Children's Social Care and South Yorkshire Police co-located to create a specialist CSE service, including police officers, social workers, youth workers and other council support staff. A health worker is soon to join the team, which is based within the Public Protection Unit at Maltby Police Station.

The remit of the Child Sexual Exploitation Team is to:

- Develop and build on current education programmes and engage with schools to reduce and prevent CSE
- Raise awareness of CSE risk indicators and referral processes within all agencies
- Provide a rapid response to the investigation of CSE

- Reduce and prevent CSE by deterring, disrupting and prosecuting offenders
- Support young people to be able to identify themselves as victims of CSE
- To support parents and carers in understanding the implications of CSE and reducing the risks.

The work of the CSE Service also involves collaborative work with the Taxi Licensing Board, Alcohol Licensing and Housing. These agencies can help not only by providing vital information to help identify hotspots, but also provide a multi-agency approach to securing evidence to suspend or revoke licences.

South Yorkshire Police has confirmed its long term commitment to this area of safeguarding children by including it as a key priority, supported with additional funding for specialist officers and training, in its Police and Crime Plan 2013-17.

# Multi Agency action in Rotherham to prevent and protect children and young people from Child Sexual Exploitation (CSE) in 2012/2013

437	Contacts* received relating to 212 children
129	Referrals** relating to 119 children
13	Initial Assessments completed by CSE Team ***
4	Core Assessments completed by CSE Team ****
13	Schools engaged and over 911 pupils involved in preventative work
114	Police referrals into Rotherham Public Protection Unit
28	Abduction notices served
3	Attrition visits conducted by the Police
110	Police Supervising Officers trained
45	Council Ward Members trained
36	Ward Members attended Local Government Yorkshire and the Humber CSE
	Conference in March
19	Senior Managers trained
171	Staff undertaken multi agency training on CSE
175	Multi agency staff trained on the lessons learned from the Child 'S' Serious Case
	Review

<sup>\*</sup> a contact is the first point of contact with social care services from someone making an enquiry or wanting to report a concern.

<sup>\*\*</sup> a referral is a contact that requires further investigation and assessment to see whether a child or their family needs help from social services

\*\*\* an initial assessment is a brief assessment of each child referred which includes relevant information from a number of agencies

\*\*\*\* a core assessment is an in-depth assessment which looks at the detailed needs of the child, and whether their parents or carers have the capacity to respond to those needs. It involves other agencies who will provide information about the child or parents and contribute specialist knowledge.

#### 9.2 Children Missing Education

The local authority has a duty to identify, track and monitor all children and young people within the borough without a school place. This applies to children who are not on a school roll but does not include those who are on a school roll but are not attending school or those who have been excluded. The Children Missing Education Officer, based in the Education Welfare Service, has specific responsibilities in conjunction with the duties on schools and partner agencies.

Referrals to the Children Missing Education Officer for the period April 2012 – March 2013 totalled 874, which is a 60% increase on the previous 12 months.

The breakdown of these referrals of children by school year group is detailed below.

School	0	1	2	3	4	5	6	7	8	9	10	11	12	Total
Year														
Total	41	232	76	72	64	40	45	53	50	68	56	73	4	874

The improved systems and processes between the School Admissions department and the Education Welfare Service has identified that the numbers of children of reception age and at KS1 (Years 1&2) who are identified as Children Missing Education (not on a school roll) is significant as a proportion of the total – 31%. Evidence indicates that this is due to under capacity in Rotherham of school places at primary level. The School Organisation and Planning services are reviewing current capacity issues with the intention of increasing primary school places in the borough. In addition an EU Migrant Community Engagement worker has been employed to work with Roma families, supporting them to take up educational opportunities for their children across the borough.

Children from minority ethnic groups are over represented in referrals and this is partially as a result of families moving to and from the United Kingdom and across local authority boundaries. The recruitment of a bilingual engagement officer, speaking Romani and Slovakian, is currently being recruited to work across the School Admissions, Education Welfare Service, Families for Change programme and School Effectiveness Service. The post will be responsible to the Children Missing Education Officer and will supervise two modern apprentices from the Roma community to assist with engagement and access to services.

The Department for Education ended a consultation in February 2013 of a proposed revision of statutory guidance in relation to Children Missing Education, reducing guidance from 44 pages to 3 pages. A robust consultation response was submitted to the DfE, outlining some of the identified deficiencies in the revised guidance, some of which do not support strong and effective partnership working and provide clarity of roles and responsibilities. The publication of the new DfE guidance has now been delayed until later in 2013.

#### 9.3 Children Missing from Home and Running Away

Nationally, children represented approximately two thirds of the estimated 360,000 missing person incidents in 2009–10. Children in care are three times more likely to go missing from their home than children who are not in care. However, due to the unreliability of available data at a national level, it is likely that the true scale of the problem is not fully understood. A number of recent high-profile court cases concerning child sexual exploitation and high-profile inquiries have highlighted the vulnerability of children who go missing, and the associated risks of sexual exploitation.

On a sub-regional basis, agencies across South Yorkshire are party to a Joint Runaways (Children Missing from Home or Care) Protocol. The aim of the protocol is to ensure an effective and accountable partnership response and service provision for these children and young people. This includes ensuring that:

- There is an agreed plan in place whenever children and young people run away/are missing to ensure appropriate actions take place to trace and return the child/young person
- Risk assessments are completed at the time a child/young person goes missing and shared with the appropriate agencies
- Issues of equality and diversity should be considered in the response given to every child or young person who goes missing or runs away.

# Page 40 Local analysis of missing children incidents (Jan – March 2013)

- A slight reduction in the number of young people reported missing month on month in 2013, from a total of 20 in , 19 in February, and 18 in March
- Girls continue to be most reported, being two-thirds of the total children and young people reported missing since January 2013
- The percentage of Looked After Children in Rotherham who are reported missing is higher than that for the rest of the child population in Rotherham, but lower than the national average
- The highest % age group is 14yrs to 15yrs, accounting for 85.5% of all those reported missing. The youngest reported was 13 yrs of age
- Fewer than 7% of children reported missing were of an origin other than white European
- The number of children repeatedly reported missing averages around 6 children each month, with one child reported 8 times in January. The same child was reported missing once in March
- South Yorkshire Police recorded the child's comments on every occasion. In the period
   January to March, only one child reported an actual concern
- South Yorkshire Police also record whether there are any Child Sexual Exploitation concerns. One was reported in the period January to March.

(The above analysis was provided by the Rotherham Runaways Action Group.)

A new definition for missing persons and protocol was agreed by the Association of Chief Police Officers (ACPO) in January 2013. The definition is described as *'representing a new approach to safeguarding vulnerable people'* and is based on a model developed through pilots in a number of police force areas. ACPO intend to implement the new model across the country commencing 1<sup>st</sup> April 2013, in South Yorkshire this is likely to be autumn 2013.

#### Key features of the new model:

- Incidents of missing and absence must be regarded as indicators of harm and investigated properly.
- A revised definition of 'missing' (see below)
- Introduction of a new category of 'absent' (see below)
- Emphasis on effective and dynamic risk assessment.
- More discerning police response and recording protocols.

- The importance of the role of the missing person co-ordinator.
- The requirement for a shared commitment between key statutory agencies.
- The need for thorough investigation of all 'missing' incidents with particular emphasis on return interviews.

The new definitions are:

#### Missing:

Anyone whose whereabouts cannot be established and where the circumstances are out of character, or the context suggests the person may be a subject of crime or at risk of harm to themselves or another.

#### Absent:

A person not at a place where they are expected or required to be.

#### 9.4 Licensing

The Licensing Act 2003 deals with the licensing of premises for various activities, which include the following:

- To sell alcohol by retail
- To supply alcohol to a club member, or to sell alcohol to a guest of a club member in the case of qualifying clubs
- To provide regulated entertainment
- To sell hot food or drink (late night refreshment) between 11.00pm and 5.00am for consumption on or off the premises

The Licensing Act 2003 sets out four licensing objectives:

- Prevention of crime and disorder
- Public safety
- Prevention of public nuisance
- Protection of children from harm

Examples of activities which are a potential cause of harm to children and young people are:

- Selling alcohol to children under age
- Selling alcohol (by proxy) to children under age
- Selling alcohol to parents who are intoxicated and are supervising their children
- Allowing children into premises where there is gambling or adult entertainment

Where there has been evidence of a risk to children and young people, the RLSCB has, in addition to other local Responsible Authorities, made representations to the Licensing Board, and licences have been revoked and premises closed as a result.

Although the Licensing Act 2003 does not cover licences for vehicles for public hire (taxis), the Responsible Authorities forum shares information and discusses issues where there is a taxi company or driver whose conduct is a cause for concern, and instigates appropriate courses of action. Where there are sufficient concerns and evidence, the matter is referred to children's social care services and the police, and the licence for a driver can be suspended or revoked by the Council Licensing Board.

#### 9.5 E-Safeguarding

The e-safety special interest group continues to meet on a termly basis; however, attendance is not always regular with some agencies not sending representatives to meetings. Whilst this could be as a result of structural changes in organisations and or capacity of staff to attend, it is important that e-Safeguarding is kept high on agendas of all agencies, and further work will be done during 2013/14 to re-engage these organisations.

The priorities for the special interest group have continued to be:

- Looked After Children's access to the internet and social networking
- Reporting and monitoring of on-line safety incidents
- Sharing of good practice across partner agencies
- Education and training in relation to e-Safeguarding

A significant amount of support has been received from Yorkshire and Humber Grid for Learning (YHGL) in relation to leading on specific areas of work and being able to share regional good practice.

The group endeavours to include participation of young people in the work to try to ensure engagement but unfortunately, this year attendance by young people at the group has not been as evident as in previous years.

Meetings for 2013/14 are already being planned with young people in attendance, including work with students at Thomas Rotherham College, and some anti-bullying work with students at Dinnington Comprehensive School.

#### **Looked After Children in Residential Care**

At the request of Rotherham Borough Council Elected Members all children and young people within Rotherham Residential Care were provided with a laptop for their personal use, to support them in their education, and to access information and services available through the internet and on the World Wide Web. To support this initiative, each residential unit was equipped with a dedicated broadband connection. The connection was configured with additional security software to protect the young people from accessing inappropriate web content. However, it was recognised that the young people would require access to social media sites to support and allow them to engage with their peers and support networks. To help support both the staff and young people in using this new facility, RLSCB commissioned the YHGL to deliver eSafety training specifically tailored to meet the individual needs of those involved in the project. The sessions informed the young people how to protect themselves whilst on-line and how to set up their social media profiles to reduce their vulnerability whilst engaging in on-line communication. It also focused on their "digital footprint" and how any inappropriate use of the internet and social media sites could impact on future job prospects. A support package was produced to help the residential units become self-sufficient in training new staff and young people.

#### Other specific areas of e-safeguarding work during the year have included:

- E-Safeguarding links made from the RSCB website to resources on the YHGFL website.
- Review undertaken of anti-bullying guidance for schools working with RMBC's antibullying officer
- CEOP's "think you know" training delivered by members of the group to staff across all settings in Rotherham
- Reviews of e-Safeguarding resources and recommendations to schools and other settings.

#### **10.** Learning and Development Sub Group

The commencement of the 2012/13 business year saw the re-launch of the RLSCB Learning & Development Prospectus. The Prospectus was revised in response to attendance and evaluation analysis from the programmes delivered in 2011/12, and new workshops have been added to the RLSCB offer, including "Safeguarding Children with Disabilities"; "Safeguarding and the Internet"; "Prevent"; and "Working effectively with parents and carers".

In 2012-13 there were 3207 participants, from a wide range of agencies and voluntary sector organisations, who had attended one of the 142 workshops that the RLSCB has commissioned. This shows a significant increase when compared to the 1913 participants in 2011/12. Representation has been high from all partner agencies, with the majority of workshops delivered having been evaluated positively. Engagement from Rotherham's schools in learning and development activity remains strong, and in line with this, the Safeguarding Leads Forum for Schools continues to be well represented. This has included specific focus on the lessons learned from the Child S Serious Case Review. RLSCB also contributed to the GP Protected Learning Time event in November 2012, whose theme was safeguarding.

Following the initial publication of the Child S Serious Case review, the LSCB has also held 8 workshops to share learning with front line staff and managers, with a total of 175 practitioners attending. The RLSCB Independent Chair and the Business Manager have also provided workshops on demand for specific groups of elected members and senior officers.

The RLSCB has sponsored or supported a number of key events in 2012/13:

- Conference developed by the Local Authority's Get Real Team "Improving Life Chances for Children in Our Care" which had 123 practitioners in attendance
- Early Help Conference for frontline practitioners, which was held at Magna and had 283 staff in attendance
- Safeguarding learning event for the Voluntary and Community Sector. Following the
  OfSTED inspection of Children's Services in July 2012, RLSCB also hosted a regional
  event in October 2012 to share lessons learned with senior officers from the 14 other
  local authority areas within the Yorkshire and Humber region.

The Child Sexual Exploitation workshops have been revised and updated to reflect service redesign, and to reflect lessons learned following recent service reviews and learning nationally. In partnership with the Independent Safeguarding Authority, a workshop was delivered in October 2012 for recruitment leads across Adult and Children's Services and partners on their duties to refer those posing a risk to children.

The Independent Chair has continued to lead Group 8 development by facilitating RLSCB Development Days, focussing on national initiatives, and ensuring that the LSCB is fit for purpose moving forward in 2013 and beyond. A schedule of Quality Assurance of LSCB Workshops has been undertaken in 2012/13 in line with the RLSCB QA Framework for Learning & Development, and no concerns relating to content or delivery have been identified.

In preparation for the 2013/14 financial year, an Early Help prospectus has been developed to provide a tiered approach to developing competencies for the effective delivery of preventative/early interventions with the children, young people and families' workforce. This was launched in April 2013 and will run in parallel to the LSCB "Child Protection" focused prospectus. Activity relating to Early Help will largely be funded by Department for Education grants specifically relating to the implementation of the Munro Review (2011).

It has been agreed that the additional contributions made to learning and development by Health and the Local Authority will be maintained in 2013/14.

#### 11. Lay Member's Report

Following the recent departure of one of the Board's two Lay Members, RLSCB has very recently recruited to the vacancy. In the meantime, the current Lay Member has provided the following statement for inclusion in the RLSCB Annual Report:

I feel that the role of Lay Member continues to be received positively by Board Members and Sub Groups, and I wish to offer my thanks to the Sub Group Chairs, and the Independent Chair of the Board in particular, for the way in which the Board is chaired in a challenging yet inclusive manner.

Over the past two years, I have seen the significant commitment and progress made by the Board in the area of safeguarding children from sexual exploitation, and have confidence that Rotherham is in a strong position to tackle this issue.

It is disappointing that the re re-redacted Child S Serious Case Review report has taken so long to be published, though the Board has done everything within its control to resolve this.

In relation to the Child Death Overview Panel (CDOP,) I feel that I have to comment on how professional and thorough but also sensitive the panel members are in evaluating factors that contribute to child deaths in the local area, and initiating changes to services where appropriate.

In terms of developing the role of Lay Members, it is planned that a comprehensive induction programme will be introduced for the new Lay Member, and that opportunities for a Lay Member forum could be developed regionally.

# Page 46 12. Rotherham LSCB Challenges and Priorities for 2013-2016

#### 12.1 Priorities arising from the revised Working Together guidance (2013)

These will include the development and implementation of:

- A multi-agency local protocol (framework) for the assessment of children
- A performance and quality framework to measure the effectiveness of Early Help Services on outcomes for children and their families
- A Learning and Improvement Framework to enable lessons learned to be translated into improved outcomes for children
- Protocols for effective governance and partnership arrangements within the borough
- An updated LSCB constitution and revisions to its Sub Groups so that they can deliver the work and priorities of the board
- A risk register for the LSCB.

#### 12.2 Additional key priorities within the 2013-2016 Business Plan

- Ensure that the Child Sexual Exploitation Service, including other partners, are responsive to the need of young people involved in or vulnerable to CSE, through the implementation of the CSE Strategy and Action Plan
- Continue to develop the importance of understanding the child's voice and journey through services, in particular the child protection process
- Ensure that children subject to Child Protection Plan receive thorough multi-agency assessments of need and risk, effective care plans that address these and review them well.

## Appendix 1

## Safeguarding Children and Families - Performance Table 2012/13 (unvalidated)

								Benchi	test marking ata	
Re f	Definition	Good Perf is	2011-12 PERFOR MANCE	LOCAL TARGET	2012-13 PERFORMAN CE (unvalidated)	Directio n of Travel*	RAG STAT US**	Statistic al Neighb our Average	National Average	Service Commentary
NI 59	Percentage of initial assessments for children's social care carried out within 10 working days of referral	HIGH	86.6% (3996/461 4)	86.0%	<b>78.2%</b> (2901/3521)	Declined	Amber	83.1%	77.4%	Drop in performance since previous year. Below statistical neighbour but above national averages.
NI 60	Percentage of core assessments for children's social care that were carried out within 35 working days of their commencement	HIGH	69.4% (1345/193 7)	75.1%	71.1% (1148/1614)	Improve d	Red	84.8%	75.5%	Performance has improved on the previous year but remains below target and comparators.
NI 61	Timeliness of placements of looked after children for adoption following an agency decision that the child should be placed for adoption	HIGH	50% (13/26)	74.0%	61.1% (22/36)	Improve d	Red	75.1%	74.0%	More children have been adopted wthin the year (26 in 11/12 compared to 36 in 12/13). Timeliness of these adoptions remains an area for improvement. Those waiting for a placement over 12 months are reducing and it is projected that this performance drag should have less of an impact in future years.
NI 62	Stability of placements of looked after children: number of placements (3 or more)	LOW	10.24% (39/381)	9.5%	<b>9.9%</b> (39/392)	Improve d	Amber	9.8%	10.7%	Performance is worse than target but has improved on the previous year and remains better than national.
NI 63	Stability of placements of looked after children: Length of placement	HIGH	64.19% (95/148)	68.6%	<b>62.2%</b> (92/148)	Decline d	Red	65.5%	68.6%	This measure remains red as performance is below target and below national. Analysis shows a key area for improvement are placements commissioned externally. Commissioning team are

Latest
Benchmarking
Data

								Statistic		
Re f	Definition	Good Perf is	2011-12 PERFOR MANCE	LOCAL TARGET	2012-13 PERFORMAN CE (unvalidated)	Directio n of Travel*	RAG STAT US**	al Neighb our Average	National Average	Service Commentary
										working with providers to tackle this issue.
NI 64	Child protection plans lasting 2 years or more	LOW	2.2% (8/362)	4.0%	<b>3.8%</b> (15/395)	Declined	Green	6.1%	5.6%	Although performance has declined this remains good performance, better than target and comparators.
NI 65	Percentage of children becoming the subject of a Child Protection Plan for a second or subsequent time	LOW	11.8% (52/442)	13.3%	<b>16.3%</b> (52/319)	Declined	Red	14.0%	13.8%	Performance has declined and below targets and comparators.
NI 66	Looked After Children cases which were reviewed within required timescales	HIGH	98.02% (346/353)	97.5%	96.1% (346/360)	Declined	Amber	92.0%	90.0%	Performance is below target however compares well against comparator data.
<b>NI</b> 67	Percentage of child protection cases which were reviewed within required timescales	HIGH	100% (335/335)	99.0%	<b>100%</b> (211/238)	Same	Green	92.0%	90.5%	100% performance
NI 68	Percentage of referrals to children's social care going on to initial assessment	HIGH	93.9% (4614/491 3)	87.6%	91.9% (3521/3833)	Declined	Green	77.0%	74.6%	Although there is a slight drop performance is high and well above comparators.

#### \*Direction of Travel

Due to the nature of some of the indicators good performance can sometimes be high figures and other times low. This helps understand of whether performance has improved, declined or stayed the same when compared to the previous year.

#### \*\*RAG Status definition:

Green – on/above target

Amber – off target but in line with stat neighbours and national average

Red – off target and below stat neighbours and national average

# Appendix 2

# **Board Member Attendance**

	(including Development Days and Extraordinary Meeting	Total Attendance (inc deputies)	Attendance
Name	Job Title and Agency	(iiic departe)	0.0 70
Alan Hazell	Independent Chair, Rotherham Local Safeguarding Children Board	6 out of 6	100%
Joyce Thacker	Strategic Director of Children and Young People's Services, Rotherham Metropolitan Borough Council	4 out of 6	67%
Howard Woolfenden Clair Pyper – interim from Dec 2012	Director of Safeguarding Children and Families, Rotherham Metropolitan Borough Council	5 out of 6	83%
Paul Grimwood	Youth Offending Services Manager, Rotherham Metropolitan Borough Council	5 out of 6	83%
Dorothy Smith	Senior Director of Schools and Lifelong Learning, Rotherham Metropolitan Borough Council	5 out of 6	83%
Jane Skupien	Head Teacher, Sitwell Infants School	2 out of 6	33%
Nick Whittaker	Head Teacher, Hilltop and Kelford Special Schools	0 out of 2	0%
John Radford	Director of Public Health, NHS Rotherham	3 out of 6	50%
Juliette Greenwood	Chief Nurse, The Rotherham NHS Foundation Trust	5 out of 6	83%
Deborah Wildgoose	Deputy Director of Nursing, Rotherham, Doncaster and South Humber NHS Foundation Trust (RDASH)	4 out of 6	67%
Shona McFarlane	Director of Health and Wellbeing, Neighbourhoods and Adult Services, Rotherham Metropolitan Borough Council	4 out of 6	67%
Pete Horner / Dave Stopford	Public Protection Unit Manager, South Yorkshire Police / Detective Chief Inspector, South Yorkshire Police	6 out of 6	100%
Maryke Turvey / Sarah Mainwaring – from Aug 2012	Head of Rotherham Delivery Unit, South Yorkshire Probation Trust	3 out of 6	50%
Pat Armitage / Anne Riley – from Dec 2012	Enhanced Service Manager, CAFCASS	3 out of 6	50%
Maryann Barton	Service Manager, Action for Children	5 out of 6	83%
Richard Burton	Lay Member, Rotherham Local Safeguarding Children Board	4 out of 6	67%
Gary Smith / Diane Smith	Lay Member, Rotherham Local Safeguarding Children Board	2 out of 4	50%
Martin Oldknow / Steve Green – from Dec 2012	Group Manager East Area (Doncaster & Rotherham), South Yorkshire Fire and Rescue Service	2 out of 6	33%
David Polkinghorn	General Practitioner, NHS Rotherham	4 out of 6	67%
Sue Cassins	Executive Lead for Safeguarding at the Clinical Commissioning Group, Rotherham	4 out of 6	67%

# **RLSCB Budget Statement 2012/13 Outturn**

Budget Statement 2012/13 Outturn	Funding Formula	Budget 2012/13	Outturn 2012/13
	%	£	£
Income 2012/13			
Annual Contributions			
Rotherham Borough Council	55.80%	99,479	99,479
NHS Rotherham	25.90%	45,589	45,589
South Yorkshire Police	15.30%	26,901	26,901
South Yorkshire Probation	Capped	5,300	5,480
CAFCASS	0.30%	590	550
Other Contributions			
Surplus from previous year		42,663	42,663
NHS Rotherham - L&D Contribution		22,000	22,000
Grant Income - Munro Monies		42,000	42,000
Total Income		284,522	284,662
Expenditure 2012/13			
RLSCB Salaries *		154,889	155,196
Public Liability Insurance		800	694
IT & Communications		3,100	302
Printing		1,200	1,497
Stationery and Equipment		401	152
Learning & Development (RLSCB and Multi-agency) *		97,632	96,791
Independent Chair		20,000	16,940
Software licences & maintenance contracts		6,500	6,150
Total Expenditure		284,522	277,722
Surplus		0	6,940

<sup>\*</sup> Child Death Overview Panel administration costs of £14,427 are included in these accounts.

#### 15. Glossary of Terms

Although great effort has been taken to avoid jargon in this report, this Glossary of Terms may be helpful in explaining again the use of any acronyms or abbreviations.

ACPO Association of Chief Police Officers
CAF / FCAF Common Assessment Framework

CAFCASS Children and Family Court Advisory and Support Service

CCG Clinical Commissioning Group
CDOP Child Death Overview Panel

**CPP** Child Protection Plan

CYPS Children and Young People's Services

**CYPTB** Children's Trust Board

**DASH** Domestic Abuse, Stalking and Honour Based Violence

DCS Director of Children's Services
DfE Department for Education
IMR Individual Management Reviews
ISA Independent Safeguarding Author

ISA Independent Safeguarding Authority
LAC Looked After Children (in care)
LSCB Local Safeguarding Children Board
NAS Neighbourhoods and Adult Services
OFSTED Office for Standards in Education

RDASH Rotherham Doncaster and South Humber NHS Foundation Trust

**RFT** Rotherham Foundation (Hospital) Trust

RLSCB / Board Rotherham Local Safeguarding Children Board

SCR Serious Case Review YOT Youth Offending Team

# YORKSHIRE AND THE HUMBER REGIONAL HEALTH AND WELLBEING COLLABORATIVE IN PARTNERSHIP WITH THE ASSOCIATION OF DIRECTORS OF CHILDREN'S SERVICES POLICY WORK STREAM – IMPROVING HEALTH OUTCOMES FOR CHILDREN ACTION

#### LOCAL AUTHORITY AREA/CCG

Rotherham

What needs to be done?  The actions we might need to take to improve the systems and processes which lead to better outcomes for children, young people and their families  (Taken from 'Initial Recommendations', Health from Mars, Local Authority from Venus?' Dec 2012)	How might we tackle this? (Initial actions)	Who might do it? Who might lead action and who might be involved	reç	Local/sub regional or regional?		When might it be done by? (Take into account is it urgent?)	How will we know it has happened?
			L	SR	R		age
Undertake activity to develop a mutual understanding of who has authority for decision making and holding responsibility. Locate existing effective partnerships in the new planning framework. If they are not effective review whether they are still needed.	<ul> <li>Review of governance</li> <li>Still some work to be undertaken in this area, as health commissioning has changed considerably.</li> <li>Governance Structures currently being mapped</li> </ul>	P&Q Team Commissio ning	L			Nov 2013	Report to CYP&FP 5

What needs to be done?  The actions we might need to take to improve the systems and processes which lead to better outcomes for children, young people and their families  (Taken from 'Initial Recommendations', Health from Mars, Local Authority from Venus?' Dec 2012)	How might we tackle this? (Initial actions)	Who might do it? Who might lead action and who might be involved	reg			regional or regional?		regional or regional?		regional regional		regional or regional?		gional or egional? be do by (Take account urge		When might it be done by? (Take into account is it urgent?)	How will we know it has happened?
Develop an understanding of available budget/resources in advance of developing operational plans	<ul> <li>Annual assessment of partner resources to fund CYPP priorities</li> <li>We will look at this in a different way to previously – and try and apportion costs to age groups e.g         0-5 etc so we can see where the bulk of our resource is being spent – and compare to outcomes in these areas</li> <li>The above suggestion would require benchmarking and should be driven by the JSNA and the Children's Audit</li> <li>Develop a Joint Commissioning Strategy</li> </ul>	Joanne Robertson  Joanne Robertson / Chrissy Wright	L	SR	R	Nov 2013 Oct 2013	Report to CYP&FP  Page Report to CYP&FP										

What needs to be done?  The actions we might need to take to improve the systems and processes which lead to better outcomes for children, young people and their families  (Taken from 'Initial Recommendations', Health from Mars, Local Authority from Venus?' Dec 2012)	How might we tackle this? (Initial actions)	Who might do it? Who might lead action and who might be involved	reg	Local/sub regional or regional?		When might it be done by? (Take into account is it urgent?)	How will we know it has happened?
Identify blocks to information sharing and test data sharing protocols and processes for robustness and resilience	Assurance conversations with key service leads.     NHS Standards of Connectivity issues to be resolved (ICT issues)	Gary Walsh	L	SR	R	Oct. 2013	• Report back to CYP&FP.

#### The actions below are deemed as completed or part of other areas of work / developments

Develop a clear statement of vision and values and ensure this is reinforced throughout the system. Ensure children feature strongly in the JSNA and Health and Wellbeing Strategy and that your Children and Young Peoples Plan or equivalent aligns.

Undertake an assurance exercise of the degree to which core vision and values are owned throughout and across the system and from strategic to operational levels.

Develop communication strategies to ensure a consistent dissemination of information and on-going engagement in the future development of strategy (For effective communication we need to ensure that we really understand the new commissioning arrangements to ensure that the appropriate parties are involved. (e.g. NCB) )

Develop strategies to mitigate the risk of pathway fragmentation.	
Exploit the potential of the Health Visitor/School Nurse Offer (DH, 2010), through improved integration and systematic application of a structured framework for public health outcomes.	meeting child and
Develop and apply short- and medium-term impact measures for early intervention and prevention, with jointly agreed outcomes for local achievement	
Develop a jointly agreed strategic market management and procurement route shared and understood by all.	
Prepare the workforce to deliver our aspirations through integrated training events and information sharing workshops.	
Plan the transition for commissioning health visiting and school nursing through shared understanding of what this opportunity offers.	
Test the robustness of relationships by turning vision and strategy into action	
Identify ways of understanding cultural differences by investing in building resilient relationships which endure overtime.	
Maximise the opportunity that commissioners with extensive experience and expertise from a wide range of backgrounds brings to the table.	a G G
	Ç