

CABINET

**Venue: Town Hall, Moorgate
Street, Rotherham. S60
2TH**

Date: Wednesday, 4 September 2013

Time: 10.30 a.m.

A G E N D A

1. Questions from Members of the Public
2. To determine if the following matters are to be considered under the categories suggested in accordance with the Local Government Act 1972.
3. To determine any item which the Chairman is of the opinion should be considered as a matter of urgency.
4. Declarations of Interest
5. Minutes of the previous meeting held on 24th July, 2013 (copy supplied separately)
6. Scrutiny Review on RMBC Residential Homes (Pages 2 - 9)
 - Strategic Director of Neighbourhoods and Adult Services to report.
7. Continuing Healthcare Scrutiny Review Response (Pages 10 - 17)
 - Director of Health and Wellbeing to report.
8. Armed Force Community Covenant (Pages 18 - 20)
 - Chief Executive to report.
9. The Implications of the DCLG Technical Consultation on the Local Government Finance Settlement for 2014/15 and 2015/16 (Pages 21 - 29)
 - Director of Finance to report.
10. LSCB Annual Report (Pages 30 - 71)
 - Strategic Director of Children and Young People's Services to report.

11. Exclusion of the Press and Public
The following items are likely to be considered in the absence of the press and public as being exempt under Paragraph 3 of Part 1 of Schedule 12A to the Local Government Act 1972 (as amended March 2006) (information relating to the financial or business affairs).
12. Green Deal Delivery Options (Pages 72 - 82)
 - Strategic Director of Neighbourhoods and Adult Services to report.
13. Acquisition of 25 new Council Homes at Barbers Avenue, Rawmarsh (Pages 83 - 91)
 - Strategic Director of Neighbourhoods and Adult Services to report.
14. Digital Region Limited (Pages 92 - 100)
 - Chief Executive to report.

In accordance with Section (7) of the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012 the Chairman of the Overview and Scrutiny Management Board has agreed that those items marked (*) contain decisions which need to be acted upon as a matter of urgency and which cannot be reasonably deferred (see notice attached)

Cabinet Meeting – 4th September, 2013

Take notice, in accordance with Regulation 5 of the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012, that the following report is to be considered in the private part of the meeting without having provided the required twenty-eight days' notice:-

- **Digital Region**

An exemption under Paragraph 3 (Information relating to the financial or business affairs of any particular person (including the authority holding that information)) of Part I of Schedule 12A of the Local Government Act 1972 is requested, as this report provides information about financial and business affairs.

The Chair of the Overview and Scrutiny Management Board has agreed that the item is urgent and cannot reasonably be deferred.

Jacqueline Collins
Director of Legal and Democratic Services
23rd August, 2013.

ROTHERHAM BOROUGH COUNCIL – CABINET
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1	Meeting:	Cabinet
2	Date:	4 September 2013
3	Title:	Scrutiny Review of RMBC Residential Homes
4	Directorate:	Neighbourhoods and Adult Services

5 Summary

This report sets out the findings and recommendations of the Scrutiny Review of RMBC Residential Homes, Lord Hardy Court and Davies Court. The full report is attached as Appendix 1 and was endorsed by the Health Select Commission and the Overview and Scrutiny Management Board at their meetings on 18 April and 24 May 2013 respectively.

This report also gives a brief outline of the progress that has been made by Senior Management, Residential Managers and Human Resources Business Partner in line with recommendations from the review and progress from the proposed restructure of the homes and service in line with budget savings and proposals for 2013/2014.

6 Recommendations

- **That Cabinet receives and notes the report.**

7 **Proposals and Details**

The scrutiny review was undertaken from September to December 2012 by Scrutiny members and Cabinet Member for Adult Social Care. It was held in the context of the significant budget pressures being faced by the Council and the need to identify further efficiencies. Previous Value for Money analysis has demonstrated that the homes are higher cost than the equivalent services provided in the independent sector, and reduce the cost effectiveness of of Adult Social Care.

It was felt that an independent view of the finance and staffing of the homes was required. It took place, alongside a financial review commissioned by Neighbourhoods and Adults Services management, and delivered by Price Waterhouse Cooper (PWC). It was intended that the Scrutiny Review would add value to the work carried out by PWC and to allow a wider range of discussion to take place about the future of the homes.

The review enabled the Senior Management, Residential Managers and Staff within the service to take a critical look at previous and current expenditure and to achieve an understanding of value for money, outcomes and quality of service provision and in particular, the potential impact of budget cuts on this area and the risks associated. The homes are registered with and regulated by the Care Quality Commission; as a result there are essential standards of care which have to be maintained, and have to be clearly factored into the plans to ensure compliance.

Senior Management, Residential Managers and Human Resources Business Partners and Budget Support Officers have been working together since February 2013 to consider a number of options and recommendations from the review and the financial review from Price Waterhouse Cooper. The options and areas proposed are:-

- Restructure of all Staffing within the homes, including a review of Terms and Conditions for staff, to achieve some of the budget savings proposals.
- Revise and review shift patterns for all staff, to ensure staffing requirements and service provision is carried out safely to meet essential standards and service user assessed needs.
- Ensure we have effective and robust Shift Leaders to comply and maintain and deliver standards of care for the service users.
- Look at ways of maintaining Quality Assurance, by a critical look at how we manage this at present and other options and tools available to support Managers for example Electronic Case Recording.
- Residential Managers have been working with Procurement Officers to look at options to utilise different suppliers and contracts to ensure value for money, and address potential savings in this area. A number of other

Catering Suppliers are already being used, and a pilot is underway by the procurement teams.

- Both homes have a structured and varied social and activities programme which presently meets individual need, promotes wellbeing, and provides the service users with a range of options both in the home and community. To achieve the budget savings proposed for the homes, this area will have to be reconsidered, which will include looking at more voluntary groups and community links and developing more partnership working, i.e. Age UK, Alzheimer's Society.
- Options to be considered for lease arrangements to generate some income related benefits, i.e. The Café and the Hairdressing / Beauty Salon.
- The Service has now employed a Handy Person at each home, which will reduce some of the expenditure on minor repairs and maintenance. The Residential Managers are working with EDS Building Manager to look at other ways of how to use this role and where some savings can be achieved immediately, i.e. To train the Handy Person and purchase the equipment to undertake Electrical PAT Testing requirements which would reduce costs on contracting from the present Council Contractor in place, Wilmot Dixons.

The review reported under the five sub headings; staffing, catering and entertainment, buildings and maintenance, costs and comparisons and options for the future. Each of these sections of the review has its own recommendations. There are 10 recommendations all of which have been considered for the proposals within the revised structure for the residential homes. Response to the recommendations is attached Appendix 2.

8 Finance

The review recommendations will need to be considered in the context of the agreed budget for 2013/14.

9 Risks and Uncertainties

The cost savings to be made in line with budget proposals will have an impact on future delivery of services in the homes. Meeting individual assessed care needs will be the focus of the restructure of the service, and Essential Standards in line with Policy and Care Quality Commission.

The Social and Activities Element of the homes, which support customers from the community, will no longer be provided in house. It has been established that this facility and services will have to be provided by other options, to enable the revised staffing structure to meet budget proposal, by providing and meeting care needs of the individual.

For some individual service users, families and carers, this is an important part for them when choosing a home, the provision in place at both homes enables individuals to feel part of a home and still have community links. For the future this area needs to be conveyed to service users, families and carers etc with some sensitivity and the Management need to ensure other options and alternative arrangements are in place.

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Cabinet's Response to Scrutiny Review RMBC Residential Homes

Recommendation	Cabinet Decision (Accepted/ Rejected/ Deferred)	Cabinet Response (detailing proposed action if accepted, rationale for rejection, and why and when issue will be reconsidered if deferred)	Officer Responsible	Action by (Date)
1. That RMBC corporately agrees to review the terms and conditions of the staff to address issues of out of hour's enhancements and sickness absence payments.		<p>Terms and Conditions of staff are being addressed under the review of the residential homes.</p> <p>Average hours paid for annual leave and sickness is to be removed at the recruitment process within the new structure for the homes and at redeployment of staff not successful within the new structure.</p> <p>Out of hours enhancements for staff under taking night shifts will remain, and present weekend enhancements and bank holiday payments remain, as this has to be a corporate agreement across all council services to change terms and conditions for staff.</p> <p>Staff recruited to the new structure within the homes will no longer have paid breaks. This provision has been factored in the new proposed structure</p>	HR Business Partner O Stringwell	1/9/13
2. That Human Resources and NAS Management consider urgently whether the permanent recruitment freeze could be lifted for the two homes, enabling them to take more control of some of the staffing costs.		<p>A Recruitment Freeze had been in place from October 2013, due to the Review.</p> <p>Temporary and casual posts had been advertised and some internal recruitment within the council had taken place. Existing staff within the homes on temporary contracts had received extended dates on their contracts, due to the review by scrutiny and the financial review commissioned in October 2012 under Price Waterhouse.</p> <p>Recruitment was and remains ongoing with casual bank of staff at both homes, to ensure consistency of care delivery</p>	Service Manager R Brown Registered Managers L Sykes Todd	
3. That the hard work and commitment of the staff and managers of both homes be recognised and the achievements made in enhancing the dignity of		<p>Within the new structure, following consultations with staff and implementation, Recruitment and Selection Process have to be robust, with clear requirements regarding the delivery of care.</p> <p>Ensuring that staff operate within the framework of Essential</p>	Service Manager R Brown HR Business Partner O Stringwell	30/9/13

residents.		Standards, with clear values around enhancing the individual's life within the home.	HR Officers Union Representation Registered Managers, L Todd L Sykes	
4. To provide the opportunity for the teams to explore this further and to generate independent income for the homes to enhance the experience for residents and to ensure that quality of provision is maintained as far as possible. This might also include some independent management of procurement for food and catering items.		<p>Progress has already been made in standardising current menus and rationalising the products bought across all care homes. This will ensure continuation of quality products, whilst reducing costs.</p> <p>Procurement to explore outsourcing, this would include full management of that function? (management of existing catering staff, ensuring legal compliance with all FSA standards, plus all food purchases and catering supp</p> <p>Other options to consider was the lease of the café, to enable residents to continue to use this facility with family and relatives around festive holidays and other celebrations, and Sunday Lunch etc</p> <p>The Therapy Room and Hairdressing salon opportunities to be considered regarding this function/ service to be leased for some business opportunity which would then ensure residents health and Wellbeing continue to be enhanced, as this area provides a social focus to their life in the homes.</p>	<p>Service Leader Simon Bradley Procurement Officers Registered Managers L Todd L Sykes</p> <p>Service Manager R Brown Registered Managers</p>	Ongoing
5. That further work is done with the procurement team of the Council to look at value for money in the current contractual arrangements and a review of how the food budgets are spent in carried out in conjunction with the managers of the homes.		<p>Progress has already been made in standardising current menus and rationalising the products bought across all care homes. This will ensure continuation of quality products, whilst reducing costs.</p> <p>Procurement to explore outsourcing, this would include full management of that function? (management of existing catering staff, ensuring legal compliance with all FSA standards, plus all food purchases and catering supplies</p>	<p>Service Leaders Simon Bradley Procurement Officers</p> <p>Registered Managers</p>	Ongoing

<p>6. That consideration is given to the extent to which the handyman service or another internal employee could be trained to carry out some of the maintenance services that are currently causing the homes to go over their repairs and maintenance budgets.</p>		<p>The Handyman at both homes is now in place, with clear identified roles around repairs and maintenance.</p> <p>Training is being provided through Facilities Management in line with Caretakers of premises across the council.</p> <p>Where applicable minor repairs and maintenance are being undertaken, along with other opportunities for them to undertake. This is in line with Health and Safety Regulations and Procedures.</p>	<p>EDS Building Manager D Wilde Registered Managers L Todd, L Sykes</p>	<p>June 2013 completed</p>
<p>7. That the same review contained within recommendation 5 for food procurement is carried out regard to procurement of cleaning, repairs and maintenance services.</p>		<p>Procurement to explore outsourcing of the cleaning service at care establishments, this again would include full management of that function?(management of existing staff and all cleaning related equipment and products)</p> <p>A Rotherham MBC framework agreement for repairs and maintenance services has recently been let for all Council buildings. This agreement has been awarded following a robust procurement process and advertised through the Official Journal of the European Union, this agreement is delivering huge benefits and cost savings to Rotherham MBC.</p>	<p>Simon Bradley Service Leader Procurement Officers</p> <p>Registered Managers</p>	<p>Ongoing</p>
<p>8. That Cabinet do not cut staff hours per resident below 25 as it is felt this will be to the detriment of the quality of other service provided.</p>		<p>The budget hours allocated per week per resident for care delivery remains at 25 hours. This has been planned in to the revised structure for the care delivery and to ensure that Essential Standards are maintained.</p>	<p>Budget Support Officer Viv Ford Service Manager R Brown</p>	<p>30/9/13</p>
<p>9. That Cabinet re-consider the proposal to reduce the number of managers within the homes, as this is likely to result in re-deployment and payment protection costs which could outweigh the savings being made.</p>		<p>The Team Leader role has been reviewed to achieve a balance between cost and safety/quality of care. Sufficient leadership role are in place within the new structure.</p> <p>The proposed new role will be Shift Leader at a lower band, which has enabled more posts are able be to implement under the revised management structure which equates to 11 part time posts to deliver the care service and manage the care team at each home.</p> <p>Vacant posts with Neighbourhoods and Adult Services are being ring fenced for staff within the homes, where redeployment opportunities are being considered at the appropriate band where possible</p>	<p>Hr Business Partner O Stringwell Service Manager R Brown Registered Managers L Todd, Sykes</p>	<p>30/9/13</p>

10. That the Council looks at alternative ways to manage the capital costs and borrowing associated with this, which potential review the burden from the revenue budgets of the homes.		Finance to review the treatment of borrowing costs in accordance with Standard Accounting practices. This will ensure comparative treatment with the independent sector.	Finance Manager Mark Scarrott	31/08/13
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ROTHERHAM BOROUGH COUNCIL – REPORT TO CABINET
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1	Meeting:	Cabinet
2	Date:	4th September, 2013
3	Title:	Response to Scrutiny Review of Continuing Healthcare
4	Directorate:	Neighbourhoods and Adult Services

5 Summary

Continuing Health Care (CHC) relates to NHS funding which is allocated to people whose health care needs meets a nationally agreed threshold. Following concerns that citizens in Rotherham were not being served well due to CHC spend being lower than nearby and statistical neighbours; a Review of Continuing Health Care was led by the Joint Health and Improving Lives Select Commissions in 2012. A number of recommendations were made which it is intended will improve the experience of citizens and ensure that a fairer share of CHC funding is received within Rotherham.

Following receipt of the report, a senior management working group consisting of both RMBC and NHSR staff agreed a set of actions to ensure effective multi disciplinary working and deliver better outcomes for customers.

CHC and social care assessments are completed by health and social care staff presently or recently involved in assessing, reviewing, treating and supporting the customer. A better working relationship exists and understanding of each professionals role in participating in a multi disciplinary assessment and completing the Decision Support Tool (DST).

6 Recommendations

- **This report to be submitted to Cabinet Member Adult Social Care and Cabinet meetings prior to receipt at September's Health and Wellbeing Board.**

7 Proposals and Details

- 7.1 The recommendations of the Joint Select Commissions have been addressed through joint work between NHS Rotherham and RMBC. Good progress has been made in addressing the recommendations, as can be seen from the attached plan. Unfortunately significant changes in the NHS, including the transfer of responsibilities to the Clinical Commissioning Group and the local National Commissioning Board have resulted in some delays in agreeing the devised joint protocol, which reflects the National guidance for NHS Continuing Healthcare and NHS Funded Nursing Care and which addresses local issues identified by the Select Commission. This piece of work has commenced following the restructure and the move of CHC team over to CCG/Commissioning Support Unit, along with the actions required to drive Personalisation of services in Rotherham forward across Health and Social Services.
- 7.2 It has been agreed that training will be delivered jointly by CHC/LA leads and rolled out across hospital, community health and social care teams. As recommended, examples of local case studies, with examples of completed and anonymised Decision Support Tools will be used, ensuring that staff can learn from the experience of Rotherham customers.
- 7.3 With regards to the joint protocol, it has been drafted and work will commence with continuing healthcare manager/staff and RMBC CHC champions now CHC lead is in post. The protocol will include how to resolve disputes, and written guidance for staff will be produced to ensure consistency and compliance once it has been issued.
- 7.4 The RMBC/CHC Senior Management group, Personalisation Workstream will continue to meet and consider budget issues and to develop cost effective delivery of personal health budgets by 1st April 2014 based on a pilot project implemented from 1st April 2013.
- 7.5 Improved engagement has been achieved through the attendance at CHC panels. It is now routine that RMBC CHC Champions attend ratification panel meetings as part of the Multi Disciplinary Team and implement joint actions. CHC Champions ensure that issues are addressed in a timely manner.

8 Finance

- 8.1 The latest Yorkshire and Humberside CHC benchmarking information for the quarter ending 31 December 2012, Rotherham is ranked 7th out of 15 in terms of the number of people receiving CHC funding. In terms of actual expenditure Rotherham is ranked 10th and therefore still below the average spend per person within the region.

9 Risks and Uncertainties

9.1 The following actions have been taken forward by RMBC/CHC strategic leads to implement Scrutiny's recommendations and minimise risk to the Council

9.1.1 Monthly meetings are held between strategic leads to consider budget issues, address joint protocols, transitions between funding streams and services etc.

9.1.2 Operational leads continue to meet weekly to address day to day issues and improve communication.

9.1.3 Written protocols and joint training will re commence now CHC Leads are in post and will address the remaining Scrutiny recommendations.

10 Background Papers and Consultation

Review of Continuing Health Care in Rotherham – Joint Report of the Health and Improving lives Select Commissions

National Framework for Continuing Health Care – Department of Health

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Cabinet's Response to Joint Select Commission Review of Continuing Healthcare

Recommendation	Decision (Accepted/ Rejected/ Deferred)	Response (detailing proposed action if accepted, rationale for rejection, and why and when issue will be reconsidered if deferred)	Officer Responsible	Action by (Date)
<p>1. Assessments:</p> <p>1a) To consider options for ensuring the CHC and social care assessments are undertaken together and develop an agreed protocol for how this should be delivered</p>	Accepted	<p>Requirement within the National Framework to conduct reviews in a timely manner and work with RMBC through Joint Working Group.</p> <p>Issues to be flagged through Joint Working Group where issues arise</p> <p>Work has commenced to devise a joint local CHC/LA protocol which reflects the National guidance for NHS Continuing Healthcare & NHS Funded Nursing Care which addresses local issues. This piece of work will continue following the restructure and the move of CHC team over to CCG/CSU and changes within CHC team have been fully implemented.</p> <p>2/7/2013</p> <p>Following the restructure of the NHS, CHC has now successfully moved over to be part of the CSU. The implementation of the National Framework for NHS Continuing Health Care and NHS Funded Nursing care December 2012 was implemented from 1st April 2013. CHC continues to follow the National Framework for NHS Continuing Health Care and NHS Funded Nursing Care December 2012 to ensure that reviews are conducted with in a timely manner and work with RMBC. Any issues to be flagged through the joint working Group</p>	<p>MC</p> <p>SMc/SL</p>	ongoing
<p>1b) To consider options for utilising the use of step up/step down units much more widely, and enable assessments to be undertaken in this setting</p>	Accepted	<p>Community hospital now in operation providing a degree of step up/down care. Additional Step Up Step Down beds in Intermediate Care Service have 89% occupancy rate. Impact of community hospital to be monitored</p>	DB	Complete

<p>2. Training:</p> <p>2a) To refresh the CHC training package, ensuring it is up to date, appropriate for the different staff involved and rolled out to all relevant staff periodically</p>	Accepted	<p>Refreshed National Framework released for implementation April 2013 CSU nominated lead to develop an appropriate CHC training package to be rolled out locally across SY&B area</p> <p>2/7/2013 The CSU has appointed an individual who is in post to develop an appropriate CHC training package to be rolled out locally across SY&B area. The training will be accessible to all health professionals and Social workers and Social services officers</p>	DM/SM	<p>Plan agreed, training to be in place by 31/10/2013 However CHC are available for any support during this time</p>
<p>2b) To ensure the training package incorporates local case studies and opportunities for feedback to relevant workers on completing the assessment process to enable shared learning</p>	Accepted	<p>CHC training package incorporate case studies to assist in application and learning CSU operational lead with responsibilities for training to undertake training delivery Examples of local case studies, completed and anonymised DST will be used and feedback given.</p> <p>2/7/2013 The CSU has appointed an individual to develop an appropriate training package to be rolled out across SY&B. All training will incorporate case studies</p>	DM/SM	<p>Plan agreed training to be in place by 31/10/2013</p>
<p>3. Written Protocols:</p> <p>3a) To clarify issues in relation to who should be the lead worker for individual cases and how to resolve disputes by producing written, agreed guidance for all to adhere to</p>	Accepted	<p>As per National framework Work to be undertaken through Joint Working Group Joint protocol, work will re commence with continuing healthcare manager/staff and RMBC CHC champions. Protocol is drafted – includes how to resolve disputes, written guidance will be produced.</p> <p>2/7/2013 Work to be undertaken through the joint working group to revisit the local resolution/ dispute process which is currently in place and to develop a protocol to include a written guidance to</p>	SMc/SL	<p>31/10/2013</p>

		include and resolve disputes with agreement with all parties involved – CSU,CCG and LA		
3b) To put in place written agreement regarding the backdating of funding when a person is admitted to a nursing unit based on a fast track or checklist, pending a full DST being completed (protocols for weekends/holidays etc)	Accepted	As per Framework. Any issues to be discussed through Joint Working Group. Guidance will be provided within the joint protocol. 2/7/2013 The National Framework For NHS Continuing Healthcare and NHS Funded nursing Care December 2012 and Refund Guidance will be followed with regards backdating of funding when a person is admitted to a nursing unit based on a fast track or checklist - pending a DST being completed	SMc/SL	ongoing
3c) To agree and put in place an appropriate joint 'exit strategy' for people moving from high level of care to lower level (within and across service providers)	Accepted	Agreed 14 day turnaround in principle with LA - agreed	SMc/SL	complete
3d) To agree joint protocols for engaging with service users to gather their experience and views for the purpose of service improvement	Accepted	Currently patient feedback sought for Domiciliary care packages and captured in service user/customers survey. Outcomes are fed through to Joint Working Group. Customer Outcomes also to be monitored through new Personal Health Budgets pilot . 22/8/2013 - the current process continues. CHC nurses continue to use Quality of Domiciliary care proforma each time a review is completed – these allows any issues/ compliments to be discussed with care providers therefore improving the service provided to our patients	SMc/SL	30/8/2013 ongoing

<p>4. Joint Working</p> <p>4a) To ensure the continuation of MDT meetings on a regular basis to improve joint working and communication across agencies</p>	Accepted	<p>Currently meeting are organised by RMBC . To continue with inclusion of the identified CHC leads within the CSU. RMBC CHC champions to continue to attend eligibility panel as part of the MDT.</p>	DM & op lead	Complete
<p>4b) To put in place joint strategic liaison meetings on a twice yearly basis, to allow for issues to be raised across agencies in an open and honest forum (including budget issues, transition planning and implementing the proposals within the Care and Support Bill)</p>	Accepted	<p>Joint approach between RMBC & CCG agreed to take place alternate months with input from CHC nominated lead. RMBC/CHC working group to continue to meet and address budget issues and implementing the proposals within the Care and Support Bill.</p>	SMc/SL & CHC lead	complete
<p>4c) For the NHS and Local Authority to agree appropriate arrangements to consider discharge planning to avoid delays</p>	Accepted	<p>Work has been undertaken through discharge strategy group which includes LA and CHC members NHS and Local Authority consider a customer's needs and start planning for discharge on admission. Guidance will be given in the joint protocol.</p>	SMc/SL & CHC lead	complete
<p>4d) To consider options in relation to closer working across agencies, based on examples of good practice e.g Maltby Service Centre</p>	Accepted	<p>RCCG commissioned integrated Health & Social care teams across Rotherham as part of the wider strategy to improve the care of patients with long term conditions</p>	SMc/SL & CHC lead	Complete
<p>5. Panels and Appeals</p> <p>5a) To address concerns in relation to the lack of representation from the Local Authority at CHC panel meetings</p>	Accepted	<p>CHC ratification panel undertaken daily LA reps now attending Tuesday & Thursday .</p>	LB/PB & SM	Complete

5b) To ensure there is expert knowledge via an appropriate worker (such as a learning disabilities representative) on future CHC and Dispute Panels	Accepted	Currently distinct LD panel runs monthly. CHC rep present on appeal panels also attended by LD service leads. John Williams Service Manager Learning disability Service attends.	DM & op lead	Complete
5c) To review the current Dispute Panel, and take action to ensure this is an independent, multi-disciplinary panel which includes representation from the Local Authority	Accepted	Appeals & disputes currently handled by central CSU retrospective team who organise MDT panel inclusive of a LA rep. Any revision to be taken forward through Joint Working Group	DM & op lead	Complete
5d) To review the decision making process and look to streamline panels where possible to reduce delays and inconsistencies	Accepted	Ratification of applications as per the principles of the National Framework. Any issues to be discussed through Joint Working Group	DM & op lead	Complete
5e) To ensure that all workers are routinely giving service users information leaflets and that the appeals process and their right to appeal is clearly explained at the beginning of the process	Accepted	Principles of National Framework followed - information and/or leaflets supplied routinely. Staffs have access to information, leaflets and explain the appeals process at the offset when assessments are completed and the CHC process explained.	DM & op lead	Complete
Reviewing Recommendations: 6) For the Health Select Commission to receive a report from the CHC manager 6 months from the recommendations being approved, to ensure they are being implemented and making progress to improve this service in Rotherham.		Progress has/is being made to improve services in Rotherham. These are contained within this report and any further requests for updates to be discussed through Joint Working Group	SMc/SL	Complete

Key to named individuals:

MC – Michaela Cox DM – Debbie Morton DB – Dominic Blaydon SM – Sheena Moreton
SMc – Shona McFarlane SL – Sarah Lever LB – Lindsay Bishop PB- Paula Brown

ROTHERHAM BOROUGH COUNCIL – REPORT TO MEMBERS
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1.	Meeting:-	Cabinet
2.	Date:-	4th September 2013
3.	Title:-	Armed Forces Community Covenant
4.	Directorate:-	Resources.

5. Summary

This report is to seek Cabinet approval to support a bid by the Military Community Veterans' Centre (MCVC) to the Ministry of Defence (MoD) Armed Forces Community Covenant Fund.

The bid is for £22,088 to provide an outreach service to meet ex-service personnel and their families who may need assistance under the remit of the Armed Forces Community Covenant (AFCC).

As lead organisation for the Rotherham AFCC, any grant money awarded will be paid to RMBC to manage and administer.

6. Recommendations

That Cabinet supports the submission of the bid and the management and administration of any financial grant approved by the MoD.

7. Proposals and Details

Background.

In January 2012, Rotherham MBC as the lead organisation, arranged an official signing event for the AFCC. Twenty one other organisations signed the covenant, the ethos being that no ex-serving personnel (and members of their family) should be disadvantaged in any way for having served in HM Armed Forces, along with assisting with the transition into civilian life.

Since January 2012, work on this initiative has continued under the guidance of Cllr Doyle, Cabinet Member for Adult and Social Care, as Chair of the AFCC Strategic Group.

One of the success stories is the creation of a constituted community group, the MCVC who are working with the ex-service community in Rotherham.

Proposal

The MCVC Group wishes to submit a bid to the MoD AFCC Fund and requires the support of the local authority to do this.

The bid is to purchase a mobile trailer and associated equipment to provide a Rotherham-wide outreach service, run by volunteers. In providing this service and working with the MoD, the MCVC will assist with the transition from military to civilian life, through signposting to organisations within the AFCC, who can help them with information and services about housing, employment and health.

The number of ex-service personnel is not known definitively; the best estimate from the MoD is the 1:6 ratios which out of a population of 254,605 would mean a focus population of approximately 42,000 in Rotherham.

Through a series of planned visits to different locations or events in Rotherham, using established networks such as Parish Councils, Area Assemblies, local libraries and VAR, the aim is to identify as many of the ex-service personnel as possible and through signposting to relevant services, begin to assess the needs of the of this client group.

If awarded funding, work on the project will begin in October 2013 with the outreach programme beginning in January 2014. Information gathered throughout the year long project will be used to inform service providers, via the AFCC Strategic Group, of the needs of ex-service personnel and their family members.

8. Finance

The bid to the MoD AFCC Fund is for £22,088.

No direct financial contribution from RMBC is required toward supporting the bid.

If a grant is awarded, the contribution from RMBC will be staff time for a lead officer to support the AFCC and administer the grant, along with assistance from staff in Financial Services.

Appropriate systems will be established within Financial Service along with management and administration arrangements with the MCVC group.

9. Risks and Uncertainties

The MCVC group are currently working on policies and procedures to assist with the running of the outreach service. These include Health and Safety, Volunteer protocols and staffing protocols when the outreach service is out on location. If the full amount of funding requested in the bid is not approved, then a scaled down version of the project will be implemented.

Appropriate management and administrative systems will be put in place with the group to ensure regular financial monitoring occurs which will link to Financial Regulations.

Without an understanding of the needs of ex-service personnel, it is difficult to meet the obligations of the AFCC.

10. Policy and Performance Agenda Implications

The Armed Forces Community Covenant contributes to the Priority 2 of the Corporate Plan, "*Protecting our most vulnerable people and families, enabling them to maximise their independence*" by ensuring that no ex-service personnel is disadvantaged for having served in HM Armed Forces.

11. Background Papers and Consultation

Reports to

Improving Places Select Commission 7th September 2011

**Cabinet Member for Community Development, Equalities & Young People's Issues
12th September 2011**

LSP Board 29th September 2011.

Contact Name:-

Christine Majer, Scrutiny Officer, Ext 22738. Resources Directorate.

Christine.majer@rotherham.gov.uk.

1	Meeting:	Cabinet
2	Date:	4th September 2013
3	Title:	The Implications of the DCLG Technical Consultation on the Local Government Finance Settlement for 2014/15 and 2015/16
4	Directorate:	Resources

5 Summary

On 25th July the Department for Communities and Local Government (DCLG) released a Technical Consultation on the Local Government Finance Settlement for 2014/15 and 2015/16. This Consultation document provides some further clarity over figures included in the June Spending Round. The implications of the proposed settlements are:

- an increase in the indicative 2014/15 Council Funding Gap of £0.4m to £20.5m
- an increase in the indicative 2015/16 Council Funding Gap of £5.2m to £20.3m

This revises the Council's cumulative funding gap to £40.8m over the next two financial years.

A response to the Consultation Paper is required by the DCLG by 2nd October 2013. Members are asked to support both an individual response from Rotherham as well as endorsing the SIGOMA response. If a decision is also taken to submit a South Yorkshire response, Members are asked to support inclusion of Rotherham's issues and concerns in this response also. Members are also asked to agree the sharing of any response with the LGA.

6 Recommendations

Cabinet is asked to:

- **Note the contents of the report and the implications on the Council's indicative funding gap for both 2014/15 and 2015/16 and**
- **to support Consultation responses as follows:**
 - A Rotherham specific response**
 - Input to/endorse the SIGOMA response**
 - Input to a South Yorkshire response (should a decision be taken to submit one from the four South Yorkshire authorities)**
 - Share our response with the Local Government Association (LGA)**

7.1 Background

Following the 26th June Spending Round (SR) covering the financial years 2013-2016 (up to the next General Election) and the subsequent announcement of the Government's £100bn Infrastructure Plan, a report was brought to Cabinet on 24th July providing details of the implications of these announcements for the Council. At that time it was indicated that further details of the settlement proposals were to be released and that pending this detailed information there were still many issues which lacked clarity. The position was further clarified by the release on 25th July of a Technical Consultation Paper setting out proposals for the 2014/15 and 2015/16 local government finance settlements. The Technical Consultation sets out how the funding announced in June will feed through to local authorities and consultation responses to the proposals are requested by 2nd October 2013.

7.2 2014/15 and 2015/16 Settlements and Projected Budget Gap

Prior to the Spending Review announcement in June, Rotherham Council was already facing a budget gap of £19.120m in 2014/15 as a result of the previously announced 9.1% reduction in grant. The SR announced a further 7.6% cut in 2015/16 funding which increased the Council's Initial projected Budget Gap for 2015/16 by a further £10m – giving a **total initial Budget shortfall of £29.3m over the two years 2014/15 to 2015/16** (excluding any, new investment proposals and the financial outcome of the triennial pensions revaluation).

This initial indicative funding gap was in addition to the Council delivering cumulative savings of over £70.2m between 2011/12 and the end of the current financial year (2013/14).

The following table sets out the position in respect of the Council's projected Budget Gap prior to the June Spending Review and the changes resulting from the proposals in the June Spending Review and July 25th Technical Consultation Paper.

Year	Initial Projected Budget Gap	Spending Review	Budget Gap reported to Cabinet (24 th July 2013)	Technical Consultation 25 th July 2013	Revised Estimated Budget Gap
	£m	£m	£m	£m	£m
2014/15	19.120	0.968	20.088	0.431	20.519
2015/16	10.155	4.945	15.100	5.162	20.262
Cumulative Gap	29.275	5.913	35.188	5.593	40.781

The impact of the information contained in the Technical Consultation document on Rotherham's budget projections is to further reduce projected resources by £5.6m on top of the £5.9m reduction reported to Cabinet on 24th July 2013.

- This increases the 2014/15 and 2015/16 cumulative budget gap from the £35.2m previously reported to £40.8m.
- For 2015/16, this is an increase over 2014/15's budget gap of £20.3m.

These additional and unexpected proposed funding cuts will seriously impact on the Council's ability to meet the needs of Rotherham citizens. The Leader of the Council has already written to Lord Freud (7th August) raising serious concerns about the negative impact of Welfare Reform on Rotherham's residents and economy. (Appendix 1 attached).

7.3 Revised Estimated Budget Gap 2014/15

Although national spending plans for 2014/15 were not revised in the Spending Review, details within it required the Council's Budget projections for 2014/15 to be adjusted. The effect on the Council **was to increase the projected 2014/15 Budget Gap by £0.968m to £20.088m**. The latest proposals in the Technical Consultation Paper now further reduce the grant figures to allow for **a national increase of £95m in the Business Rates Safety Net provision which is top-sliced from RSG funding**. This is to reflect the expected impact on authorities of backdated (pre 2013/14) rates appeals (although it should be noted that if all the provision is not required it will be refunded to authorities in proportion to their grant).

As a result of this national reduction, Rotherham Council's indicative 2014/15 Budget Gap increases by an additional £0.4m to £20.5m as the Council's projected grant income has now been further reduced.

7.4 Revised Estimated Budget Gap 2015/16

As a result of the 26th June announcement, the **Cumulative Budget Gap rose by £5.9m to £35.188m**. At that time there remained several elements of the SR announcement for which clarification was awaited. In particular, there was uncertainty around the additional **£3.8bn of Health Funding** announced for joint commissioning of social care by the NHS and Councils, an allocation of **£100m to enable efficiencies in collaborative service delivery** and **£200m for the Troubled Families initiative**. The release of the **Technical Consultation Paper** on 25th July supplied much of the detail about the 2015/16 settlement that had been lacking.

Initial analysis of the Consultation Paper indicated that **the cut to local government funding was £1bn greater than had been indicated in the June Spending Round**. The reasons for this substantial reduction in funding were unclear and gave rise to general concern among authorities, **prompting the LGA to seek an urgent meeting with the DCLG** the following week to clarify the position.

Following that meeting, it is now understood that the additional funding reduction is the result of several factors:

- A further cut in RSG resulting from the DCLG taking into account expected growth in local authorities' share of business rates in its estimates. (Rotherham has assumed no local growth in rates income over and above the annual RPI increase in rates poundage).
- **£800m** which had been presented in June as additional funding for "new burdens", being included in the local government funding baseline rather than being added to it. This funding includes:
 - £335m for Dilnot scheme preparation from 2015/16;
 - £100m Collaboration and Efficiency Funding;

- £30m Fire Transformation Funding, and
- £188m transfer from the Department for Work and Pensions for the Independent Living Fund.

In effect, this means that **there is a cut in mainstream funding to support these new initiatives** – i.e. the ‘new’ money is not additional funding!!

On 15th August the Leader of Birmingham City Council urged the National Audit Office to investigate the government’s handling of its funding of councils.

7.5 Information still requiring clarification

Despite the release of the Technical Consultation Paper there is still some uncertainty around the final settlement figures for both financial years. This is due to:

- The distribution of funding for the new initiatives and other resources announced in June, including a contribution to the £200m for the Troubled Families’ Initiative, have yet to be announced by the DCLG. Consequently it is not possible to assess the impact on individual authorities at this stage but because mainstream funding has been cut, **authorities that do not receive allocations in respect of the new initiatives will in effect suffer cuts.**
- It is widely anticipated that the 2015/16 Settlement will be subject to further adjustment. This is because not all the changes affecting the 2015/16 settlement have been taken into account in the DCLG’s current projections. Compensation for the 2013/14 Council Tax Freeze will be fed into authorities’ 2015/16 funding base and the settlement will be reduced to reflect the impact of excluding schools from the Carbon Reduction Commitment.
- As RSG is composed of a number of elements of core funding and “rolled in grants” such as Early Intervention Grant (EIG). Details of all of which have not yet been announced and as each of these elements will be cut at different rates in 2015/16, the impact will be different for each local Authority.
- The DCLG has also promised to reimburse authorities for the extension of small business rates relief announced in the March 2013 Budget (and latterly in respect of the new empty properties) but no details have been released of the funding either in the current year or going forward.
- Finally, as announced in June - £400m, (35%) is being top-sliced from the **New Homes Bonus (NHB)**, pot to transfer to Local Economic Partnerships (LEPs) as part of their investment funding. **£150m of this is to come from local authority resources.** A Consultation Paper was released for distributing funding to LEPs was also released on 25th July.

The significance of these proposals should not be underestimated as, although it is anticipated that a full SR will be announced in the autumn of 2015 following the election in May 2015, the next government’s overall spending plans for 2015/16 are not expected to change - Ed Milliband has stated “ *...our starting point for 2015/16 is that we won’t be able to reverse the cuts in day to day current spending unless they are fully funded from savings elsewhere or extra revenue.*”

7.6 Response to the Technical Consultation Paper.

The consultation period on the Settlement Proposals ends on the 2nd October. The consultation questions focus on technical details such as the proposals for implementing the 1% reduction in funding in 2014/15 announced in the Chancellor's Budget, the treatment of holdbacks for the NHB and Safety Net and the calculation of control totals in 2015/16. However, the current proposals have generated substantial concern amongst authorities and Members need to consider the Council's response to the consultation.

Rotherham could submit an individual response to the paper or could chose to endorse those made by organisations like the LGA and SIGOMA. The LGA has requested that authorities share any response to the DCLG Consultation so that they "can best reflect your concerns to the Government" and suggest that following are key points to raise:

- The lack of transparency in the process – the Government should explain that the impact of cuts on most authorities will be around 15% and not 10% as announced in the June Spending round.
- Where resources have been held back or top-sliced the DCLG should not take more than is needed – "authorities cannot budget for redistributions of unspent contingencies they may not receive".
- With respect to business rates appeals the reason for the adjustments in 2014/15 – the financial risk should be carried by the Government (as they are responsible for the Valuation Office Agency) and backdated appeals relating to the period before 2013/14 (when the business rates retention scheme started) should be charged to the pre 2013 rates pot.

It is understood that SIGOMA is preparing a consultation response and the Council has made initial enquiries about the potential for a combined South Yorkshire response.

Members are asked to support a multi-approach response – a Rotherham specific response, input to the SIGOMA response and (should one be submitted) input to a South Yorkshire response. Members are also asked to agree to the sharing of the information with the LGA.

8. Finance

The financial implications of the proposed settlements are set out in section 7 above. The key impact has been to increase the Council's projected funding shortfall for 2014/15 and 2015/16 as described in sections 7.2 to 7.5. This position will continue to be monitored, revised as appropriate, and reported through to SLT/Cabinet as further information is released.

9. Risks and Uncertainties

With respect to the Local Government Finance Settlements in 2014/15 and 2015/16 it should be noted that the changes to the funding of local authorities associated with the localisation of Business Rates have significantly increased the proportion of risk borne by Councils, As suggested above there remain significant uncertainties and pressures for the Council around the proposed Financial Settlements for 2014/15 and 2015/16 although work is progressing to model the effects of the

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proposals to ensure that the Council's financial planning, monitoring and reporting process are robust and effective and to mitigate the Council's financial risk.

10. Policy and Performance Agenda Implications

Achieving a balanced Revenue Budget and closing the funding gaps for forthcoming financial years is essential if the objectives of the Council's Policy agenda are to be achieved. Financial performance is a key element within the assessment of the Council's overall performance framework.

11. Background Papers and Consultation

- Report to Cabinet General Fund: Budget Principles, 2014/15 and onwards, 2014/15: Proposed Budget Setting Timetable and 2013/14 - Reporting in year financial budget performance - 3rd July 2013.
- Spending Round 26th June 2013 and Infrastructure Announcement 27th June 2013
- Report to Cabinet the Implications of the 2013 Spending Round for the Council's Financial Projections – 24th July 2013
- Local Government Finance Settlement 2014/15 and 2015/16 Technical Consultations DCLG 25th July 2013.
- LGA Briefing
- Strategic Directors and Service Directors of the Council

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Where Everyone Matters

Leader of the Council - Councillor Roger Stone OBE

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Lord Freud
House of Lords
LONDON
SW1A 0PW

7 August 2013

Dear Lord Freud

“Hitting the poorest places hardest”

I am writing to you to raise serious concerns with regard to the potentially huge negative impacts which welfare reform is likely to have on the residents and economy of Rotherham.

We acknowledge the need for some reform of welfare benefits in the current economic circumstances. However, the financial impact on individual residents and the wider borough, alongside reductions in council services and spending forced by significant annual budget reductions, are in danger of creating a “perfect storm” of economic blows to Rotherham. This will not only have a devastating effect on our most vulnerable people and communities, but will hit the whole town.

Sheffield Hallam University has estimated from its research “Hitting the poorest places hardest” the annual loss to the Rotherham economy from the fully implemented benefit changes will be £91 million. We estimate that £25 million of this will be lost from our most deprived neighbourhoods. The conclusion from this study is the more deprived the area, the greater the financial impact.

At a time when the need for the council to support people is high and rising, we have a projected shortfall in funding of £29 million for 2015/16.

(Please turn over)

More generally, SIGOMA's recent analysis "A Fair Future?" illustrates how changes to local government funding will impact adversely on those in greatest need.

The likelihood of this scenario happening was raised by my Chief Executive, Martin Kimber, as part of the consultation process on the reforms before they were implemented.

Rotherham has a good track record for working with government to deliver economic regeneration. Recent examples include the Portas Pilot and X-fund programmes on the back of the very successful and innovative activities we have used to revitalise our town centre.

Similarly, we have a network of Business Incubation Centres and business start-up programmes, which are widely regarded as examples of best practice to help people back into work through self-employment. We have the much lauded "Rotherham Ready" and "Are you Ready" initiatives which promote enterprise skills for all school age pupils.

We have also sought to minimise our impact on local taxpayers by using the Council Tax Freeze Grant and Transitional Grant.

Both Rotherham and the wider Sheffield City Region are seeking to deliver on the government's growth agenda; increasing job numbers and growing our GVA which is only 66% of the UK average in our sub-region.

Rotherham's economy has suffered more than most in recent years with a net loss of 11,000 jobs since 2007. We wish to continue working with government on actions which will benefit both the local and national economies.

However, we feel that this is at risk of being undermined by the need to focus more resources on those affected by welfare reform. Furthermore, the loss of benefit income will reduce local demand and affect businesses whose customers who are already hard pressed. This could well lead to downward spiral of further job losses and widening inequality.

Barriers to improving economic performance appear to be coming thick and fast and it is difficult to detect any joining-up of policy. The recent announcement of allocations for the latest rounds of ERDF and ESF monies covering the period 2014-20 have shown South Yorkshire being especially hard hit with a 64% reduction in funding compared to the current 2007-13 programme. This is despite our economy being in no better position relative to the UK average.

Again, this resource would have helped to grow the local economy and to ensure that the residents of the more deprived areas can benefit from this. The only way we can

Appendix 1

ensure our citizens can become more independent and the town can contribute to the national effort to grow the economy is by local jobs and business growth, matched by an increasingly skilled labour market.

But, our efforts are in danger of stalling because we appear to be harder hit than most. There is also increasing evidence emerging that the DWP Work Programme is simply not delivering. This is an area Government needs to look at urgently to see how the knowledge and skills of local authorities could be deployed to use the resources being ploughed into this programme to achieve better outcomes.

We are doing as much as we can to help people at this time of change, despite our own diminishing resources. It would help to have greater clarity about the timescales for the introduction of Universal Credit and the likely demand for support during transition. Better information sharing by DWP would also help us deal with the consequences of welfare reform.

Ultimately, we are seeking recognition that inequalities are being created and that a fair method is deployed to redress these imbalances. It is crucial for Government that the smaller and poorer metropolitan towns like Rotherham are equipped with the resources needed to stimulate economic growth. The consequences of doing otherwise both for local people and the economy as a whole are unthinkable.

Currently it feels as if we will never be able to reach our full potential in the battle to deliver increased economic growth without some shifts in policy by Government to recognise the particular challenges places like Rotherham face.

I wait to hear your response and hope that we can jointly look at ways to move forward on this extremely serious and challenging issue

Yours sincerely

Councillor Roger Stone OBE

ROTHERHAM BOROUGH COUNCIL – REPORT

1.	Meeting:	Cabinet
2.	Date:	4th 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 Cabinet receive this report as an introduction to the 2012-13 Rotherham LSCB Annual Report (separate report).**
- **Report to progress to Improving Lives Select Commission on 18th September, 2013.**

The requirement for LSCBs to produce and publish an 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:

1. 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 multi-agency 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

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Rotherham Local Safeguarding Children Board



Annual Report 2012 – 2013

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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 its 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 multi-agency 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

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.

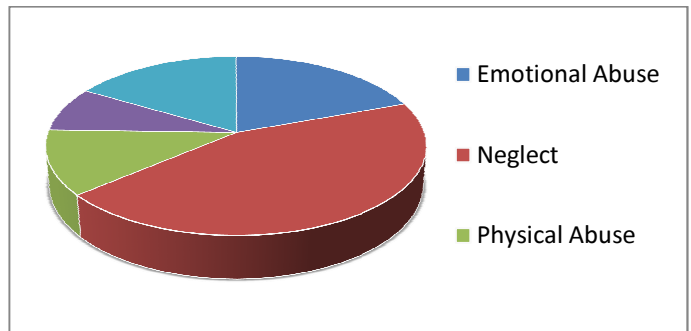
2.3 Areas of Deprivation

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).

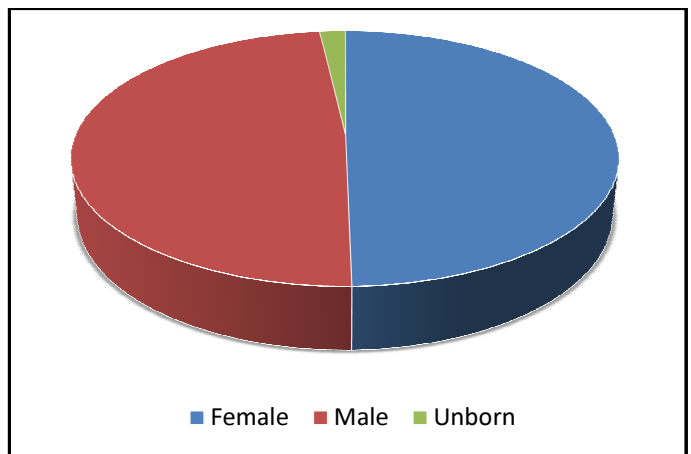
2.4 Children on a Child Protection Plan (as at 31st March 2013)

Number of Children on a Child Protection Plan	334
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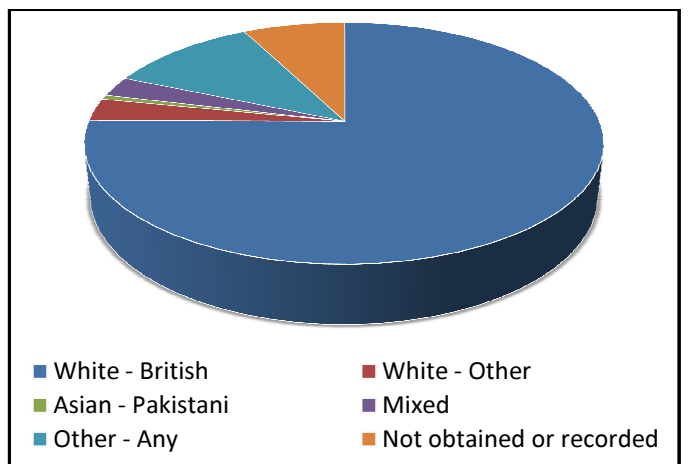
Child Protection Category	Number	%
Emotional Abuse	65	19%
Neglect	148	44%
Physical Abuse	39	12%
Sexual Abuse	27	8%
Multiple Categories	55	16%

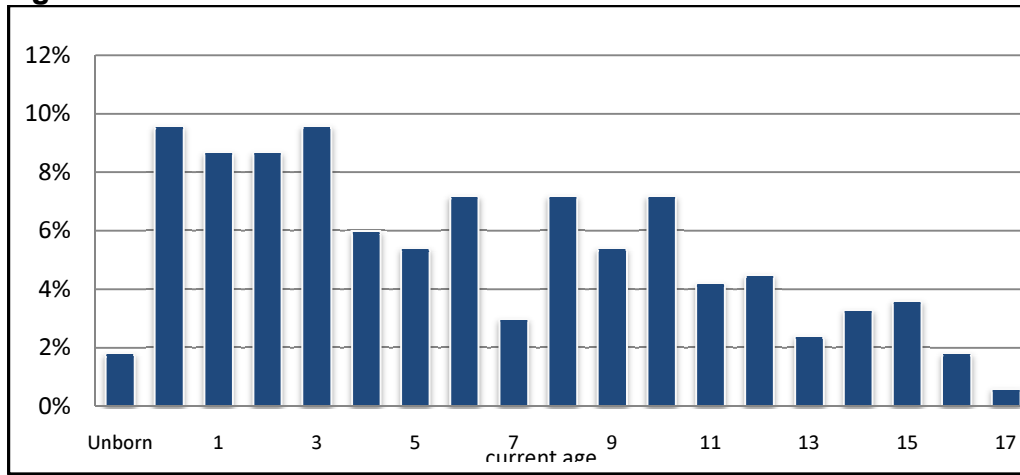


Gender	Number	%
Female	166	50%
Male	162	49%
Unborn	6	2%



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%



Age of child**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 CAF/CASS 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 CAF/CASS 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 Multi-agency Action Plan, reflecting the learning from local and national cases
- 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.

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 and on/above national average
- Amber - below local target but on/above national average
- Red - below local target and 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

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

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)

2011/12	2012/13 Performance	Local Target	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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50%	61.1%	74%	74%	75.1%
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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 in-depth 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 an 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 for 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 arrangements 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 ideal 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 4th April 2013)
- Practice Resolution Protocol (new – live from 4th April 2013)
- Procedures for allegations against staff, carers and volunteers (amended re Disclosure and barring service)
- Family CAF (new)

- Cross (International) Border cooperation in Child 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 from 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 that 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 15th 2013.

9. Exploitation Sub Group

9.1 Child Sexual Exploitation

Child Sexual Exploitation (CSE) is and will continue to 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

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

** 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 Year	0	1	2	3	4	5	6	7	8	9	10	11	12	Total
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.

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 1st 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 anti-bullying 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.

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)

Ref	Definition	Good Perf is	2011-12 PERFORMANCE	LOCAL TARGET	2012-13 PERFORMANCE (unvalidated)	Direction of Travel*	RAG STAT US**	Latest Benchmarking Data		Service Commentary
								Statistical Neighbour Average	National Average	
NI 59	Percentage of initial assessments for children's social care carried out within 10 working days of referral	HIGH	86.6% (3996/4614)	86.0%	78.2% (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% (1345/1937)	75.1%	71.1% (1148/1614)	Improved	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)	Improved	Red	75.1%	74.0%	More children have been adopted within 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%	9.9% (39/392)	Improved	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%	62.2% (92/148)	Declined	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

Ref	Definition	Good Perf is	2011-12 PERFORMANCE	LOCAL TARGET	2012-13 PERFORMANCE (unvalidated)	Direction of Travel*	RAG STATUS**	Latest Benchmarking Data		Service Commentary
								Statistical Neighbour Average	National Average	
										working with providers to tackle this issue.
NI 64	Child protection plans lasting 2 years or more	LOW	2.2% (8/362)	4.0%	3.8% (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%	16.3% (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.
NI 67	Percentage of child protection cases which were reviewed within required timescales	HIGH	100% (335/335)	99.0%	100% (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% (4614/4913)	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

Attendance of RLSCB Members in 2012 – 2013 (including Development Days and Extraordinary Meetings)			
		Total Attendance (inc deputies)	Attendance as %
Name	Job Title and Agency		
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, CAF/CASS	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%

Appendix 3

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

* 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 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

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