

# Agenda

## Children and Families Overview and Scrutiny Panel

**Wednesday, 31 August 2016, 10.00 am**  
**County Hall, Worcester**

All County Councillors are invited to attend and participate

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## DISCLOSING INTERESTS

There are now 2 types of interests:  
**'Disclosable pecuniary interests'** and **'other disclosable interests'**

### WHAT IS A 'DISCLOSABLE PECUNIARY INTEREST' (DPI)?

- Any **employment**, office, trade or vocation carried on for profit or gain
- **Sponsorship** by a 3<sup>rd</sup> party of your member or election expenses
- Any **contract** for goods, services or works between the Council and you, a firm where you are a partner/director, or company in which you hold shares
- Interests in **land** in Worcestershire (including licence to occupy for a month or longer)
- **Shares** etc (with either a total nominal value above £25,000 or 1% of the total issued share capital) in companies with a place of business or land in Worcestershire.

**NB Your DPIs include the interests of your spouse/partner as well as you**

### WHAT MUST I DO WITH A DPI?

- **Register** it within 28 days and
- **Declare** it where you have a DPI in a matter at a particular meeting
  - you must **not participate** and you **must withdraw**.

**NB It is a criminal offence to participate in matters in which you have a DPI**

### WHAT ABOUT 'OTHER DISCLOSABLE INTERESTS'?

- No need to register them but
- You must **declare** them at a particular meeting where:  
You/your family/person or body with whom you are associated have a **pecuniary interest** in or **close connection** with the matter under discussion.

### WHAT ABOUT MEMBERSHIP OF ANOTHER AUTHORITY OR PUBLIC BODY?

You will not normally even need to declare this as an interest. The only exception is where the conflict of interest is so significant it is seen as likely to prejudice your judgement of the public interest.

### DO I HAVE TO WITHDRAW IF I HAVE A DISCLOSABLE INTEREST WHICH ISN'T A DPI?

Not normally. You must withdraw only if it:

- affects your **pecuniary interests OR** relates to a **planning or regulatory** matter
- **AND** it is seen as likely to **prejudice your judgement** of the public interest.

### DON'T FORGET

- If you have a disclosable interest at a meeting you must **disclose both its existence and nature** – 'as noted/recorded' is insufficient
- **Declarations must relate to specific business** on the agenda
  - General scattergun declarations are not needed and achieve little
- Breaches of most of the **DPI provisions** are now **criminal offences** which may be referred to the police which can on conviction by a court lead to fines up to £5,000 and disqualification up to 5 years
- Formal **dispensation** in respect of interests can be sought in appropriate cases.

## **Children and Families Overview and Scrutiny Panel**

### **Wednesday, 31 August 2016, 10.00 am, County Hall, Worcester**

#### **Membership**

##### **Councillors:**

Ms L R Duffy (Chairman), Mrs F M Oborski (Vice Chairman), Mr R W Banks, Mr P Denham, Mrs J L M A Griffiths, Mr I Hopwood and Mr J W R Thomas

##### **Co-opted Church Representatives (for education matters)**

Bryan Allbut (Church of England) and Francis Mohan (Roman Catholic)

##### **Parent Governor Representatives (for education matters)**

Ms C Richardson (Parent Governor) and Vacancy

#### **Agenda**

<b>Item No</b>	<b>Subject</b>	<b>Page No</b>
1	<b>Apologies and Welcome</b>	
2	<b>Declaration of Interest and of any Party Whip</b>	
3	<b>Public Participation</b> Members of the public wishing to take part should notify the Head of Legal and Democratic Services in writing or by e-mail indicating the nature and content of their proposed participation no later than 9.00am on the working day before the meeting (in this case 30 August 2016). Enquiries can be made through the telephone number/e-mail address below.	
4	<b>Confirmation of the Minutes of the Previous Meeting</b> (previously circulated)	
5	<b>Worcestershire Safeguarding Children Board Annual Report 2015-16</b>	1 - 66
6	<b>The Provision of Effective Prevention Services for Children and Young People Including Optimising the Use of Children's Centres Buildings</b>	67 - 88

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Date of Issue: Tuesday, 23 August 2016

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## **CHILDREN AND FAMILIES OVERVIEW AND SCRUTINY PANEL**

**31 AUGUST 2016**

### **WORCESTERSHIRE SAFEGUARDING CHILDREN BOARD ANNUAL REPORT 2015-16**

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#### **Summary**

1. Derek Benson, recently appointed Independent Chair of the Worcestershire Safeguarding Children Board (WSCB), has been invited to present the Worcestershire Safeguarding Children Board Annual Report 2015-16 (attached as Appendix 1).

#### **Background**

2. The Independent Chair of the Worcestershire Safeguarding Children Board is responsible for publishing an annual report that provides a public assessment of the effectiveness of child safeguarding arrangements in Worcestershire. The report also recognises achievements and is realistic about the challenges that remain.

3. The report is made publicly available through publication on the Board's website. In addition, it is formally presented to the Chief Executive and Leader of the County Council, to the Health and Well-Being Board and to Cabinet. It is sent to Worcestershire's Police and Crime Commissioner, to the respective chairs of the Worcestershire Safeguarding Adults Board and the Safer Communities Board, and it is circulated to lead officers in key partner agencies.

4. In September 2015 Diana Fulbrook, then Independent Chair, informed the Panel that WSCB could not be assured of the effectiveness of local arrangements in respect of children in the child protection system. The quality and consistency of frontline basic practice needed improvement and more work was required in particular areas to ensure children are safe in Worcestershire.

#### **Key points from the WSCB Annual Report 2015/16**

5. During 2015/16 Worcestershire Safeguarding Children Board had a particular focus on a number of priorities including:

- Implementation of the Board's Child Sexual Exploitation Strategy
- Early Help
- Integrated Family Front Door (incorporating the Multi-Agency Safeguarding Hub ethos)
- Children's Social Care 'Back to Basics' Improvement Programme

6. The Board can provide assurance that implementation of the Child Sexual Exploitation (CSE) Strategy will continue to be a priority into 2016/17. Partner agencies have shown a high level of engagement in developing the Strategy, and also in terms of owning the supporting action plan. During the year there was an increase in the number of children being identified as being vulnerable to or suffering sexual exploitation, however it is too early for the Board to be fully assured about the ability of the system to respond robustly and consistently to CSE concerns in Worcestershire.

7. The Board has monitored the refresh of the Early Help Strategy '*Prevention and Intervention for Children, Young People and Families*' which includes a plan to commission a Starting Well service to be implemented by March 2019. The demand for Early Help Assessments has continued to increase but has not led to a corresponding reduction in referrals to Children's Social Care, placing yet more demand on the system. The Board is assured that local authority commissioned Early Help providers are undertaking effective work with families, but is concerned that demand for commissioned services currently outweighs capacity raising questions about the extent to which commissioned Early Help services are sufficiently targeted. As part of the wider Early Help offer universal services are required to respond to identified need by working directly with families to deliver support services to reduce escalation of need or risk.

8. This year has continued to see further pressure on the Children's Social Care system with increases in referrals, numbers of looked after children and numbers of children with child protection plans. The Board has received regular reports on the significant work undertaken during the year to develop the Integrated Family Front Door and the new Levels of Need document (Thresholds Guidance) was approved by the Board at the end of 2015. It is too early yet to have a sense of the impact of these changes but it is anticipated that children's social care services and commissioned Early Help services will be more effectively targeted at those children and families where need and risk are highest. The Board recognises the importance of partner agencies playing their full part in working together to offer support services to children and families, to share timely information and to make good quality referrals to Children's Social Care.

9. The Board has been sighted on the Children's Social Care 'Back to Basics' Improvement Programme during the year. Whilst a number of practice improvements have been noted, the pace of improvement has been slower than had been hoped for. In light of the issues outlined in this report and continuing evidence that the quality of social work practice remains inconsistent the Board cannot yet provide full assurance about the effectiveness of help and protection services.

10. From the information provided the Board has identified risks in relation to:

- a) Completion within time scale of return interviews when children go missing,
- b) Waiting times for treatment from CAMHS
- c) Completion rates for Looked After Children (LAC) health reviews.

Some improvements have been noted during the year and the Board will continue to closely monitor these issues.

11. No Serious Case Reviews were initiated during the year though a number of cases were brought to the Board for consideration.

12. The Child Death Overview Panel in Worcestershire found that less than a third of deaths had modifiable factors. Cumulative data in respect of babies whose deaths have been classified as Sudden Infant Death Syndrome (SIDS) suggests that smoking and co-sleeping are often significant factors. In the deaths of unborn or extremely young babies factors such as maternal obesity, smoking, alcohol and other environmental factors are often present in some combination. Stronger links with Public Health are developing and a communications initiative for the public will be considered in the coming year.

13. The Board is pleased to note some evidence of practice improvements from its Multi Agency Case File Audits (MACFAs), particularly in respect of information sharing in Early Help Assessments, application of the Think Family approach and inter-agency working where there are concerns about Child Sexual Exploitation. There is also evidence, however, that multi-agency practice is not yet consistent in all areas.

14. The interim report on the Section 11 Audit presented to the Board in March 2016 indicated good compliance by partner agencies with their safeguarding duties and a strong commitment across the partnership to safeguarding children. Agencies are also reporting an improvement in listening to their service users to develop services. Assurance has been provided about the use of flagging systems across the partnership to raise alerts about risk factors in families. Arrangements for safeguarding supervision for practitioners are in place and findings were shared with managers for further action to be taken where necessary.

## **Conclusion**

15. The Board concluded that the body of evidence from data, audits, reports and learning during 2015/16 demonstrates that there is a strong commitment to safeguarding children across the WSCB partnership and that safeguarding arrangements are in place. Demand for services across the whole system continues to increase and, whilst recognising that improvements have been made to some aspects of frontline social work practice, other practice improvements have not been achieved as quickly as had been hoped at the start of the year.

16. The Board is assured that strategies are in place to improve frontline practice, however it cannot yet be assured about the robustness of the child protection system and this remains a risk. Further assurance is required as to the effectiveness of the wider Early Help offer and whether it is sufficiently targeted, albeit it is recognised that the quality of provision by local authority commissioned providers is good. It is clearly important that children and families receive the right services at the right time. The impact of the Integrated Family Front Door and the revised Levels of Need guidance will be monitored, as will the need for all partners to play their full part in the provision of support services to children and families at the earliest opportunity to prevent escalation of need and risk.

17. Assurance will continue to be sought from partner agencies during the coming year as outlined in the body of this report.

18. The Board recognises that these are challenging times for partner agencies, many of whom are facing reductions in resourcing. In this climate of competing demands, however, there is evidence of some partners investing in their safeguarding services which is indicative of the strong commitment across the WSCB partnership to prioritise the protection of children.

### **Purpose of the Meeting**

The Children and Families Overview and Scrutiny Panel is asked to:

- consider the information in the report
- determine whether it would wish to carry out any further scrutiny, and
- agree whether it would wish to make any comments to the Cabinet Member with Responsibility for Children, Families and Communities

### **Supporting Information**

- Appendix 1 - Worcestershire safeguarding Children Board Annual Report 2015/16

### **Contact Points**

#### County Council Contact Points

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Worcestershire Hub: 01905 765765

Email: [worcestershirehub@worcestershire.gov.uk](mailto:worcestershirehub@worcestershire.gov.uk)

#### Specific Contact Points for this report

Alyson Grice/Samantha Morris, Overview and Scrutiny Officers 01905 844962/844963

Email: [scrutiny@worcestershire.gov.uk](mailto:scrutiny@worcestershire.gov.uk)

### **Background Papers**

In the opinion of the proper officer (in this case the Director of Children, Families and Communities) there are no background papers relating to the subject matter of this report.



# Worcestershire Safeguarding Children Board

## Annual Report 2015/16



Find out more online:

[www.worcestershire.gov.uk/safeguardingchildren](http://www.worcestershire.gov.uk/safeguardingchildren)

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## Foreword by Independent Chair

It is my pleasure to present the Worcestershire Safeguarding Children Board's (WSCB) Annual Report for 2015/16. The Report provides a summary and assessment of the effectiveness of child safeguarding and the promotion of the welfare of children in Worcestershire.

First, I must acknowledge the work of my predecessor, Diana Fulbrook, who was the Chair of the WSCB until the end of March. This Report details Diana's work in leading the Board throughout the past year as well as the foundations she put in place over a number of years. It is incumbent on the Board to now continue that commitment to children and young people in Worcestershire.

The purpose of a Local Safeguarding Children Board is to co-ordinate safeguarding arrangements across agencies and to ensure these are effective. As in previous years the Report will be made publicly available on the Board's website, and will be formally submitted to the Chief Executive and Leader of the County Council. The Chair will present it to the County Council's Children and Young People's Overview and Scrutiny panel, to the Council's Cabinet and to the Health and Well-Being Board. It will also be sent to the Police and Crime Commissioner and to key partnerships. Board members will ensure that their own agencies and relevant Boards have access to the Report. The Report is therefore an important mechanism for providing assurance to key governance bodies about the importance and effectiveness of safeguarding children in Worcestershire.

The Annual Report covers the local and national context, governance and accountability arrangements, priorities, achievements and learning, and concludes with a formal summary statement about the sufficiency of arrangements to identify children in need of help and protection, and ensure the quality of services offered to those children.

The continued effects of austerity impacted on partner agencies over the last year and underlined the importance of working together effectively. Going forward the WSCB will seek to hold those partners to account in terms of their commitment to collaboration and cooperation. The pressures on the various agencies are recognised, be that caseloads, staff turnover or increasing public scrutiny and expectation. The Board notes, however, that Worcestershire County Council put an additional £5m into children's safeguarding bringing it to an additional £11m over the last 3 years.

Issues reported in previous years remain in the forefront of the WSCB's consideration; Child Sexual Exploitation (CSE) has been subject to significant attention through the year and will continue to be a major priority for the year ahead and potentially beyond.

Until recently referrals to Children's Social Care and commissioned Early Help services were being made to the Access Centre and Early Help Hub. During the course of the year the Board has been sighted on work undertaken to develop a new 'Integrated Family Front Door' which will embed the Multi Agency Safeguarding Hub (MASH) ethos of co-located agencies to support early information sharing and decision making. WSCB will continue to closely monitor developments as the new way of working is embedded and will want to look at its effectiveness. The publication of the report into the review of Local Safeguarding Children Boards commissioned by the DFE in December 2015 and its recommendations will undoubtedly impact

on the Board through 2016/17. While further information from government is awaited, it cannot be allowed to slow the development of the WSCB to enhance the safeguarding of children in the county. The supporting structure introduced last year will undergo refinement to improve the flow and exchange of information, prioritise activity and ensure there are outcomes that improve frontline practice across the agencies

This report provides an account of the work done over the past year but perhaps more importantly, highlights the continuing challenges facing the WSCB and its member agencies. I am confident that the Board, its members and the people they represent are fully committed to safeguarding children and young people in Worcestershire. I would wish to thank each and every one for their efforts to date but at the same time reaffirm the WSCB's intent to drive further improvements in 2016/17 and thereafter.

A handwritten signature in black ink, appearing to read 'Derek Benson', with a long horizontal line extending to the right.

Derek Benson  
Independent Chair: June 2016

## Executive Summary

During 2015/16 Worcestershire Safeguarding Children Board had a particular focus on a number of priorities including:

- Implementation of the Board's Child Sexual Exploitation Strategy
- Early Help
- Integrated Family Front Door (incorporating the Multi-Agency Safeguarding Hub ethos)
- Children's Social Care 'Back to Basics' Improvement Programme

### **Child Sexual Exploitation Strategy**

The Board can provide assurance that implementation of the Child Sexual Exploitation (CSE) Strategy will continue to be a priority into 2016/17. Partner agencies have shown a high level of engagement in developing the Strategy, and also in terms of owning the supporting action plan. During the year there was an increase in the number of children being identified as being vulnerable to or suffering sexual exploitation, however it is too early for the Board to be fully assured about the ability of the system to respond robustly and consistently to CSE concerns in Worcestershire.

### **Early Help**

The Board has monitored the refresh of the Early Help Strategy '*Prevention and Intervention for Children, Young People and Families*' which includes a plan to commission a Starting Well service to be implemented by March 2019. The demand for Early Help Assessments has continued to increase but has not led to a corresponding reduction in referrals to Children's Social Care, placing yet more demand on the system. The Board is assured that local authority commissioned Early Help providers are undertaking effective work with families, but is concerned that demand for commissioned services currently outweighs capacity raising questions about the extent to which commissioned Early Help services are sufficiently targeted. As part of the wider Early Help offer universal services are required to respond to identified need by working directly with families to deliver support services to reduce escalation of need or risk. The Board will continue to identify mechanisms for evaluating effectiveness of the wider Early Help offer in Worcestershire.

### **Integrated Family Front Door**

This year has continued to see further pressure on the social care system with increases in referrals, numbers of looked after children and numbers of children with child protection plans. The Board has received regular reports on the significant work undertaken during the year to develop the Integrated Family Front Door and the new Levels of Need document (Thresholds Guidance) was approved by the Board at the end of 2015. It is too early yet to have a sense of the impact of these changes but it is anticipated that children's social care services and commissioned Early Help services will be more effectively targeted at those children and families where need and risk are highest. The Board recognises the role of partner agencies playing their full part in working together to offer support services to children and families, to share timely information and to make good quality referrals to Children's Social Care.

### **'Back To Basics' Improvement Programme**

The Board has been sighted on the Children's Social Care 'Back to Basics' Improvement Programme during the year. Whilst a number of practice improvements have been noted, the pace of improvement has been slower than had been hoped for. In light of the issues outlined in this report and continuing evidence that the quality of social work practice remains inconsistent the Board cannot yet provide full assurance about the effectiveness of help and protection services. The specific areas about which assurance will be sought in the coming year are outlined within the body of this report.

### **WSCB Learning & Improvement Framework**

The Board has a range of processes in place for consolidating learning which include Child Death Reviews, Serious Case Reviews, case reviews, Multi Agency Case File Audits and Safeguarding Conversations. The Board recognises its need to develop and improve its Learning and Improvement Framework to ensure that findings from audits and case reviews are not just disseminated, but are used by partner agencies to improve frontline practice.

### **Analysis of information produced by partner agencies**

From the information provided the Board has identified risks in relation to:

- Completion within time scale of return interviews when children go missing,
- Waiting times for treatment from CAMHS
- Completion rates for Looked After Children (LAC) health reviews.

Some improvements have been noted during the year and the Board will continue to closely monitor these issues.

### **Serious Case Reviews**

No Serious Case Reviews were initiated during the year though a number of cases were brought to the Board for consideration.

### **Child Death Reviews**

The Child Death Overview Panel in Worcestershire found that less than a third of deaths had modifiable factors. Cumulative data in respect of babies whose deaths have been classified as Sudden Infant Death Syndrome (SIDS) suggests that smoking and co-sleeping are often significant factors. In the deaths of unborn or extremely young babies factors such as maternal obesity, smoking, alcohol and other environmental factors are often present in some combination. Stronger links with Public Health are developing and a communications initiative for the public will be considered in the coming year.

### **Multi-Agency Case File Audits (MACFAs)**

The Board is pleased to note some evidence of practice improvements from the MACFAs, particularly in respect of information sharing in Early Help Assessments, application of the Think Family approach and inter-agency working where there are concerns about Child Sexual Exploitation. There is also evidence, however, that multi-agency practice is not yet consistent in all areas.

Learning from MACFAs undertaken during the year has informed a number of the Board's priority work streams for 2016/17:

- Voice of the Child/child's lived experience (limited evidence of the child's views being used to inform assessments or decisions)
- Review of safeguarding arrangements for disabled children (some evidence of delay where there were concerns about neglect of disabled children)
- Professional Curiosity and Think Family (just under half of all cases reviewed had a combination of domestic abuse, parental mental ill health and parental drug/alcohol use but this was not always known to professionals at the time)
- Child Sexual Exploitation and missing children (in those cases reviewed multi-agency safeguarding practice was judged 'inadequate' or 'requiring improvement')

### **Audits**

The interim report on the Section 11 Audit presented to the Board in March 2016 indicated good compliance by partner agencies with their safeguarding duties and a strong commitment across the partnership to safeguarding children. Agencies are also reporting an improvement in listening to their service users to develop services. Assurance has been provided about the use of flagging systems across the partnership to raise alerts about risk factors in families. Arrangements for safeguarding supervision for practitioners are in place and findings were shared with managers for further action to be taken where necessary.

### **Consultation with young people and parents**

The Board is pleased to report that the views of young people and parents informed the Board's decisions about its strategic priorities for 2016/17. The Youth Advisory Board for Safeguarding (YABS), a group of young people with experience of services, presented the views of 2445 young people to Board members at their Development Day in January 2016.

### **Conclusion**

The Board is pleased to report that during 2015/16 it fulfilled its statutory functions. A new structure has been implemented which has enabled clearer oversight from the Board to the sub groups. Funding has been sustained at the current level for a number of years in spite of competing financial pressures for the partner agencies.

The Board concluded that the body of evidence from data, audits, reports and learning during 2015/16 demonstrates that there is a strong commitment to safeguarding children across the Worcestershire partnership and that safeguarding arrangements are in place. Demand for services across the whole system continues to increase and, whilst recognising that improvements have been made to some aspects of frontline social work practice, other practice improvements have not been achieved as quickly as had been hoped at the start of the year.

Whilst recognising that strategies are in place to improve frontline practice, the Board cannot yet be assured about the robustness of the child protection system and this remains a risk. Further assurance is required as to the effectiveness of the wider Early Help offer and whether it is sufficiently targeted, albeit it is recognised that the quality of provision by local authority

commissioned providers is good. It is clearly important that children and families receive the right services at the right time. The impact of the Integrated Family Front Door and the revised Levels of Need guidance will be monitored, as will the need for all partners to play their full part in the provision of support services to children and families at the earliest opportunity to prevent escalation of need and risk.

The Board recognises that these are challenging times for partner agencies, many of whom are facing reductions in resourcing. In this climate of competing demands, however, there is evidence of some partners investing in their safeguarding services which is indicative of the strong commitment across the WSCB partnership to prioritise the protection of children.



## Section 1. Introduction

### 1.1. Purpose of the Annual Report

Statutory legislation requires the Independent Chair of the Safeguarding Board to publish an annual report on the effectiveness of child safeguarding and promoting the welfare of children in Worcestershire. This report relates to the preceding financial year. The report will be submitted to the Chief Executive, Leader of the Council, the local Police and Crime Commissioner and the chair of the Health and Well-Being Board.

The report aims to provide a rigorous and transparent assessment of the performance and effectiveness of local services. It identifies areas of weakness, the causes of those weaknesses and the action being taken to address them as well as other proposals for action.

### 1.2. Role of the Worcestershire Safeguarding Children Board

The Local Safeguarding Children Board is the key statutory mechanism for agreeing how partner organisations in the local area will co-operate to safeguard and promote the welfare of children, and for ensuring the effectiveness of what they do. Section 13 of the Children Act 2004 required each local authority to establish a Local Safeguarding Children Board by 1 April 2006. Worcestershire Safeguarding Children Board has been in existence for a number of years now and is continually developing in order to fulfil its role within the context of a constantly changing and challenging safeguarding landscape. WSCB complies with the requirements for Local Safeguarding Children Boards set out in the LSCB Regulations and in [Working Together \(2015\)](#)

### 1.3 Vision Statement

All children and young people in Worcestershire are safe and thriving

### 1.4 Mission Statement

*Working in partnership to keep all children and young people safe and thriving within an environment where safeguarding is everybody's business and intervention and support is timely and right for individuals and families.*

### 1.5 WSCB Values

- Respect for children, young people and their families
- Making a positive difference to the lives of children and young people

- Working together in partnership
- Collective and mutual challenge between partners to keep children safe
- Involving communities at a local level
- Valuing and responding to diversity

## 1.6 LSCB Membership

Membership of LSCB is statutory for a number of partners as outlined in [Working Together \(2015\)](#). A full list of member partner agencies can be found in [Appendix 3](#). A summary of the Board's governance and accountability arrangements, including the Board's end of year financial statement for 2015/16, is located in [Appendix 4](#).

## 1.7 Alan Wood Review

In December 2015 the Department for Education (DfE) announced it had commissioned a review of Local Safeguarding Children Boards to be led by Alan Wood. At the time of writing a [Government Response to the Wood Review](#) had just been published and further detail is awaited about changes to statutory guidance. During 2016/17 the Board will consider the implications of the review.

This report aims to provide a rigorous and transparent assessment of the performance and effectiveness of local services. It identifies areas of weakness, the causes of those weaknesses and the action being taken to address them as well as other proposals for action.

The Board has taken full account of the key relevant partners' strategies in its own planning processes. The protocol with the Health and Well Being Board and Worcestershire Safeguarding Adults Board has been reviewed.

Partners continue to fund the Board in order that it can fulfill its statutory responsibilities and it should be noted that funding has been sustained at the current level for a number of years in spite of competing financial pressures for the partner agencies. In addition, the decision was taken this year to establish a separate Serious Case Reviews fund which will be implemented next year.

The new Board structure has enabled clearer oversight from the Board to the sub groups and further changes will be made in 2016/17.

## Section 2. Priority Work Streams

### 2.1 Board Priorities and activities

In 2015/16 WSCB worked to a three year rolling Strategic Plan that identified three strategic priorities.



Figure 1

### 2.2 Specific work streams to support robust safeguarding practice this year

#### 2.2.1 Child Sexual Exploitation

Worcestershire Safeguarding Children Board has continued the commitment to tackling Child Sexual Exploitation (CSE) and recognises that this can only be achieved by all partners working effectively together. The Board also recognises that CSE is a community safety issue and as such everyone must work together to make use of community safety tactics to keep children safe.

The Board's commitment is set out in its CSE Strategy (2015 – 2017). The supporting Action Plan continued to be implemented during the year, overseen by a strategic group made up of Board members. CSE was addressed at every Board meeting in 2015/16.

Within the CSE Strategy there are four clear objectives:

- **Prevention and Education**

WSCB continues to work towards public awareness of sexual exploitation and has this year taken a multi-agency approach to developing a specific prevention approach for delivery in schools to governors, staff, parents and pupils which focusses on healthy relationships and sexual exploitation. This 'whole school' approach will be launched across Worcestershire schools during 2016/17 and includes links to a range of practical resources. The Board works with partners to ensure that front line practitioners receive training to raise awareness, and that the training being delivered is effective in preventing and identifying CSE. The Board continues to support national initiatives such as the annual CSE Awareness Day with communications aimed at ensuring that the message reaches the widest audience possible across Worcestershire. Two full time specialist CSE workers are now employed by Children's Social Care and they provide support to other practitioners. From June 2016 two Barnardo's workers will be working in Worcestershire to provide direct support to children.

- **Recognition and Identification**

Partner agencies continue to work hard to identify vulnerable children who may be at risk of sexual exploitation requiring support services or those who are actually suffering sexual exploitation and require protection. Over the previous year it has been recognised that there is an improvement in our understanding of CSE in Worcestershire, however the Board acknowledges that there must never be an assumption that it has a complete picture. The continuing work has reinforced a view that within Worcestershire there is no established gang or organised crime abuse, or any particular minority ethnic group being targeted. Board partners remain alert for any information that might lead to a change in this view. Worcestershire reflects the national trend where online sexual exploitation continues to emerge as a threat to children. The aim is to develop 'professional curiosity' amongst those who work with children to ensure they look for and act upon signs of potential CSE. Training content has been reviewed to ensure this is highlighted. WSCB also wants to improve the ability of practitioners to identify vulnerable children who have the potential to become perpetrators. All of these aims have to be supported by the effective sharing of information between partner agencies.

- **Intervention and Support**

The Board has been at the centre of developing ways in which CSE concerns are reported, properly assessed and then, on the basis of that assessment, appropriate support provided. We are working towards developing different ways of supporting victims and their families to meet their individual needs. There is also work being undertaken within the community to ensure that the services children and young people use and the places they visit are safe from those who would seek to do them harm. Poor performance regarding the completion of return interviews for missing children has been identified. The agency who were undertaking this task has been de-commissioned and staff in Children's Social Care are now completing the return interviews. Early indications are that there has been an improvement in completion rates; however the Board will continue to seek further assurance about completion rates, reasons for non-

completion, completion rates within time scale, and the quality of the return interviews completed.

- **Pursue and Disrupt**

WSCB recognises that those who seek to exploit children will travel from other areas to do so and it is working hard to strengthen cross border arrangements and information sharing with neighbouring authorities. Partners within Worcestershire meet together each day to share information which allows emerging trends and patterns to be identified, and the appropriate disruption activity to be put in place. Recognising that the nature of the threat of CSE can change over time WSCB will continue to ensure that there is a full understanding of the problem and where those threats lie. The Board will promote the full use of the law to protect children and bring offenders to justice.

The Board's governance arrangements in respect of CSE have been simplified and the need for further streamlining will be considered as the Board moves towards further implementation of the CSE Strategy. The Board will continue to have a role in seeking further assurance about the robustness of arrangements. A self-assessment audit is to be rolled out to evaluate the effectiveness of Board partner agencies' responses to Child Sexual Exploitation. The outcome will be reported in next year's annual report.

Issues which have been addressed as part of the WSCB CSE Strategy include:

- Clarification about the need for information to be shared with the host local authority for Looked After Children placed out of area about any CSE concerns
- Pharmacies have been provided with a checklist to be used to identify those young people at risk of CSE
- Assurance has been received that all children aged over ten years and known to Children's Social Care have been screened for risk of CSE
- All carriage and private hire drivers/operators have received an information leaflet explaining their responsibilities in respect of CSE and the guidance has been incorporated into the new/renewal application processes
- Awareness raising training has been provided for all Councillors who sit on the Licensing Committee
- A dedicated police online CSE team has been in operation since January 2016 to tackle online offending and to bring perpetrators to justice

### 2.2.2 'Toxic Mix'

Some of the most vulnerable children are those affected by a combination of risk factors. The term 'Toxic Mix' generally refers to or applies when domestic abuse, parental drug and/or alcohol use and parental mental ill health occur in combination, acknowledging that other factors can also increase risk to children's welfare and safety. An analysis of seven MACFAs undertaken during 2014-16 revealed that the combination of domestic abuse, parental mental ill

health and parental drug/alcohol use featured in 42% of the cases reviewed and that this had not always been known by the agencies involved at the time.

A key learning point from MACFAs is that 'professional curiosity' must be routinely exercised to avoid practitioners working in 'siloes' and assessments based on partial information. This requires practitioners to consider carefully the questions to ask of family members and of other professionals in order to build up an accurate picture of needs and risk within the family. The Board has agreed that it will promote 'professional curiosity' and the 'Think Family' approach which requires practitioners to consider the implications of individual family member's needs on parenting capacity. These approaches both support the identification of children affected by parental risk factors, especially when these are present in combination, such as the 'Toxic Mix'. This is an area of development work which would benefit from being undertaken in collaboration with other partnership Boards and will be taken forward in 2016/17.

### 2.2.3 Emotional Wellbeing

In response to a WSCB survey on safeguarding priorities secondary school pupils have again identified, as they did last year, that young people's emotional health is a high priority for them. During the year the Board has been sighted on the CAMHS Transformation Plan which sets out a refreshed pathway for responding to young people's mental health needs, including lower level support at an earlier stage. Once implemented, the Board will have a role in communicating the pathway to partner agencies and in seeking assurance about its impact.

### 2.2.4 Healthy Relationships

An audit commissioned by Worcestershire Forum Against Domestic Abuse and Sexual Violence (WFADA & SV) into Personal, Social, Health and Economic (PSHE) curriculum input on healthy relationships in Worcestershire schools revealed a picture of inconsistent practice. WSCB subsequently led on a piece of multi-agency work to develop a 'whole school' approach to healthy relationships which includes direct reference to inappropriate sexually exploitative relationships. There is a plan to embed the whole school approach widely across Worcestershire schools. It includes programmes for staff (including governors), parents and pupils. Following a period of implementation the Board will audit the impact of this approach.

## 2.3 Activities undertaken by the Board to support its priorities in 2015/16

- Review of relevant policies and procedures at local and regional level
- Review of the prevalence of Toxic Mix factors in MACFAs, review of core training content and analysis of take up rates for e-learning modules related to the Toxic Mix
- CSE Strategy and action plan developed with implementation ongoing
- CSE Position Statement produced
- Development of a framework for a 'whole school' approach to CSE prevention to be embedded across Worcestershire schools

- Learning and Improvement Framework updated
- Development of Female Genital Mutilation problem profile
- Joint event held with Worcestershire Safeguarding Adults Board to identify gaps in transition for older adolescents/young adults
- Re-launch of neglect guidance
- Consideration given to the Board's responsibilities in relation to the Prevent Strategy and the identification of any gaps or issues related to staff training
- Formal representation made to Department for Education about the vulnerability of small numbers of electively home educated children
- Sessions held with Board members to identify any gaps in the wider safeguarding system
- Development day incorporating presentation of survey responses from 2445 young people

## 2.4 Single agency activities to support Board priorities

The WSCB Annual Report 2014/15 identified specific challenges for each partner agency during the coming year. Feedback on the actions undertaken by partners include the following examples:

- Children's Social Care has led on the co-location of partner agencies as part of the ongoing development of the Integrated Family Front Door which is the Worcestershire strategy to embed a MASH ethos
- District Councils now have representation on all Board sub groups and safeguarding raising awareness training is in place for the whole workforce and Councillors
- WCC Early Help presentation to Monitoring Effectiveness Sub-Group (MEG) outlining the systems in place to monitor the effectiveness of locally commissioned Early Help services with acknowledgement that not all early interventions can be monitored for effectiveness in the same way.
- Public Health Commissioners published a Starting Well tender for Universal Prevention 0 – 19 services including Public Health Nursing and Early Help. The tender had a focus on targeting services to children and families dependent on need and living in the areas of highest deprivation. This has subsequently not been awarded. Existing contracts are being extended with a view to a new service specification being agreed by October 2016 and fully implemented by March 2019.
- Housing providers circulate the WSCB newsletter and provide regular updates to Worcestershire Strategic Housing Partnership. A new Youth Board has been set up by Fortis Living
- National Probation Service (NPS) and Community Rehabilitation Company (CRC) continue to be fully engaged as Board members and have systems in place to assess safeguarding risks.

- West Mercia Police have incorporated specialist Protecting Vulnerable People teams within a single model and introduced a new 'Pathfinder' model for expediting investigations.
- Children's Social Care has implemented its 'Back to Basics' Improvement Programme to improve frontline social work practice (following LGA Peer Review undertaken in April 2015).

A full response to challenges made to partner agencies in the 2014/15 Annual Report can be found in [Appendix 6](#).

## 2.5 What difference have activities made?

- During the year there has been movement towards the implementation of the Integrated Family Front Door with co-located partner agencies leading to better information sharing
- The Board has gained better insight into the Children's Social Care improvement journey through its active participation in the WCC 'Back to Basics' Safeguarding Improvement Board
- Increase in referrals of children at risk of or suffering from Child Sexual Exploitation indicative of increased awareness
- Recognition of the need to promote 'professional curiosity' across the partnership to support robust safeguarding practice
- Voice of the Child has informed the Board's priorities
- Clarification that only a small number of adult victims of FGM have been identified in Worcestershire whilst awareness has been raised about risks to children
- 'Whole school' approach to healthy relationships and sexual exploitation to be embedded across Worcestershire schools

There has been a particular focus this year on the implementation of the Child Sexual Exploitation Strategy. There has been a high level of engagement by partner agencies in the development of the Strategy and through ownership of the supporting action plan. The Board notes the increase in the number of children being identified as being at risk of sexual exploitation which is indicative of increased awareness across the partnership. It is also pleased to report the progress made in respect of those initiatives listed on page 12. A number of new systems and processes, particularly in relation to the Integrated Family Front Door, are still being introduced and it is too early for the Board to be fully assured about the ability of the system at this point in time to respond robustly and consistently to CSE concerns in Worcestershire. The Board will continue to oversee the full implementation of the CSE Strategy and monitor its impact over the coming year.

The Board acknowledges that children and young people affected by a combination of the 'Toxic Mix' factors are particularly vulnerable and during the coming year it will be promoting 'Professional Curiosity' and the 'Think Family' approach, seeking to engage other partnership Boards in collaborative approaches where appropriate.

The Board will support the embedding of the Emotional Wellbeing Pathway and also will take the lead on embedding the 'whole school' approach to sexual exploitation and healthy relationships across Worcestershire schools in 2016/17.



## Section 3. Performance, Effectiveness and Improvement

### 3.1 Monitoring Effectiveness

Regulation 5 of the LSCB Regulations sets out that Safeguarding Boards should monitor and evaluate the effectiveness of what is done by the authority and their Board partners individually and collectively to safeguard and promote the welfare of children. This year a specific sub group has been established whose aim is to monitor effectiveness based on evidence provided in the framework below. This group is chaired by a Board member enabling efficient handling of any issues that arise.

The WSCB evidence base for monitoring the effectiveness of safeguarding arrangements in Worcestershire for children and young people during this period has included a combination of:

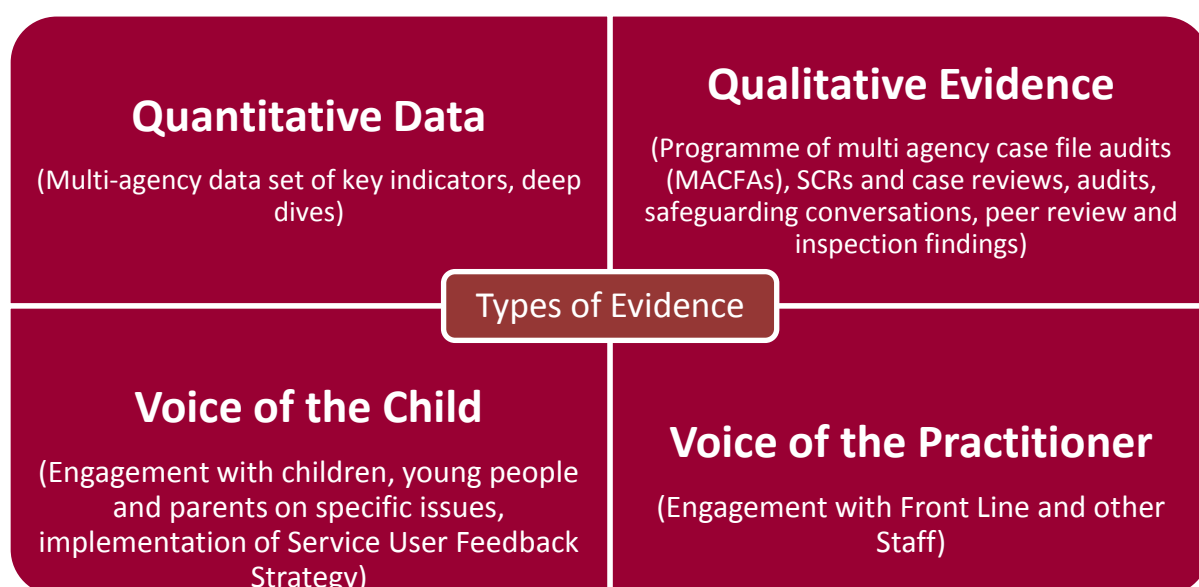


Figure 2

#### 3.1.1 Quantitative Data

Quantitative data continues to be scrutinised through the Board's Performance Analysis Group. Data is regularly reviewed with group members looking for trends or emergent patterns which lead to possible hypotheses or questions about aspects of multi-agency working. The Monitoring Effectiveness Group (MEG) makes a decision about what level of assurance is required and formally requests information from partner agencies on behalf of the Board. Data is also used at the WSCB Development Day to support the Board's decision making about its strategic priorities. Headlines from the data pertaining to children in the system are contained in the following table:

<p>Early Help</p>	<ul style="list-style-type: none"> <li>• The percentage of Early Help Notifications received from schools rose from 19% in 2013/14 to 27% in 2014/15 and remained at 24% in 2015/16</li> <li>• The increase in Early Help Assessments since 2013/14 has not led to a decrease in the referral rate to Children's Social Care which has continued to rise. The Board will continue to monitor the impact of Early Help Assessments on referral rates.</li> </ul>
<p>Referrals to Children's Social Care</p>	<ul style="list-style-type: none"> <li>• The number of referrals to Children's Social Care continues to increase year on year. This may be due in part to changes in procedure, but also is indicative of increasing demand for social care services, including assessments. This increasing demand for services is also indicated by the higher percentage of repeat referrals within 12 months. Nationally between a quarter and a fifth of referrals are re-referrals from within a 12 month period.</li> <li>• Domestic abuse remains one of the main factors that lead to children being referred for children's social care services and subsequently to them being subject to a Child Protection Plan (CPP). The numbers of children that the police report as exposed to domestic abuse is rising and will contribute to higher levels of referral and Children in Need (CIN)</li> <li>• All domestic abuse notifications are now triaged on a daily basis within the new 'Integrated Family Front Door' which will enable more timely information sharing and screening for risk.</li> </ul>
<p>Social Care Assessments</p>	<ul style="list-style-type: none"> <li>• In 2015/16 there has been a particular focus on the timely completion of assessments. There has been an improvement in the percentage of assessments recorded as being completed within time scale.</li> </ul>
<p>Child In Need (CIN)</p>	<ul style="list-style-type: none"> <li>• There were 3767 CIN in 2015/16 compared with 3942 in 2014/15. The CIN rate for Worcestershire has risen year on year between 2010/11 and 2014/15 (when it was above the national average). The figures for England and statistical neighbours are not yet available for 2015/16.</li> </ul>
<p>Initial Child Protection Conferences (ICPC)</p>	<ul style="list-style-type: none"> <li>• During 2015/16 the percentage of ICPCs recorded as held on time (within 15 working days of the strategy discussion/meeting) continued to fall, indicative of a decline in performance. The increase in the number of ICPCs from 700 in 2015/15 to 806 in 2015/16 will have impacted on this.</li> <li>• Other factors which will have impacted on the time taken to complete assessments and convene ICPCs include the increase in referrals, increase in numbers of Children in Need and increased caseloads.</li> </ul>
<p>Child Protection</p>	<ul style="list-style-type: none"> <li>• Since 2012 the number and rate of CPPs had been falling and in</li> </ul>

Plans (CPPs)	<p>March 2015 the Worcestershire rate was lower than that for both statistical neighbours and England, however during 2015/16 the number increased from 393 to 472 in March 2016</p> <ul style="list-style-type: none"> <li>• The most frequent reasons for child protection plans in 2014/15 were neglect (40%) and emotional abuse (38%). Since 2013/14 the percentage of CPPs due to neglect has reduced and the percentage due to emotional abuse has increased. Worcestershire is in line with statistical neighbours and the national average</li> <li>• The percentage of Worcestershire CPPs lasting two years or more has reduced from 4% in 2014/15 (higher than the national average) to below 2% in 2015/16 (estimated)</li> <li>• Since 2011/12 the percentage of CPPs that are repeat plans has risen from 16% to 23% in 2014/15. The provisional estimate for 2015/16 is down to 19% but is still expected to be higher than statistical neighbours and the national average</li> <li>• The increasing number of CPPs in 2015/16 is thought to be due to more rigorous child protection procedures that have been in use during the year</li> </ul>
Review Child Protection Conferences (RCPCs)	<ul style="list-style-type: none"> <li>• In 2013/14, 94.4% of children on CPPs had all their RCPCs on time, this decreased to 87.6% in 2014/15 and the provisional figure for 2015/16 is 87.8%</li> </ul>
Looked After Children (LAC)	<ul style="list-style-type: none"> <li>• The number of LAC has risen from 686 in April 2015 to 707 in March 2016. This represents an increase in line with the national average, but higher than that of statistical neighbours.</li> <li>• 58% of LAC were male and 42% female. The percentage by gender and age group is similar to previous years and the latest national averages</li> <li>• The percentage of LAC from black and ethnic minority (BEM) backgrounds has increased from 15% at 31 March 2015 to 19% at 31 March 2016. BEM rates in the wider population are increasing but not at this rate which suggests an over-representation in the LAC population. There were 10 unaccompanied asylum seeking children in March 2015 (1% of LAC) but this has risen to 26 in March 2016 (3% of LAC) which may account for some of the increase in BEM statistics</li> <li>• On 31 March 2016, 57% of LAC were placed in foster care and 14% were placed with a relative or friend, these being the two largest groups by placement type. 5% of LAC were placed for adoption and a further 6% were placed with a parent. The remaining LAC were either in independent living placements, secure accommodation, residential homes, residential schools, other residential settings or hostel/supported residential settings</li> <li>• Although performance had improved up to May 2014 when 70% of LAC had a Pathway Plan, the percentage fell to 35% in December 2014 and 50% in December 2015, significantly below the 80% target. Pathway planning for LAC has been identified as an area of</li> </ul>

	<p>concern and is being proactively monitored by the Children's Social Care (CSC) Safeguarding Improvement Board. Some of the delay is attributable to administrative processes between agencies. If LAC do not have Pathway Plans in place it indicates that timely decisions are not being made about young people's transition arrangements</p> <ul style="list-style-type: none"> <li>• The LAC numbers have continued to increase at a greater rate than for statistical neighbours and the national picture, thus impacting on workforce capacity in CSC</li> <li>• At end of March 2016 84% of LAC had an up to date Health Assessment, compared with 76% in March 2015.</li> </ul>
Children Missing Education (CME)	<ul style="list-style-type: none"> <li>• The number of Children Missing Education (CME) cases dealt with has increased every year since 2007/08</li> <li>• A CME themed MACFA is planned for 2016/17 following which scoping will take place in order to identify any specific issues for WSCB</li> </ul>
Elective Home Education (EHE)	<ul style="list-style-type: none"> <li>• The number of Children being educated at home continues to rise. In 2015 over 70% of children in EHE were in years 7 to 11, 60% were white British, 19% were of unknown ethnicity and over 20% are not white British. 12.2% of children in EHE are from a GRT background and so this group is over represented. 5% of the children in EHE had an assessment undertaken by Children's Social Care in 2015</li> <li>• EHE is an identified area for Board attention in 2016/17</li> </ul>
Missing Children	<ul style="list-style-type: none"> <li>• In 2015/16 there were 311 incidents involving Worcestershire children missing from care compared to 194 in 2014/15. There have been 117 return interviews completed for Looked After Children, 10 completed within time scale (72 hours of being located). Return interviews can be refused by the children</li> <li>• In 2015/16 there were 425 incidents involving children missing from home compared with 358 in 2014/15. There have been 87 return interviews completed for children who went missing from home, 8 completed within time scale (72 hours of being located)</li> <li>• 42% of missing incidents in 2015/16 were children missing from care, compared to 35% in 2014/15.</li> </ul>
Child Sexual Exploitation (CSE)	<ul style="list-style-type: none"> <li>• 107 children were referred during 2015/16 as being vulnerable to or actually suffering sexual exploitation compared with 73 in 2014/15</li> <li>• 33 children (31% of referrals) were already known to CSC (CIN, CPP or LAC)</li> <li>• 47 children (44% of referrals) became CIN, CPP or LAC following referral due to CSE concerns</li> </ul>
Private Fostering	<ul style="list-style-type: none"> <li>• There has been a significant decrease in the number of notifications this year. The reasons for this are not clear and the Board will be seeking clarification from CSC</li> </ul>

	<ul style="list-style-type: none"> <li>• The majority of notifications concern children and young people placed with host families for the purposes of accessing education</li> <li>• Other notifications are complex with several children 'on the edge of care'</li> <li>• The timeliness of initial and statutory visits remains a concern</li> <li>• This has been highlighted in core training reminding professionals of requirements/duties</li> </ul>
<p>Child and Adolescent Mental Health Services (CAMHS)</p>	<ul style="list-style-type: none"> <li>• The CAMHS service remains compliant with the contractual Key Performance Indicator (KPI) for maximum 18 week wait for Choice (initial assessment) Appointments, with an average of 5.99 weeks at end of March 2016.</li> <li>• The average wait for non-urgent Partnership (treatment) Appointments is longer with some waiting over 25 weeks. The Partnership Appointment is a new KPI which Worcestershire Health and Care NHS Trust has worked hard to meet and the number waiting over 25 weeks has reduced from 48 in July 2015 to only 6 in March 2016 showing a marked improvement. Many of these children had cancelled or not attended appointments.</li> </ul>

Key areas of concern during the year have included CAMHS waiting times for treatment, timely completion of return interviews for children who have gone missing and completion of LAC Health Assessments. The Board has sought assurance in respect of these issues throughout the year utilising its Escalation Matrix to determine the level of risk associated with each issue. The Board is confident that CAMHS commissioners are closely monitoring the issue of waiting times and that this will be addressed by them if the position deteriorates. Towards the end of the year a decision was made to change the arrangements of return interviews for missing children and from April 2016 these are to be undertaken by Children's Social care staff. The Board will continue to monitor closely performance in these areas.

### 3.1.2 Children's Social Care 'Back to Basics' Improvement Programme

Regular reports have been received by the MEG and directly by the Board regarding implementation of the Children's Social Care Improvement Programme and progress in meeting its established practice standards. The WSCB Independent Chair sits on the CSC Safeguarding Improvement Board to ensure direct 'line of sight'. During the course of the year it was noted that improvements in some aspects of frontline practice were evidenced, such as more assessments being completed within time scale, more children being seen in timescale, significant improvement in the timeliness of completion of Section 47 enquiries and improved timeliness in the response to complaints, but also an acknowledgement by Children's Services that the pace of improvement has been slower than had been hoped for at the start of the year. In March 2016 the reported position was that:

- The Children's Social Care workforce was still fragile
- Worcestershire faces the same challenge as that reported nationally in terms of recruiting experienced permanent social workers
- A significant proportion of social workers are newly qualified

- Caseloads remain too high
- Leadership is not yet permanent
- Practice quality is not consistent

Furthermore any partnership issues that have been highlighted through Children's Social Care self-reflection have been fed back through the MEG to the Board and explored further. An example was the commissioning of a report presented to the Quality Assurance Group on the engagement of key partners in S47 Strategy Meetings which found a need for improvements in multi-agency representation and information sharing with an update to be submitted to the Board in six months.

In light of the issues outlined and continuing evidence that the quality of social work practice remains inconsistent the Board cannot provide full assurance about the effectiveness of help and protection services.

The continuing oversight and direction provided by the 'Back to Basics' Improvement Programme is acknowledged as a positive factor by the Board. That said, over the course of 2016/17 the Board will continue to seek assurance of ongoing improvements in a number of areas;

- The turnover of staff is monitored with a view to reducing the rate of turnover, thus providing assurance re. workforce stability
- Acknowledging the national picture in terms of ratios of experienced staff to newly qualified social workers, the Board will seek assurance that this is kept under review with effective mentoring and professional development of staff
- Caseloads are not only monitored numerically but that management is able to articulate the complexity and impact of caseloads, i.e. the Board will seek assurance that there is effective grip of the qualitative as well as the quantitative assessment
- The efforts of senior leaders at WCC to bring in a stable and cohesive management team is also acknowledged, and this will be monitored through the year,

It is anticipated that with effective implementation of the measures described above, practice quality will improve and become more consistent. The WSCB will seek assurance this is in the line of sight of management and is being delivered.

### 3.1.3 Early Help

[Working together to safeguard children](#) (2015) states that: "*Early help means providing support as soon as a problem emerges, at any point in a child's life, from the foundation years through to the teenage years.*"

The Early Help offer in Worcestershire is delivered by a combination of six local authority commissioned Early Help providers (one for each district), by local authority targeted family support services and wider universal services (e.g. schools, health visitors). The element delivered by universal services is by definition less visible and more difficult to evaluate as it may not involve the completion of an Early Help Assessment and data is not readily accessible.

WSCB, like other local safeguarding children boards around the country, has acknowledged the limitations in monitoring the effectiveness of Early Help provision and has agreed the Board will focus on ensuring the effectiveness of commissioned Early Help services.

In order to fulfil its statutory functions under Regulation 5 an LSCB should use data and, as a minimum, should *'assess the effectiveness of the help being provided to children and families, including Early Help'* (WT, 2015:67).

WSCB considers that there are two aspects to the evaluation of Early Help. Firstly the impact on the individual families receiving services and secondly the cumulative impact on the system (e.g. number of child protection plans and referrals to Children's Social Care). A framework to assess the effectiveness of Early Help was produced by WSCB in 2015/16.

Through scrutiny of the monitoring arrangements put in place by the local authority Early Help commissioners the Board is assured that the quality of interventions with families is good. This is in part based on service user feedback. Currently some families have to wait for a service which raises questions about whether commissioned Early Help services are sufficiently targeted.

The number of Early Help Assessments has continued to rise (consistent with the national picture), as have the numbers of referrals to Children's Social Care, indicative of increasing pressure on resources.

The Board has been sighted on the refreshed Early Help strategy 'Prevention and Intervention for Children, Young People and Families' and is aware that a new 'Starting Well' service is to be commissioned and implemented by March 2019. Partners are being asked to work directly with families where there are concerns not requiring a social care response and to take responsibility for ensuring that Early Help provision is available. The Board will continue to monitor these developments closely over the coming year.

The Board has received regular reports on significant work undertaken during the year to improve the systems and processes for screening referrals and for reconfiguring teams to improve the response. The MASH (Multi Agency Safeguarding Hub) ethos is still being embedded, with co-located partner agencies having now started to triage domestic abuse, child sexual exploitation and missing children referrals at the Family Front Door. The Thresholds guidance has been revised and a new Levels of Need document was approved by the Board in March 2016. It is too early to have a sense of the impact of these changes but it is anticipated that Children's Social Care services and commissioned Early Help services will be more effectively targeted at those children and families where need and risk are highest.

### 3.1.4 Qualitative Evidence

This includes findings from Multi Agency Case File Audits (MACFAs), Safeguarding Conversations and Audits undertaken during the year.

### 3.1.4.1 Multi Agency Case File Audits

WSCB has a statutory duty to oversee and monitor the effectiveness of the work that agencies are doing to safeguard and promote the welfare of children and young people.

One of the ways in which the WSCB does this is to conduct Multi-Agency Case File Audits (MACFAs). The MACFA Panel sits under the Monitoring Effectiveness Group. The Panel is made up of representatives from education, health, police, adult and children services and any other agency which is appropriate to the MACFA theme being considered.

The MACFA Panel is independently chaired by the chair of the Quality Assurance Group (QAG) thus enabling the MACFAs to effectively feed in to the Learning and Improvement Framework. Relevant partners audit their own agency's records in advance of the Panel meeting and come ready to share information about practice in an open and transparent way. The Panel discuss the findings and individual agencies are given a rating in respect of their safeguarding practice. An overall rating is applied to each case reviewed in terms of the multi-agency response to the child's safeguarding needs. If the need to address any child protection practice issues are identified during the course of the MACFA process these are dealt with by the relevant Panel member as a matter of urgency. The MACFA process supports a challenging and learning culture.

In 2015/16 four Multi Agency Case File Audits were undertaken which focused on:

- Child sexual exploitation
- Children with disabilities
- Early Help
- Children missing from home or care

The findings from the MACFAs undertaken during 2015/16 have been collated and widely disseminated across the WSCB partnership using a written briefing and a supporting PowerPoint presentation which can be used in team briefings and other meetings. [The Learning and Improvement briefing](#) can be found on the WSCB website. The distribution and application of the Learning and Improvement leaflet is currently being monitored.

In all of the eight CSE and Missing cases reviewed safeguarding practice was judged to be inadequate or requiring improvement. However, practice improvements to note include better information sharing between agencies in completing Early Help Assessments, more evidence of a Think Family approach and improved inter-agency working where there are concerns about Child Sexual Exploitation.

One example of an outcome from the MACFA process was the setting up of group supervision for practitioners to explore how they could work better together with a family of young girls who were going missing.



A review of MACFAs undertaken during the year identified that a combination of 'Toxic Mix'<sup>1</sup> factors were present in nearly half of the cases reviewed.

This year there has been greater focus on reflecting on the findings of MACFAs rather than making a series of recommendations for action by individual agencies. A tool has been developed to identify recurring themes and practice issues.

Analysis of findings supports the development of learning themes and provides the Board with a stronger steer about action to support improvements in practice across the Partnership.

The engagement of General Practitioners (GPs) in the MACFA process has improved this year due to the support of the Named Professionals (a specialist role within Primary Care to support GP Practices with safeguarding issues).

### 3.1.4.2 Safeguarding Conversations

Four Safeguarding Conversations are facilitated each year providing Board members with an opportunity to talk directly with frontline practitioners about a specific child's case to understand how performance and practice issues impact upon a Child's Plan and subsequent outcomes for the child or young person. In total nine Board members participated in Safeguarding Conversations during the year. They met with a range of practitioners from agencies including: social work, school nursing, education, Early Help, police, sexual health and drug/alcohol agencies.

The findings do not differ significantly from MACFAs. Whilst it is difficult to ascertain specific trends from Safeguarding Conversations they do provide MACFA Panel members with hypotheses to inform their thinking.

A further benefit is an opportunity for Board members to meet practitioners to find out what is happening on the frontline. When necessary Board members have pursued issues and followed up with relevant heads of service. Practitioners find that Safeguarding Conversations provide an opportunity to reflect on their work and support their professional development.

Safeguarding Conversations held in 2015/16 considered cases which broadly fell within the following categories:

- Toxic Mix (domestic abuse, parental drug/alcohol use, parental mental health)
- Child Sexual Exploitation
- Early Help and the impact of the Toxic Mix
- Missing children

### 3.1.4.3 Audits

Audits are an important aspect of the Board's quality assurance role. The Board received a positive response to audits from partner agencies during the year which enables it to monitor

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<sup>1</sup> The Toxic Mix refers to instances where domestic abuse, parental mental health issues and drug and alcohol use coexist in families

and evaluate the effectiveness of what is done to safeguard and promote the welfare of children. In 2015/16 audits presented to the Board included:

- Section 11 Audit

The purpose of the S11 Audit is to obtain assurance about the extent to which partner agencies are fulfilling their statutory duty to have regard to the need to safeguard and promote the welfare of children in the discharge of their core functions. This year the audit placed particular emphasis on commissioning arrangements and on service user feedback. Agency compliance with the audit was good with all relevant partner agencies submitting returns. The audit provided assurance that agencies were self-reporting a good level of compliance with safeguarding duties with confirmation that clear plans are in place to address any areas that require improvement.

Originally a challenge event was planned to hold agencies to account. However, after careful consideration and interrogation of the audits it was considered that a more proportionate response would be to carry out a dip sample placing particular emphasis on service user feedback. At the time of writing this report the dip sampling had not yet been completed.

- Supervision Audit

1075 respondents (managers and practitioners) undertook the survey into supervision arrangements. This was a significant improvement on the audit undertaken in 2013 (163 respondents). Key findings were:

- Only 52% of managers have had supervision training, which is less than the 59% in the 2013 audit. Individual agencies received detailed feedback on their service response.
- An average of 61.5% of staff have a contingency plan in place in case of long term sick leave. This requirement is detailed in WSCB Supervision guidance
- A relatively high number of practitioners (76%) and managers (80%) have safeguarding as a standing item in supervision discussions
- Not all supervision discussions are recorded
- 17% of staff felt that supervision discussions did not provide them with the necessary confidence in their role to manage any safeguarding issues which might arise

In order to address these issues and ensure that learning was taken from the Audit the Board requested a report on how the information from this Audit has impacted on and informed agency thinking about supervision.

Agencies responded positively to this request and the Board was assured that agencies had taken note of the report and used the exercise to reflect on their current safeguarding supervision practice.

- Flagging Audit

This audit was undertaken following a case review to identify what flagging systems agencies had in place to ensure staff are aware of individuals or families where risk factors are present.

The responses were largely positive, with most agencies having a system in place for adding flags or alerts to IT systems. There were also systems in place to remove flags when required.

The Board was assured by the findings of this audit and no recommendations were made for further action.

- **Future Audits**

Audits planned for 2016/17 include:

- Training and Workforce
- Family Front Door/understanding of Thresholds<sup>2</sup>
- Section 175/157 audit of safeguarding arrangements in schools and FE colleges
- Application of Escalation Policy
- CSE Self-assessment Audit

Other areas may be audited if new issues present during the coming year.

#### **3.1.4.4 Early Years Strategic Inquiry instigated by WSCB**

Following a criminal investigation undertaken by West Mercia Police an Early Years Strategic Enquiry (EYSI) was undertaken in partnership with three other Local Safeguarding Children Boards. This highlighted significant concern about the systemic gap identified between the Early Years Foundation Stage and Working Together that affected the way Ofsted approaches inspections of Early Years settings. A summary of the key findings was sent to relevant Ministers and Ofsted. A meeting was arranged between DfE officials, the LSCB Chairs who commissioned the Strategic Inquiry and the Independent Report Author.

An interim report prepared by the DfE following this meeting made reference to a number of issues they intended to raise formally with Ofsted following presentation of the EYSI report.

#### **3.1.4.5 Voice of the Child**

An audit was undertaken by WSCB in 2015 to seek assurance that all partners were systematically and routinely collecting feedback from children and young people about the services received. It concluded that this was not the case and the Board initiated a pilot which attempted to engage three volunteer partner agencies in adopting a three question approach to collecting feedback. The pilot did not progress beyond the planning stage due to capacity issues for some of the partner agencies concerned. The Board then agreed to put particular emphasis on service user feedback in its S11 Audit as a means of seeking further assurance and partner agencies were asked questions as to how they incorporate service user feedback into the development and planning of services. Examples given included:

- Youth Offending Service: View Point and self-assessment questionnaires

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<sup>2</sup>This audit is usually undertaken annually but due to changes at the Access Centre was not undertaken in 2015/16

- Clinical Commissioning Groups: surveys, Children and Young People's Engagement Network, Healthwatch and Youth Takeover Day
- Worcestershire Health and Care NHS Trust: Youth Board and appointment of Participation and Young Person Officer
- Acute Hospitals Trust: surveys and NHS Friends and Family Test

In addition, MACFAs routinely audit the extent to which the Voice of the Child is heard during direct work with children and families. During the year it was concluded that whilst there is emerging evidence of improved recording in respect of children's views in case records, it is not yet clear that the child's voice is routinely influencing assessments and decisions. An initiative for the Board in 2016/17 will be the promotion of the Voice of the Child, or the child's lived experience where they are very young or unable to verbalise their views and wishes, and how this should be used to inform assessments and decisions.

#### 3.1.4.6 Voice of the Parent

This year WSCB engaged directly with parents of children with disabilities as part of a themed MACFA and this feedback was presented to Board members. Parents felt that respite care provided was good. Parents also commented that when a child is pre-school and services are provided directly to the family there is good communication and engagement with professionals. When children start school, however, parents felt more on the periphery which can increase the isolation of parents of disabled children. This feedback will be further considered by the Board during 2016/17 when it will have a particular focus on the safeguarding arrangements in place for Worcestershire children with disabilities/learning difficulties.

Key areas of assurance for the Board this year have been in respect of the Early Help Strategy, the Children's Social Care 'Back to Basics' Improvement Programme and developments in respect of the Integrated Family Front Door. This year has continued to see further pressure on the children's social care system with increases in referrals, numbers of looked after children and numbers of children with child protection plans. Now more than ever it is imperative that services are targeted at the right children at the right time. Key elements of a robust system include having the right systems and processes in place to respond in a timely way to need and risk, clear pathways in place for accessing services and consistently good frontline practice. The Board acknowledges the significant amount of work which has been undertaken during the year by Children's Social Care and other partners to work towards establishing these key elements, but recognises that it is too early to see the full impact of these developments.

In addition, the Board has undertaken a range of activities during the year to evaluate the effectiveness of multi-agency working. Engagement with the Board's audits has been high. The Board is pleased to note some evidence of practice improvements from the MACFAs, particularly in respect of information sharing in Early Help Assessments, Think Family approach and inter-agency working where there are concerns about Child Sexual Exploitation, whilst acknowledging that practice is not yet consistent or sufficiently robust in some areas. There is assurance that the Voice of the Child is being recorded in case records more frequently, but there are questions as to the extent to which the views and feelings of children are influencing assessments and decision making.

The Board's achievements have included greater focus on findings from MACFAs rather than making a series of recommendations for action by individual agencies. This leads to more clarity about specific learning themes and the practice improvements required. There has been an improvement in the engagement of GPs in the MACFA process. There is also evidence of tangible outcomes such as the setting up of group supervision for practitioners to explore how they could work better together with a family of young girls who were repeatedly going missing.

Assurance has been provided about advances made by partner agencies in obtaining service user feedback, the use of flagging systems within partner agencies to raise alerts about risk factors in families and, to a lesser extent, about arrangements for the safeguarding supervision arrangements in place for practitioners.

The Interim report on the S11 Audit presented to the Board at the end of the year indicated good compliance by partner agencies with their safeguarding duties and a strong commitment across the WSCB partnership to safeguarding children.

## 3.2 Learning and Improvement

WSCB has a statutory duty (Working Together, 2015) to maintain a local learning and improvement framework which is shared across agencies which work with children and families.

This framework enables agencies to be clear about their responsibilities, learn from experience and improve services as a result.

WT (2015:68) states that whilst LSCBs do not have the power to direct other organisations they do have a role in making clear where improvement is needed. Each Board partner retains its own existing line of accountability for safeguarding. The WSCB Improving Frontline Practice Group set up in 2015/16 and chaired by a Board member is mandated to:

- Provide assurance that actions from Serious Case Reviews, Child Death Reviews and other learning opportunities have been implemented and embedded in practice
- Sign off policies and procedures on behalf of WSCB
- Manage the communication of learning across the WSCB partnership
- Raise awareness within local communities

## Developments in 2016 – 17

- Development of processes to assess the eligibility for Serious Case Reviews
- Review of national Serious Case Reviews by safeguarding leads
- Publication of WSCB leaflet which summarises learning for the year
- Development of MACFA learning process
- Review of WSCB Learning and Improvement Framework

### 3.2.1 Learning and Improvement Framework

The WSCB Learning and Improvement Framework was reviewed in 2015/16 and can be found at:

[http://www.worcestershire.gov.uk/downloads/file/5558/learning\\_and\\_improvement\\_framework](http://www.worcestershire.gov.uk/downloads/file/5558/learning_and_improvement_framework)

Learning is taken from a range of activities including:

- Serious Case Reviews
- Case Reviews
- Child Death Reviews
- Multi Agency Case File Audits (MACFAs)
- Domestic Homicide Reviews (when appropriate)

### 3.2.2 Child Death Overview Panel

The Child Death Overview Panel (CDOP) has a statutory responsibility to collect and analyse information about the deaths of all children who live in Worcestershire; to identify any safety and welfare matters along with wider public health or safety concerns. The Panel analyses collated

information in order to classify each death, identify any 'modifiable factors' that may have contributed to the death of the child and make recommendations regarding interventions to reduce the risk of similar deaths. Although there may only be a relatively small number of deaths from a particular cause in a given year, cumulative data and liaison with other CDOPs in the West Midlands may reveal trends and common factors

During 2015/16 CDOP reviewed 35 deaths and found that modifiable factors were present in 11 of the deaths. Data collected over the past 8 years indicates that parental cigarette smoking and bed sharing are identified factors present in the majority of cases classified by CDOP as Sudden Infant Death Syndrome. As a direct result of the Panel's analysis of child deaths, the Worcestershire-wide Safer Sleeping Initiative was established as an important public health programme delivered to new parents by Midwives and Health Visitors. Initially introduced in Worcestershire, this initiative has subsequently been adopted throughout the West Midlands region, and supported by inclusion in the Child Health Book (Red Book).

During the year, the Perinatal Sub-Group discussed 22 deaths before bringing them to full Panel. Maternal obesity was by far the most frequently occurring modifiable factor but others included parental smoking, alcoholism and environmental stresses including overcrowding, deprivation and domestic abuse, which have been brought to the attention of Public Health. Many of these deaths are of premature or extremely premature infants and these will be given further scrutiny to see if there are any recurring factors.

Other issues identified by the Panel included several incidents relating to hospital care, questions of disclosure of prognosis to children approaching their majority, review and implementation of the West Mercia Sudden Unexpected Deaths in Infants and Children (SUDIC) policy and changes to Worcestershire SUDIC personnel. The Panel has also discussed at length interaction with and feedback to parents and a policy has been implemented with advice booklets developed for bereaved families. The Panel has highlighted to the Board that several key agencies, sighting capacity issues, have withdrawn from participating at CDOP.

### 3.2.3 Serious Case Reviews

One Serious Case Review was published in 2015/16. The actions from this review had already begun to be implemented to ensure that lessons learned were acted upon without undue delay.

The Review highlighted a number of learning points and recommendations for agencies in respect of:

- Improving communication within and across agencies;
- The importance of providing effective, reflective supervision given the complexity of some family situations and to give practitioners and managers confidence to challenge families and each other;
- The importance of engaging all professionals in assessments to include those involved with adults within the family.

In addition to agencies implementing their own action plan(s) the Board has made stronger links with Housing providers, including ensuring a representative sits on the Board, held

communication learning events and widely disseminated a model for 'checking back' developed with health colleagues to support more effective communication within and between agencies. All agencies were provided with a Learning and Improvement Briefing outlining the case and actions to be undertaken. A PowerPoint presentation was also provided by WSCB to ensure dissemination across the workforce. The dissemination of information was audited by WSCB and this audit found that of the agencies that responded:

- All agencies had disseminated the learning and this had been followed up by some agencies by presentations at conferences and via team meetings
- The briefing had been placed on agencies' intranet sites
- Managers had used the briefing in team meetings to reflect on practice
- Agencies had found the PowerPoint useful to support discussion about the learning

No Serious Case Reviews or case reviews were undertaken by WSCB in 2015/16. One reflective learning session was undertaken in April 2015 and learning disseminated by the agencies. Five further cases were submitted to the Serious Case Review Group for consideration and scoping was undertaken by key agencies. Following debate and challenge, and in a few cases after seeking advice from the National Panel, no cases were considered to meet the criteria for a Serious Case Reviews.

The Serious Case Review Group has reviewed the documentation and introduced new processes to ensure that governance is clear and transparent. Other improvements have included tracking mechanisms for action plans and instigating a formal process for receiving learning from Domestic Homicide Reviews. The leaflets for parents and practitioners have also been reviewed.

### 3.2.4 Policies and Procedures

Policies introduced/reviewed during the year and how these are expected to improve practice include:

- Twice yearly updates to the West Mercia Consortium Child Protection Procedures shared with Herefordshire, Telford and Wrekin, and Shropshire LSCBs
- Audit of the guidance documents in the Worcestershire section of the Child Protection Procedures to ensure they are up to date and fit for purpose
- Revised inter-agency guidance for responding to domestic abuse
- Levels of Need guidance (thresholds)
- Updated Protocol for Female Genital Mutilation, Forced Marriage and Honour Based Violence

During the year the Board also engaged in a project to develop a West Midlands regional wide set of child protection procedures sponsored by the Association of Independent LSCB Chairs. This work will continue into next year.



### 3.2.5 Monitoring and evaluating the effectiveness of training

A full report detailing the effectiveness of training can be found at:

[http://www.worcestershire.gov.uk/downloads/file/5814/the\\_effectiveness\\_of\\_training](http://www.worcestershire.gov.uk/downloads/file/5814/the_effectiveness_of_training). The report outlines the assessment of the effectiveness of safeguarding training in line with the WSCB [Framework for Evaluation](#). Evidence of impact of training is gathered from a variety of sources including audits, evaluations and formal training reviews.

WSCB delivered 64 multi-agency training courses in 2015/16 to 1182 people. There is good attendance at multi agency training by schools, Children's Services and the Worcestershire Health and Care NHSTrust. Some large agencies prefer to deliver single agency training although research suggests this is less effective at promoting multi-agency working.

WSCB multi-agency training is rated extremely highly in terms of the content and style of delivery by those attending. This is achieved in part by the regular review of training content to ensure that current learning from MACFAs, case reviews and Serious Case Reviews is referenced. During the year the Board jointly hosted a learning event with the Worcestershire Safeguarding Adults Board (WSAB) on transitions issues for older adolescents/young adults. The Board has also delivered a programme of CSE awareness training.

Learners routinely report that their level of knowledge and confidence has improved after attending multi-agency training events. Demonstrating that this knowledge and confidence has impacted on their practice is a challenge addressed through impact evaluations and audits, including the use of national benchmarks where these are available. Partner agencies are asked to ensure that they follow the WSCB [Framework for Evaluation](#) in respect of single agency training. The last Training Audit undertaken in 2014 did not provide full assurance and agencies have again been prompted to apply the Framework. A further audit is planned during 2016 with a particular emphasis on ensuring that single agency training is effective.

A comprehensive range of e-learning modules is made available by the Board, but there is a lack of take up by agencies and professionals in respect of some modules and the provision of this resource is currently being reviewed. Courses added to the [e-learning portfolio](#) this year include Safeguarding Children in Education, Pathways to Extremism and the Prevent Programme.

In conclusion, there are some specialist courses, such as safeguarding supervision training, where the impact of the training can be clearly evidenced, but for general safeguarding training this is more difficult to demonstrate. The Board is continually looking at innovative ways to ensure that multi agency safeguarding training is effective and agencies will be asked in 2016 to evidence how they ensure that single agency training impacts on practice.

### 3.2.6 Communications

During the past year the Board has undertaken a wide range of communication activities to raise the profile of the Board, promote engagement and strengthen existing means of communication with members of the public, parents and carers, children and young people and practitioners from all agencies. The primary communication sources include the WSCB website, Newsletters, Annual Report, Learning and Improvement briefings and the Practitioner Network meetings. Examples of Learning and Improvement briefings can be found at:

[http://www.worcestershire.gov.uk/info/20204/safeguarding\\_children\\_information\\_for\\_professionals/482/learning\\_and\\_improvement/3](http://www.worcestershire.gov.uk/info/20204/safeguarding_children_information_for_professionals/482/learning_and_improvement/3).

WSCB seeks to raise awareness of specific safeguarding issues through community partnerships and directly with the public through local campaigns on national awareness days. During the year press releases, media coverage and digital technology have been employed to deliver communication strategies on issues such as Child Sexual Exploitation, Internet Safety and the prevention of child abuse.

Work has been undertaken to ensure that the WSCB website provides clear and helpful safeguarding messages to parents and carers, signposting them to further sources of support from specialist organisations. The Board has worked in partnership with a leading national child protection agency to promote safeguarding messages and campaigns to parents, carers and local practitioners. During the coming year the Board will be looking at its options for utilising social media as a vehicle for its outward facing communications.

WSCB communications can be located on the WSCB [Website](#).

### 3.2.7 Engagement with front line practitioners

Practitioner feedback on specific issues is sought via the WSCB Practitioner Network meetings and, when appropriate, electronically. It enables the Monitoring Effectiveness Group to test hypotheses drawn from scrutiny of performance data or the Quality Assurance Group to dip sample or audit practitioner views about a specific issue. For example, after the publication of Learning and Improvement Briefing 5 (relating to the GW Serious Case Review), practitioners were asked to provide feedback on the dissemination and use of the Briefing. In addition, practitioners can bring issues from the frontline to the Network meetings and, if gaps or weaknesses in services or systems are identified, these can be escalated through to the Board.

### 3.2.8 Engagement with children and families

The Board is committed to ascertaining the views of young people and parents in their work as part of the WSCB Service User Feedback Strategy. In order to inform the annual WSCB Development Day a survey was sent to all High Schools in Worcestershire asking young people to rank in order of importance to them different groups of vulnerable children. They were also asked to say in their own words what other groups of young people they were concerned about.

Responses were received from 2445 young people who considered that domestic abuse was the highest priority group, followed by children affected by Child Sexual Exploitation and then parental drug and/alcohol misuse. As in the previous year, young people remain concerned about the emotional health of children and young people and bullying.

1953 free text responses were received, varying in length from one or two words to long sentences. The responses were themed into 25 different areas. The top concern for young people was the home environment, followed by friendships/relationships, including peer pressure, with the third concern being internet safety. A consultation with a group of young people who work alongside WSCB suggested that this may be because 'if everything is okay at home then everything else falls into place'. The work being undertaken by the Board in



The Board has a range of processes in place for consolidating learning which include Child Death Reviews, Serious Case Reviews, MACFAs, Safeguarding Conversations and other case reviews. During the last year the Board has placed increased emphasis on the production of evidence based findings and has communicated these across the WSCB partnership. Positive feedback has been received about the Board's Learning and Improvement briefings.

The Board recognises its need to develop and improve its Learning and Improvement Framework to ensure that findings from audits and case reviews are not just disseminated, but used by partner agencies to improve frontline practice. During the coming year the Board will prioritise its role in seeking assurance from partner agencies that learning has led to improvements.

No Serious Case Reviews were initiated during the year, although a number of cases were brought for consideration.

Whilst in Worcestershire only a relatively small number of child deaths are found to have modifiable factors, cumulative data in respect of babies whose deaths are classified as Sudden Infant Death Syndrome (SIDS) suggest that smoking and co-sleeping are often significant factors. In the deaths of unborn or extremely young babies factors such as maternal obesity, smoking, alcohol and other environmental factors are often present in some combination. Stronger links with Public Health are developing and a communications initiative for the public will be considered in the coming year.

Learning from MACFAs undertaken during the year has informed a number of the Board's priority work streams for 2016/17:

- Voice of the Child/child's lived experience (limited evidence of child's voice being used to inform assessments or decisions)
- Review of safeguarding arrangements for disabled children (some evidence of drift where there were concerns about neglect of disabled children)
- Professional Curiosity and Think Family (half of all cases reviewed had a combination of domestic abuse, parental mental ill health or parental drug/alcohol use)
- Child Sexual Exploitation and missing children (in all cases reviewed multi-agency safeguarding practice was judged 'inadequate' or 'requiring improvement')

## Section 4 Formal summary statement of the arrangements to ensure that children are safe in Worcestershire

Whilst it will never be possible to be completely assured that all children and young people in Worcestershire are safe, it is possible to be assured that the system is playing its part in being able to identify, manage and respond to risk when it is identified. Worcestershire Safeguarding Children Board has a responsibility to form an annual overall judgement on safeguarding arrangements and their effectiveness. The Board identified a number of strategic priorities at the beginning of the year and based on its activity and learning can make the following formal summary statement in respect of 2015/16:

Engagement with the work of WSCB has remained strong, evidenced by Board members chairing sub-groups and ensuring actions are completed to implement the Business Plan. Attendance at Board meetings is good and response to audits is generally positive. Changes to membership, however, remains a challenge to continuity. Early indications are that the Board will be assured by its recently completed S11 audit that partner agencies are fulfilling their safeguarding children duties as set out in Chapter 2 of Working Together to Safeguard Children (2015). Contributing partners have agreed, despite competing financial demands, to provide additional funding for Serious Case Reviews from next year which evidences the strength of multi-agency commitment to learning and improvement across the WSCB partnership. The Board also notes that WCC reports that it has increased its funding for safeguarding services over the last three years by £11m.

At the end of 2014/15 the Board formed the view that it could not be assured about the robustness of the child protection system. This year has continued to see further pressure on the children's social care system with increases in referrals, numbers of looked after children and numbers of children with child protection plans. More so than ever there is an increased reliance on partner agencies to ensure that all referrals to Children's Social Care are appropriate, a reasonable expectation in multi-agency working.

A particular priority for the Board this year has been the need for assurance on the Children's Social Care 'Back to Basics' Improvement Programme which was initiated after findings from the LGA peer review undertaken in April 2015 raised questions about the quality of frontline social work practice. The Board has been closely sighted on progress during the year supported by the WSCB Independent Chair attending meetings of the Children's Social Care Safeguarding Improvement Board. Over the course of the year there have been some practice improvements noted (outlined on page 20 of this report), however the Board recognises that other areas of practice have not improved in line with expectations. At the end of the year it was noted that the children's social care workforce is inexperienced, permanent leadership is not yet in place, practice quality is not yet consistent and ongoing difficulties with recruitment means that caseloads remain high. Whilst the Board is assured that plans are in place to address these challenges, the pace of change has not been as fast as had been hoped for at the start of the year and therefore the Board has yet to reach point where it is sufficiently assured about the robustness of the child protection system.

**WSCB will continue to seek assurance about practice and service improvements as outlined in the body of this report (see page 21)**

Increased demand year on year has led to a need to ensure that there is a robust response to referrals to include timely decision making and assessments and quality feedback where the referral is not appropriate. At the start of the year the LGA peer review had found the 'front door' arrangements to be confusing for partner agencies. During the course of the year the Board has received regular reports on significant work undertaken to improve the systems and processes for screening referrals and for reconfiguring teams to improve the response. The MASH (Multi Agency Safeguarding Hub) ethos is being embedded, with co-located partner agencies now starting to triage domestic abuse, child sexual exploitation and missing children notifications at the Integrated Family Front Door. It has been reported to the Board that early indications suggest more timely information sharing is already starting to reduce the number of inappropriate referrals.

The Thresholds Guidance has been revised this year and a new Levels of Need document was approved by the Board in March 2016. It is to be embedded with a message that partner agencies are required to play their full part in working together to offer additional support to the child and/or family. It is too early to have a sense of the impact of these changes but it is anticipated that Children's Social Care services and commissioned Early Help services will more effectively target those children and families where need and risk are highest. Evaluation of the new Family Front Door arrangements will be an important area of focus for the Board during the coming year.

**WSCB acknowledges the work done to date to consolidate arrangements for accessing services through the Integrated Family Front Door. Assurance will be sought that timely information sharing is adhered to by partners in accordance with local agreements, that referrals are appropriate with feedback given when this is not the case, and that children and families are receiving the right services at the right time.**

The Board has been updated on the refreshed Early Help Strategy 'Prevention and Intervention for Children, Young People and Families'. The demand for Early Help Assessments has continued to increase this year but not led to a corresponding reduction in referrals to Children's Social Care, placing yet more demand on the system. LSCBs around the country have recognised the challenge of evaluating the effectiveness of Early Help, especially where services are delivered by practitioners in wider universal services. This Board is assured that there are robust mechanisms in place to quality assure the services provided by commissioned Early Help providers and that effective work is being undertaken with families, but is concerned that demand for commissioned services currently outweighs capacity resulting in families waiting for a service. A new 'Starting Well' service specification is to be agreed by October 2016 and fully implemented by March 2019. As part of the wider Early Help offer partner agencies are required to respond to identified need by working directly with families to deliver support services. The Board will continue to identify mechanisms for evaluating the effectiveness of support services delivered by universal services.

**WSCB will continue to seek assurance that Worcestershire's Early Help offer is adequately resourced, sufficiently targeted and monitored as to its effectiveness.**

It has been another busy year for the Board with focused work on its priorities and a number of achievements, most notably in respect of the implementation of the WSCB Child Sexual Exploitation Strategy and supporting action plan. During the year there has been an increase in the number of children identified as either suffering or being vulnerable to sexual exploitation. This provides some assurance about increased awareness and audits have evidenced some improvements in inter-agency working whilst noting that inconsistent practice is still evident. The Board therefore cannot yet be fully assured about the multi-agency response to children at risk of sexual exploitation or when they go missing.

**CSE and Missing Children will continue to be subject to rigorous oversight and scrutiny by the CSE Strategic Group, reporting through the Board. Assurance will be sought that these issues are embedded as 'business as usual' in each agency and across the partnership, and that partners have in place robust systems for responding to concerns about sexual exploitation when they arise.**

Concerns have been raised in relation to timely completion of return interviews for missing children, waiting times for treatment from CAMHS and completion rates for LAC health reviews, and whilst there have been improvements further assurance will be sought in 2016/17.

**WSCB will continue to monitor these measures closely, or will ensure that the appropriate partnership board is doing so, with an expectation of continuous improvement through 2016/17 without compromise on quality of the service provided.**

The Board notes evidence from case file audits of some practice improvements in multi-agency working and there is evidence of the Voice of the Child being recorded with more frequency in case records, albeit there are questions as to extent to which children's views sufficiently influence assessments and decision making.

**WSCB will continue to seek assurance through MACFAs, Safeguarding Conversations and case reviews that the Voice of the Child is used to inform assessments and decision making in a meaningful way.**

Whilst there has been a particular focus this year on frontline practice within Children's Social Care, the Integrated Family Front Door developments and Early Help provision, it is also important that the Board fully understands the impact on safeguarding children of significant changes across the wider partnership, for example organisation/sector restructure, changes to eligibility criteria for services or new pathways for service delivery, and resourcing challenges. Next year the Board's focus will be on a wider range of partner agencies, seeking to understand the impact and risks associated with organisation/sector specific issues.

## Summary statement of overall judgement

The Board concluded that the body of evidence from data, audits, reports and learning during 2015/16 demonstrates that there is a strong commitment to safeguarding children across the Worcestershire partnership and that safeguarding arrangements are in place. Demand for services across the whole system continues to increase and, whilst recognising that improvements have been made to some aspects of frontline social work practice, other practice improvements have not been achieved as quickly as had been hoped at the start of the year.

Whilst recognising that strategies are in place to improve frontline practice, the Board cannot yet be assured about the robustness of the child protection system and this remains a risk. Further assurance is required as to the effectiveness of the wider Early Help offer and whether it is sufficiently targeted, albeit it is recognised that the quality of provision by local authority commissioned providers is good. It is clearly important that children and families receive the right services at the right time. The impact of the Integrated Family Front Door and the revised Levels of Need guidance will be monitored, as will the need for all partners to play their full part in the provision of support services to children and families at the earliest opportunity to prevent escalation of need and risk.

The Board recognises that these are challenging times for partner agencies, many of whom are facing reductions in resourcing, but is confident overall that there is a strong commitment by all Board member agencies to prioritise safeguarding.



## Section 5 Examples of proposed action identified by individual partner agencies for 2016/17

Agency	Development Areas for 2016/17
<b>WSCB</b>	<ul style="list-style-type: none"> <li>• Ensure the Levels of Need guidance is understood across the partnership</li> <li>• Implement initiative to promote 'professional curiosity' and Think Family approach working collaboratively with WSAB and Safer Communities Board</li> <li>• Consider implications of the Wood Review of LSCBs</li> <li>• Implement changes to Board structure</li> <li>• Support embedding of emotional wellbeing pathway</li> <li>• Embed whole school approach to child sexual exploitation and healthy relationships</li> <li>• Develop Learning and Improvement Framework to provide assurance that learning leads to practice improvements</li> </ul>
<b>Police</b>	<ul style="list-style-type: none"> <li>• Structural changes to be better connected</li> <li>• Improve holistic approach and developing professional curiosity</li> <li>• Improve response to missing/absent children and potential link with CSE</li> </ul>
<b>National Probation Service (NPS)</b>	<ul style="list-style-type: none"> <li>• Though fully engaged in the Family Front Door / MASH arrangements, technology interface continues to prove challenging as NPS systems are not compatible with Framework-i. A significant technology update is due for NPS in late 2016 that will hopefully resolve this issue and enable increased efficiency</li> </ul>
<b>Community Rehabilitation Company (CRC)</b>	<ul style="list-style-type: none"> <li>• Ensure access to Framework i</li> <li>• Embed use of home visits risk assessment procedure and increase level of home visiting to monitor children's wellbeing</li> <li>• Assure that all frontline staff have received in-house training to support roll-out of new safeguarding procedures, including input on making referrals to Children's Social Care</li> <li>• Assure training effectiveness</li> </ul>
<b>WCC Children's Social Care</b>	<ul style="list-style-type: none"> <li>• Full implementation of 'Integrated Family Front Door' operating under a MASH ethos i.e. timely and proportionate sharing of information with key partners leading to effective help and support to address need at the earliest opportunity. To be delivered through a variety of means to include universal and/or Third Sector support</li> </ul>

	<p>services, targeted family support services or Children's Social Care services dependent on levels of need/risk</p> <ul style="list-style-type: none"> <li>• Continued improvement in the quality and consistency of frontline practice and management oversight</li> <li>• Continuing to improve the response to children missing from home, care and education</li> <li>• Continue to recruit and retain suitably qualified and experienced social workers and managers</li> </ul>
<b>District Councils</b>	<ul style="list-style-type: none"> <li>• Development of the District Council role in supporting initiatives around CSE locations of concern.</li> <li>• Consistency in safeguarding responsibilities to contracted service providers</li> <li>• Improved understanding of Thresholds by District Council staff teams.</li> </ul>
<b>Youth Offending Service</b>	<ul style="list-style-type: none"> <li>• Join up risk management processes</li> <li>• Continue to improve assessment and planning in particular through the implementation of both a new case management system and new assessment framework</li> <li>• Continue to undertake critical learning reviews, identify learning and communicate the findings and resulting actions to the LSCB making the serious incident review process more multi agency where relevant.</li> </ul>
<b>Health Providers</b>	<ul style="list-style-type: none"> <li>• Supporting the development of 'Family Front Door'</li> <li>• Public Health Commissioners published a Starting Well tender for Universal Prevention 0 – 19 services including Public Health Nursing and Early Help. The tender had a focus on targeting services to children and families dependent on need and living in areas of highest deprivation. This has subsequently not been awarded and existing contracts are being extended with a view to a new service being in place by March 2019.</li> </ul>
<b>Health Commissioners</b>	<ul style="list-style-type: none"> <li>• Continue to improve GP engagement in safeguarding Processes - The Named Professionals for Primary Care support GP Practices in improving safeguarding systems and processes.</li> <li>• Continue to work in partnership with WCC to improve GP involvement in safeguarding processes through the further use of Technology</li> <li>• The CAMHS Transformation Plan will continue to be implemented throughout 2016-17, with the intention of the Starting Well service commencing from October 2016, and a new CAMHS service specification agreed by October 2016.</li> </ul>

Areas for challenge are identified at each Board meeting and the challenges brought forward from last year are:

- Production of a regular CSE problem profile including provision of 'hot spot' information for District Councils
- Meaningful data on the Integrated Family Front Door for the Board to be able to be assured of its effectiveness
- Data required from the transformation plan for Children's Emotional Wellbeing and Mental Health

# Appendices

## Appendix 1 Statutory Objectives & Functions of LSCBs

### Statutory Objectives of Local Safeguarding Children Boards (LSCBs)

The objectives of LSCBs, as set out in Section 14 of the Children Act 2004 are:

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

### Statutory Functions of Local Safeguarding Children Boards (LSCBs)

The functions of Worcestershire Safeguarding Children Board, set out in primary legislation and regulations, are:

(a) developing policies and procedures for safeguarding and promoting the welfare of children in the area of the authority, including policies and procedures in relation to:

- The action to be taken where there are concerns about a child's safety or welfare, including thresholds for intervention;
- training of persons who work with children or in services affecting the safety and welfare of children;
- recruitment and supervision of persons who work with children;
- investigation of allegations concerning persons who work with children;
- safety and welfare of children who are privately fostered;
- cooperation with neighbouring Children's Services authorities and their Board partners;

(b) communicating to persons and bodies in the area of the authority the need to safeguard and promote the welfare of children, raising their awareness of how this can best be done and encouraging them to do so;

(c) monitoring and evaluating the effectiveness of what is done by the authority and their Board partners individually and collectively to safeguard and promote the welfare of children and advising them on ways to improve;

(d) participating in the planning of services for children in the area of the authority; and

(e) undertaking reviews of serious cases and advising the authority and their Board partners on lessons to be learned.

LSCBs do not commission or deliver direct frontline services though they may provide training. While LSCBs do not have the power to direct other organisations they do have a role in making clear where improvement is needed. Each Board partner retains its own existing line of accountability for safeguarding.

## Appendix 2 Local Background & Context

### Local Demographics

The largely rural county of Worcestershire is situated in the West Midlands. It has a population of 569,000 and 70% of residents live within the main towns. According to figures released by Worcestershire County Council the county population is increasing by approximately 2,400 persons per annum.

#### Age

Worcestershire has a resident population of approximately 115,000 children and young people aged 0 to 17, making up 20% of the total population. Over the next ten years the population of 0 to 17 year olds is projected to increase by 2,900 (2.5%) with variations between age groups. The population of 10 to 15 year olds is projected to increase by 9% while the population of 16 to 17 year olds is projected to decrease by 2.4%.

#### Ethnicity

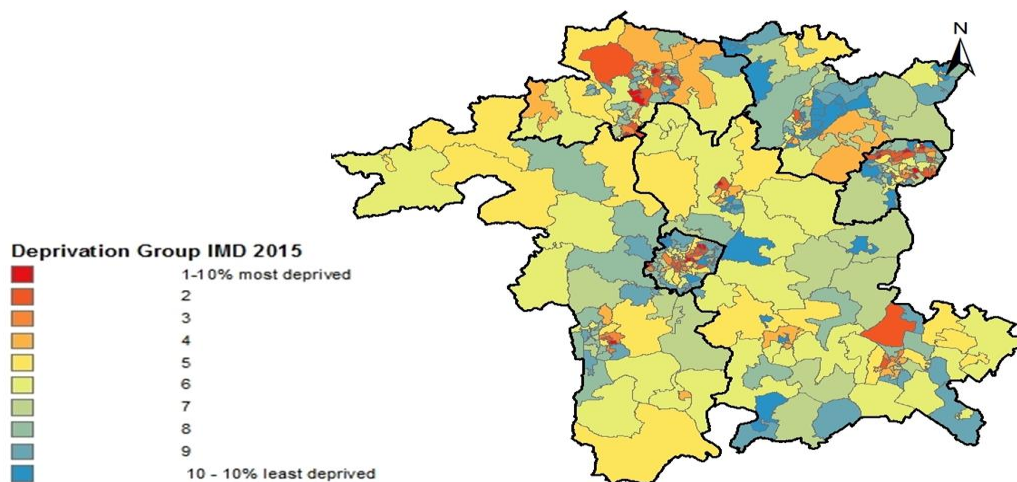
10% of the population aged 0 to 17 is classified as belonging to an ethnic group other than White British. The largest group is Asian or Asian British and the next largest is children from a mixed heritage background. English is spoken as an additional language by over 5000 school pupils (6.5%). Polish, Urdu and Punjabi are the most commonly recorded spoken community languages in the area.

#### Areas of Deprivation

The Indices of Deprivation use several measures including income, employment, education, health, barriers to housing and services, crime, and living environment. These are weighted and combined to create an overall Index of Multiple Deprivation. In Worcestershire deprivation scores vary with the highest score at 75.6 in one area of Worcester City and 2.4 in another. Most of the high deprivation areas are in the urban areas of Worcester, Wyre Forest and Redditch. The average for the county is 17.7, ranked as 110 out of 152 Local Authority areas (1 being the most deprived).

Worcestershire showing small areas (LSOAs) with deprivation groups IMD 2015

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## Local Authority Provision

At the end of March 2016 there were a total of 3767 children in need (CIN), 707 looked after children (LAC) and 472 children with child protection plans. This compares with 2015 figures of 3924 children in need, including 368 with child protection plans and 687 looked after children.

Local Authority Provision	March 2015	March 2016
Children in Need	3942	3767
Looked after Children	687	707
Child Protection Plans	368	472

## Children's Social Care and Early Help

During 2015/16 all referrals for Children's Social Care and Early Help have come to the Access Centre and the Early Help Hub for screening and a decision on threshold. Advice is offered and cases are signposted and directed as appropriate. At the time of writing this report these arrangements are being reviewed and developed as part of the Integrated Family Front Door.

WSCB has received regular reports from Children's Social Care following the peer review undertaken in April 2015 and the Independent Chair sits on the Children's Social Care Safeguarding Improvement Board in order to directly feedback to the Board. This year has seen a great deal of change in Children's Social Care in terms of senior management and processes.

## Inspections of partner agencies reported to WSCB

- LGA Peer Review of Children's Social Care
- HMIC National Child Protection Inspection
- CQC Inspection of Acute Emergency Departments
- Short Quality Screening Inspection of West Midlands Youth Offending Service
- West Midlands Quality Review Service (WMQRS) CAMHS Peer Review
- HMIC Domestic Abuse Inspection
- WMP CSE Peer Review
- HMIC Inspection Report on West Mercia Police support for vulnerable victims of crime
- CQC Review of Health Services for Children Looked After and Safeguarding in Worcestershire

Reports and action plans for the above have been submitted to WSCB. In addition to the inspection information agencies are regularly required to inform the Board of any current issues impacting on safeguarding including inspections, thematics and annual reports.

## Appendix 3 Attendance at Board meetings

Agency	Name	Meetings attended in 2015/16	Substitute in place of Board Member	Representative	Agency
Independent Chair	Diana Fulbrook	5/5	N/A	100%	100%
Vice Chair Community voluntary Sector	Michael Hunter	5/5	0	100%	100%
<b>Children's Services:</b>					
Learning and Achievement	John Edwards	3/5	0	60%	60%
Director of Children's Services	Gail Quinton	2/2	0	100%	100%
	Simon White (Acting Director)	3/3	0	100%	
Early Help and Partnerships	Hannah Needham	5/5	0	100%	100%
Lead Member (Safeguarding) Participant Observer	Liz Eyre	1/1	0	100%	20%
	John Campion	1/5	0	20%	
Head of Social Care	Siobhan Williams	2/2	0	100%	60%
	Cath Knowles (Acting head)	1/1	0	100%	
Safeguarding and Quality Assurance	Diane Partridge	4/5	0	80%	80%
<b>Clinical Commissioning Groups (CCGs)</b>					
NHS Redditch and Bromsgrove CCG Wyre Forest CCG	Jo Galloway	3/5		60%	100%
	Ellen Footman (deputising)		2/5	40%	
South Worcestershire CCG	Lisa Levey	0		0%	80%
	Ellen Footman (deputising)		4/5	80%	
Designated Doctor/ Designated Nurse (deputise for each other)	Andy Mills	3/5	1/5	60%	80%
	Ellen Footman	4/5		80%	
<b>NHS England</b>	Vikki Twedde	0/5		0%	80%
As a 'low risk' Board NHSE rep receives minutes and only attends if required on specific issues	Ellen Footman (deputising)	4/5		80%	
<b>Worcester Health and Care NHS Trust</b>					
	Sandra Brennan	0/4		0%	100%
	Michelle Clarke	0/1		0%	
	Andy Mills (deputising)		1/5	20%	
	Karen Rees (deputising)		2/5	40%	



Agency	Name	Meetings attended in 2015/16	Substitute in place of Board Member	Representative	Agency
	Liz Staples (deputising)		1/5	20%	
	Sarah Dugan (CEO))	1/5		20%	
<b>Worcestershire Acute Hospitals Trust</b>					
	Mari Gay (interim in post)	0			100%
	Lindsey Webb	0			
	Lisa Miruszenko (deputising)		1/5	20%	
	Anne Crohill		3/5	60%	
	Denise Price		1/5	20%	
WM Ambulance Service	Andy Proctor		0/5	0	0%
WM Police	DS Stephen Eccleston	3/5		60%	100%
	Richard Long		1/5	20%	
	Damien Pettitt		1/5	20%	
District Council	Kevin Dicks	4/5		80%	100%
	Judith Willis		1/5	20%	
DASH Directorate of Adults Services and Health	Anne Clarke (now Interim Director)	1/5		20%	100%
	Yvonne Waltham		2/5	40%	
	Sarah Cox		2/5	40%	
Festival Housing	Clare Huyton	4/5		80%	80%
Youth Offending Service	Keith Barham	3/5		60%	80%
	Phil Kendrick		1/5	20%	
CAFCASS	Tammy Conn	4/5		80%	80%
National Probation Service	David Cookson	4/5		80%	80%
Community Rehabilitation Company	Susannah Stennett	5/5		100%	100%
<b>Education</b>					
Further Education	Anna Place	1/3		33%	33%
First Schools	Carol Newton	2/2		100%	100%
	Tracey O'Keefe Pullen	3/3		100%	
Middle School	Lynne Evans	5/5		100%	100%
High Schools	Alan Roll	3/5		60%	60%
Special Schools	Sarah Radford	2/5		40%	40%
Independent Schools	Matthew Armstrong	1/2		50%	50%
Early Years	Nicola Turrell	2/4		50%	50%
Lay members	Sylvia Dyke	5/5		100%	100%
	Margaret Tovey	5/5		100%	100%
Health Watch – Participant Observers	Morag Edmondson	1/5		20%	60%
	Jane Stanley		2/5	40%	

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Agency	Name	Meetings attended in 2015/16	Substitute in place of Board Member	Representative	Agency
CEO, Worcestershire County Council – participant observer	Clare Marchant	2/5		40%	40%
WSCB Board Manager	Sue Haddon	4/5		80%	80%

## Appendix 4 Governance and Accountability Arrangements

The Lead Member will hold the Independent Chair to account for the effective working of the LSCB and, in turn, the Chair is able to hold agencies to account as set out in Working Together (2015), although they retain their safeguarding responsibilities. The Chair worked closely with all LSCB partners and the Director of Children's Services. Diana Fulbrook independently chaired WSCB from April 2012 – March 2016 and was a member of the National Association of LSCB Chairs attending the Annual Conference. A new Independent Chair, Derek Benson, was appointed in April 2016.

### Strategic Partnership Arrangements

WSCB has a formal joint protocol with the Worcestershire Safeguarding Adults Board (WSAB) and the Health and Well-Being Board (HWB). Next year consideration will be given to making this a four-way protocol to include the Safer Communities Board.

The HWB oversees the system for local health commissioning. It leads on the strategic planning and co-ordination of NHS, Public Health, Social Care and related Children's Services. Health and Well-Being Boards were formally established in April 2012 and became statutory bodies from April 2013.

WSCB collaborates with the Worcestershire Safeguarding Adults Board, the Worcestershire Health and Well-Being Board and the Safer Communities Board to discuss cross cutting themes and how to efficiently support respective strategic priorities. An example of an output this year was the Transitions event in respect of older teenagers held in February 2016 hosted jointly by the Safeguarding Adults Board and Safeguarding Children Board. One output from the event was the issuing of formal requests for assurance from key partner agencies that the needs of older teenagers and young adults would be taken into consideration when commissioning services. Potential areas of joint work next year are further work on transition from children's to adult services and promotion of 'professional curiosity' and Think Family approach.

For more details about strategic partnerships in Worcestershire go to:

<http://www.worcestershire.gov.uk/partnership/>

### Regional LSCB Working

Where appropriate, efforts are made to rationalise and streamline work across the four West Mercia boards (Worcestershire, Telford & Wrekin, Shropshire and Herefordshire). Links are made through the Independent Chair and the Board Manager and WSCB Officers. An example of regional working is the production of the West Mercia Consortium Inter-Agency Child Protection Procedures. WSCB has this year been involved with two West Midlands LSCB initiatives: a proposal to develop a West Midlands regional performance framework and a set of West Midlands child protection procedures, both resourced by the Government's innovation funding.

### WSCB Membership

Membership of the WSCB is statutory for a number of partners as outlined in Working Together (2015). WSCB has recruited two lay members who participate in the meetings and function of

the Board to represent the local community. Other agencies represented are education, housing associations and the voluntary and community sector. This year WSCB has been pleased to welcome representatives from the independent school sector, further education colleges and early years.

Attendance at Board meetings can be found in Appendix 3.

## WSCB Structure and Staffing

2015/16 has seen some key changes implemented in the way the Board operates, supported by its new structure. The sub groups are now all chaired by a Board member, thus giving the strategic Board direct line of sight to the activity being undertaken on behalf of the Board and increasing ownership. Sub group chairs are now delegated to make some decisions on behalf of the Board, thereby acting as a filter which reduces the workload of the strategic Board and enables it to focus more readily on the most critical safeguarding issues. During the course of the year some evaluation of the new structure has been undertaken and recommendations will be implemented during the coming year.

An outline of the sub and activity groups can be found in [Appendix 5](#).

The Board met five times during the year but meetings are now being held quarterly. Sub groups also meet quarterly, however activity groups can meet more frequently in accordance with the demands of their respective work plans.

In addition to the Independent Chair of the Board, WSCB also funds a data support officer and an independent chair who leads the Quality Assurance Group (QAG) and Multi Agency Case File Audit (MACFA) panel. The Board has prioritised these functions to support its quality assurance role where the collection and scrutiny of both qualitative and quantitative data is critical.

The Business Support team has remained stable in terms of personnel and no vacancies have been carried.

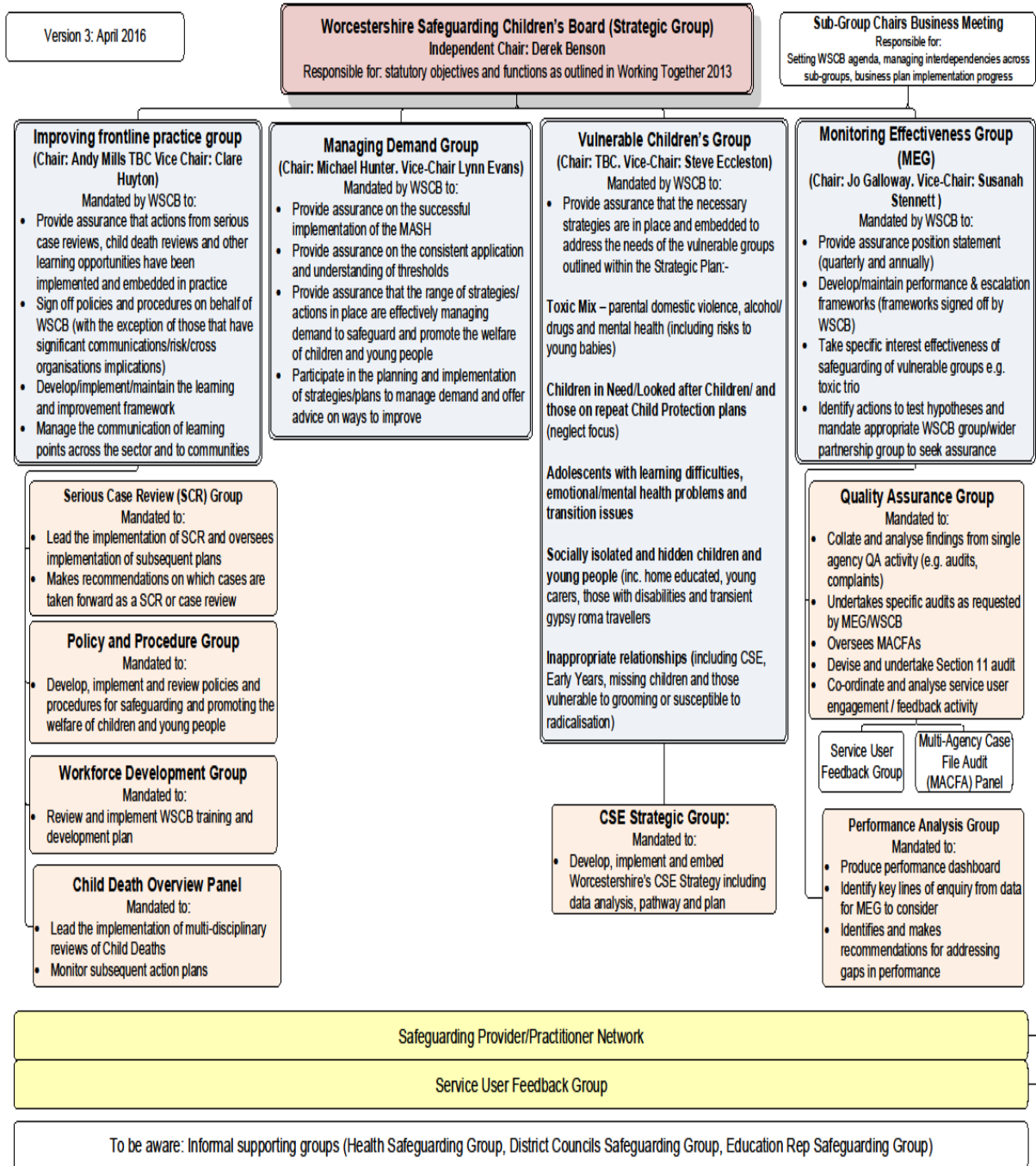
## Financial position

Through careful management of the Board's budget and by increasing training fees where necessary the Board has maintained its holding account for contingency planning. Partner contributions have been sustained at the same level for a number of years and it is not expected they will rise in 2016/17. These contributions fund both the work of the Board and the salaries of the business support team. A separate Serious Case Reviews fund has now been agreed and this will come into effect next year. The fact that contributory partners have agreed to identify money for SCRs in addition to their existing contribution to the Board's budget, especially in the current climate of cuts to services, is evidence of the high priority given by them to the safeguarding agenda in Worcestershire.

## Financial Statement

	<b>Board Budget</b>	<b>Training Delivery</b>	<b>Total</b>
	<b>Expenditure £</b>		
Salaries	199,685		199,685
Independent Chair	18,528		18,528
Youth Advisory Board	3,000		3,000
Serious Case Reviews and Case Reviews	1,844		1,844
Performance resources	24,220		24,220
Administration and business costs	11,024		11,024
Training Expenditure (excluding salaries)		24,831	24,831
E-Academy (E-learning)		17,563	17,563
<b>Total Expenditure</b>	<b>258,300</b>	<b>42,393</b>	<b>300,694</b>
	<b>Income £</b>		
Agency Contributions			
WCC - 50%	(122,647)		(122,647)
Health - 35%	(86,000)		(86,000)
Police - 10%	(24,529)		(24,529)
National Probation Service - 0.9%	(2,250)		(2,250)
Community Rehabilitation Company - 0.9%	(2,250)		(2,250)
CAFCASS - 0.4%	(550)		(550)
District councils - 2.5%	(5,984)		(5,984)
Core training, Early Years and GP		(54,450)	(54,450)
Income from E-Learning		(11,988)	(11,988)
<b>Total income</b>	<b>(244,210)</b>	<b>(66,438)</b>	<b>(310,648)</b>
Net Expenditure	14,090	(24,044)	(9,954)
Holding account b/f as at 01.04.15	(27,978)		(27,978)
Holding account as 31 <sup>st</sup> March 2016	(13,888)	(24,044)	(37,932)

# Appendix 5 Board Structure



## Appendix 6 Agency Responses to Challenges Identified in the 2014/15 Annual Report

Development area as outlined in 2014/15 Annual Report	Responses & Achievements
<b>Worcestershire County Council - Children's Social Care</b>	
<p>Ongoing Adult Social Care engagement</p> <p>Promotion of Think Family approach Provide assurance of sound commissioning practice around safeguarding</p> <p>Work collaboratively to deliver the CSE strategy</p> <p>Corporate Parenting Board to provide assurance re timely LAC health assessments and pathway planning</p> <p>Children's Social Care Performance Board to provide assurance of safeguarding services across Early Help, CSC and the SQAS</p>	<p>Adult Social Care is co-located with partners as part of the MASH ethos but not yet part of the Integrated Family Front Door.</p> <p>'Think family' is inherent in social care practice and a core principle within the Back to Basics Improvement Plan. Developments within the 'family front door' seek to strengthen this further across the Council and partners, with both co-location and virtual engagement. Furthermore our Connecting Families initiative and 0-19 commissioning seek to 'embed' this philosophy and way of working.</p> <p>Children's Social Care is fully engaged with key partners to deliver the WSCB CSE Strategy. We have invested in Social Work practitioners at the 'family front door' whom work closely with the Police, CSE Team and other partners to identify children suffering CSE and therefore in need of protection and those at risk of CSE and therefore in need of prevention and support services. We are gradually increasing intelligence to inform our problem profile leading to increasingly targeted strategic responses and disruption activity.</p> <p>Children's Social Care performance monitoring has been built into 'business as usual' and is now reported through the Back to Basics Safeguarding Improvement Board chaired by the Chief Executive. This evidences consistent and sustained areas of improvement in key areas of practice such as seeing children in line with prescribed timescales; timeliness of assessments under Section 47 (child protection enquiries) and the timeliness of assessments. Furthermore there is evidence of increasing 'management grip' and an increasingly proactive approach to addressing poor performance.</p>
<b>Worcestershire County Council – Education</b>	
<p>Address safeguarding concerns for elective home educated children</p> <p>Act on relevant recommendations from the Early Years Strategic Inquiry</p> <p>Work to include all educational establishments in assuring consistent safeguarding practice across schools/colleges in all sectors</p>	

<b>Worcestershire Safeguarding Adults Board</b>	
<p>Work to establish more consistent approaches to safeguarding across the two boards</p> <p>Establishing leads with key partnerships on agreed priorities</p> <p>Work jointly on cross-cutting issues including the toxic trio, forced marriage, FGM, Think Family, exploitation (CSE/modern slavery), and transition issues particularly adolescent mental health</p> <p>Better use of dual members on both WSCB and WSAB</p>	<p>Ensuring that young people are not overlooked and issues relating to young adults are represented in the Board's assurance processes.</p> <p>We are taking forward the lessons learnt from SCRs/Safeguarding Adults Reviews (SARs) where young people have been abused and sharing these lessons with other Board's regionally and nationally.</p> <p>The Board has developed a Prevention Strategy that contains objectives that include young adult issues e.g. scams, sexual exploitation, hate and mate crime.</p> <p>Ongoing activity</p>
<b>Police</b>	
<p>Continuity in safeguarding personnel</p> <p>Evidence of good safeguarding practice by operational staff</p> <p>Assurance re impact of resource cuts on safeguarding activity</p> <p>Effective partnership working in key developments including MASH and CSE</p> <p>Good and timely communication with the Board and strong strategic leadership</p>	<p>Worcestershire has introduced a new 'Pathfinder' model. The increased teams will identify appropriately trained staff to deal with CP issues and require outstanding actions to be passed to those remaining on duty to complete. This will appropriately expedite investigations. The Pathfinder model is in the phased process of rolling out across the alliance. Operational staff have continual access to safeguarding processes, information and supervision.</p> <p>The implementation of the single CID model will incorporate within it existing members of specialist PVP teams thereby retaining those specialist staff but spreading them out across the larger teams to share that expertise and experience. There is an expectation that traditional non PVP detectives will be exposed more to PVP related crimes with the knowledge and experience of those around them to support their development. It is intended that this will upskill all Detective Officers in dealing with PVP related crimes as well as other crime types thus making protecting vulnerable people everyone's business and in line with the Alliance vision to be great at protecting the vulnerable.</p> <p>The Alliance are committed and are currently actively planning an uplift in PVP related training courses to ensure that officers have the knowledge and training to complement their new role.</p> <p>The Alliance has introduced new working practices, with permanent dedicated teams to proactively target individuals involved in possession and sharing of IIOC and online CSE.</p> <p>Although the Pathfinder model is commencing across the Alliance, there remains a Strategic PVP team to ensure a full overview of policy, procedure, communication and leadership.</p>
<b>Probation</b>	
<p>Managing risks to safeguarding under the new arrangements</p>	<p>Systems in place to assess safeguarding risks within NPS and CRC and to share information; National Offender Management Services</p>



<p>Continuing full engagement as Board members by both the NPS and CRC</p> <p>Evidence of good sharing of information and communicating between the NPS and CRC</p> <p>Evidence of improved safeguarding practice following the HMIP Thematic Inspection</p> <p>Work to the agreed protocol with the LSCBs</p>	<p>audit of risk assessment in CRC in Autumn 2015 provided assurance and led to refinements in process.</p> <p>NPS and CRC staff continue to be fully engaged as Board members.</p> <p>Formal information sharing systems supplemented by regular planned information contact between operations middle and senior managers.</p> <p>Within CRC inspection action plan delivered; internal audit in spring 2015 provided evidence of quality of safeguarding practice and issues for further development. Further audit work planned for 2016 to follow up training input.</p> <p>Protocol fully in use.</p>
<b>District Councils</b>	
<p>Assurance of consistency of ownership of safeguarding responsibilities across all District Councils and by all Chief Executives</p> <p>Engagement in delivering the CSE Strategy</p> <p>Assurance of engagement by all housing providers/ commissioners/ contractors with safeguarding issues</p>	<ul style="list-style-type: none"> <li>• Meeting between Chief Executives and Safeguarding leads with WSCB officer held to ensure attendance at relevant meetings. District Council representative appointed to all Board Sub-groups</li> <li>• Process in place to ensure communications and actions from the Board are disseminated to relevant District departments.</li> <li>• Engaged in delivering CSE strategy and action plan and links put in place to the Community Safety Partnerships. District attendance at the monthly CSE Panel. CSE Awareness Raising to the voluntary and community sector.</li> <li>• A review and activity undertaken by each District to ensure safeguarding duties are appropriately transferred to commissioned/contracted providers.</li> <li>• Safeguarding awareness raising in place for whole workforce and District Councillors.</li> </ul>
<b>Early Help</b>	
<p>Clarify what the Board needs to see to be able to assure itself on the effectiveness of Early Help i.e. what does good look like?</p> <p>Clarify the activity that the WSCB (and single agencies) need to do to provide the assurance</p>	<p>At its meeting in January 2016 the Board's Managing Effectiveness Group received a presentation outlining the systems in place to monitor the effectiveness of commissioned Early Help services. As part of the presentation the wider definition of Early Help (providing support as soon as a problem emerges, at any point in a child's life, from the foundation years through to the teenage years. Early Help can also prevent further problems arising, for example, if it is provided as part of a support plan where a child has returned home to their family from care) was discussed and it was acknowledged that not all early interventions can be monitored for effectiveness in the same way.</p> <p>The presentation gave an overview of the monitoring of commissioned services in the areas of</p> <ul style="list-style-type: none"> <li>- Performance &amp; Impact (outputs, outcomes and trends)</li> <li>- Contract compliance</li> <li>- Financial control/budget control</li> <li>- Quality and safety of service delivery</li> </ul> <p>Monitoring the quality and safety of service delivery includes auditing of case files to ensure that guidance on effective Early Help is followed i.e. that local agencies and services are working together to:</p>

	<ul style="list-style-type: none"> <li>• identify children and families who would benefit from Early Help;</li> <li>• undertake an assessment of the need for Early Help; and</li> <li>• provide targeted Early Help services to address the assessed needs of a child and their family which focuses on activity to significantly improve the outcomes for the child</li> </ul> <p>The presentation contained examples of performance dashboards produced within Children's Services (by provider and by district/countywide.</p> <p>Following the presentation the group agreed that it was assured of the effectiveness of the systems in place to monitor Early Help provision and of the effectiveness of the provision from the performance data seen.</p>
<b>Health &amp; Wellbeing Board</b>	
<p>Review of the agreed protocol to take account of the new arrangements regarding oversight of the CYPP and Early Help Strategy</p> <p>Engagement with safeguarding issues in wider health matters</p> <p>Evidence of attention to safeguarding issues in respect of its priorities and to a focus on children</p>	<ul style="list-style-type: none"> <li>• Protocol has been reviewed</li> <li>• The H&amp;WBB now has oversight of the CYPP and receives a progress update every 6 months</li> <li>• An all age prevention policy has been agreed and incorporated into the new Joint Health &amp; Wellbeing Strategy, and the Early Help Strategy no longer exists. The all-age Prevention Policy, JHWS and WCSB thresholds document form the prevention &amp; early intervention strategic approach for CYP &amp; families.</li> <li>• The 14/15 WCSB annual report and CDOP annual report went to the September 15 HWBB. It was agreed that the HWBB would identify cross cutting themes where the HWB had a role to play in reducing risks to children</li> <li>• The impact on safeguarding children and safeguarding adults have both been incorporated in the H&amp;WBB agenda items template</li> </ul>
<b>Housing Providers</b>	
	<ul style="list-style-type: none"> <li>• WCSB newsletter circulated amongst all housing providers</li> <li>• Regular updates provided to Worcestershire Strategic Housing Partnership</li> <li>• Informal discussions on learning from individual cases through Fusion partnership</li> <li>• New youth board (YOBs) set up at Fortis which complements Teen champs and gets2gether clubs</li> <li>• Joint housing providers event planned to share learning and raise awareness of safeguarding 2016/17</li> <li>• Safeguarding to be area discussed at up and coming Fortis Tenants Day 2016/17</li> <li>• Housing providers participating in communities week in Sept 2016 which will be opportunity to raise awareness of safeguarding amongst our communities</li> </ul>
<b>Youth Offending Service</b>	
	<p>Not included in 2014/15</p>
<b>Health Providers</b>	
<p>Continuing assurance re: capacity and effectiveness of Health Visitors, School Nurses and Midwives as providers of</p>	<p>The Starting Well tender has a focus on universal services contributing to the Early Help offering with a focus on targeting services to children and families dependent on need and when they need extra support. This also links in with the development of the Family Front Door.</p>

<p>universal services which contribute to EH offering</p> <p>Assurance re all Health staff receiving appropriate safeguarding training</p> <p>Evidence of good communication between Health providers and with CSC</p>	<p>Levels of compliance with attendance at safeguarding children training are monitored by CCGs. Moving forward to 2015/16 reports will reflect if staff have attended and refreshed at the correct level.</p> <p>Co-location at Wildwood. Participation in MASH and EVODA (Every Victim of Domestic Abuse)</p>
<p><b>Health Commissioners</b></p>	
<p>1. Appointment of a Named Professional for Primary Care</p> <p>2. Evidence of improved GP input to child protection processes e.g. case conference attendance and reports</p> <p>3. Assurance about the adequacy of provision for young people with the full range of mental health needs</p>	<p>1. Appointed</p> <p>2. GPs now receive the same revised template as all partner organisations to complete for case conference. WCC intend to collect data on submission of reports to case conference. GPs are reliant on receiving notification for a case conference in a timely manner. This is work being undertaken by WCC through the 'Back to Basics' programme to ensure Social Workers ask families who their GP is. The correct information can then be recorded on Frameworki and the correct GP notified of a case conference.</p> <p>3. The Early Help Needs Assessment identified a renewed focus was required to support emotional health &amp; wellbeing and supporting the resilience of CYP &amp; families. In response a new integrated prevention service for 0-19s has been designed and is currently out to tender called 'Starting Well'.</p> <p>The Starting Well tender includes a new service element for tier 2 emotional health &amp; wellbeing service for 0-19s with mild to moderate emotional and mental health difficulties comprising of on-line counselling and face to face support.</p> <p>The emotional wellbeing and CAMHS transformation is underway and monitored by NHSE. Th plan is comprehensive to improve provision at every 'tier'. The Starting Well tender includes a tier 2 emotional wellbeing service which includes face to face evidenced based therapy and online counselling. CAMHS is being redesigned, and this will include the development of a new eating disorder service and a design which reduces waiting times.</p>
<p><b>Worcestershire Safeguarding Children Board</b></p>	
<p>Develop a broader understanding and strategic oversight of the whole system</p> <p>Continue to develop scrutiny and challenge role, taking collective responsibility for improvements and outcomes</p> <p>Implement the new structure,</p>	<p>Conducted a whole system overview exercise and reported findings to the Board.</p> <p>Exception reports received on areas of concern and risks are regularly monitored. Induction for new Board members now includes a section on challenge. 2016/17 needs to focus on ongoing scrutiny of performance information to monitor practice improvements.</p> <p>Board members chairing groups. Evaluation of Board structure</p>

<p>securing attendance from relevant agencies and full engagement by all members including chairing sub groups and involvement of relevant staff in Board groups</p>	<p>undertaken and further developments to be made in 2016/17.</p>
<p>Monitor the cumulative impact of agency cuts on safeguarding</p>	<p>Section 11 audit requested assurance re. impact of agency cuts and commissioning processes. Further assurance required to assess cumulative impact.</p>
<p>Ensure focus on quality outcomes, giving consideration to user feedback to make improvements</p>	<p>Service User feedback was a focus in Section 11 audit and a dip sample of evidence is being undertaken in 2016/17</p>
<p>Establish the Board's role in monitoring the effectiveness of Early Help</p>	<p>Established the role of the Board in monitoring the effectiveness of Early Help and identified areas that could be realistically monitored. Assurance received regarding commissioned Early Help provision.</p>
<p>Implement the CSE Strategy</p>	<p>CSE Action Plan agreed and nearing full implementation. CSE Strategic Group to continue to sit until action plan fully implemented.</p>
<p>Board members prepared for an Ofsted inspection</p>	<p>Inspection document and self-assessment produced.</p>
<p>Develop analytical skills when receiving data and maintain a focus on identified groups of vulnerable children</p>	<p>MEG continues to develop analytical skills but further partner agency involvement required on the Performance Group. Ongoing scrutiny and review of performance data required.</p>
<p>Improve the evidence trail and feedback from the SCR learning</p>	<p>Starting to receive feedback from partner agencies as to how SCR learning has been disseminated. 2016/17 focus on assessing changes to practice.</p>

## Appendix 7 Glossary

CAFCASS	Children and Families Court Advisory and Support Service
CAMHS	Child and Adolescent Mental Health Services
CCG	Clinical Commissioning Groups
CDOP	Child Death Overview Panel
CiN	Child in Need
CME	Children Missing Education
CPC	Child Protection Conference
CPP	Child Protection Plan
CQC	Care Quality Commission
CRC	Community Rehabilitation Company
CSC	Children's Social Care
CSE	Child Sexual Exploitation
EH	Early Help
EHA	Early Help Assessment
EHE	Elective Home Education
EHN	Early Help Notification
EYSI	Early Years Strategic Inquiry
FGM	Female Genital Mutilation
HACT	Health and Care NHS Trust
HMIC	Her Majesty's Inspectorate of Constabulary
HWB	Health and Well Being Board
ICPC	Initial Child Protection Conferences
IMD	Index of Multiple Deprivation
LAC	Looked after Children
LGA	Local Government Association
LSOAs	Lower Layer Super Output Area
MACFA	Multi Agency Case File Audit
MASH	Multi Agency Safeguarding Hub
MEG	Monitoring Effectiveness Group
NPS	National Probation Service
QAG	Quality Assurance Group
SCR	Serious Case Review
SUDIC	Sudden, Unexpected Deaths in Infants and Children
WCC	Worcestershire County Council
WFADA & SV	Worcestershire Forum Against Domestic Abuse and Sexual Violence
WMP	West Midlands Police
WMQRS	West Midlands Quality Review Service CAMHS
WSAB	Worcestershire Safeguarding Adults Board
WSCB	Worcestershire Safeguarding Children Board
YABS	Youth Advisory Board (Safeguarding)
YOS	Youth Offending Service



## **CHILDREN AND FAMILIES OVERVIEW AND SCRUTINY PANEL 31 AUGUST 2016**

### **THE PROVISION OF EFFECTIVE PREVENTION SERVICES FOR CHILDREN AND YOUNG PEOPLE INCLUDING OPTIMISING THE USE OF CHILDREN'S CENTRE BUILDINGS**

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#### **Summary**

1. The Cabinet Members with Responsibility for Children and Families, and Health and Well-being and the Director of Children, Families and Communities and Interim Director of Public Health have been invited to the meeting to discuss the Provision of Effective Prevention Services for Children and Young People Including Optimising the Use of Children's Centre Buildings.
2. [If others are to be invited to the meeting please provide details here]

#### **Background**

3. On 16 June 2016, Cabinet considered the Provision of Effective Prevention Services for Children and Young People Including Optimising the Use of Children's Centre Buildings and **RESOLVED: that**
  - a) **the outcome of the procurement process for the integrated 0-19 prevention service set out in paragraph 3 of the report be noted;**
  - b) **the future plans for delivering effective prevention services, within the financial parameters set out in the report (particularly paragraphs 4 to 8 and 35 to 38) and the medium term financial plan be approved, subject to any required consultation as set out in the report;**
  - c) **consultation on change of use for those children's centre buildings where there is likely to be significant change as outlined in paragraph 26 (b) and Appendix 2 with the addition of Brookside at Comberton Primary School – Wyre Forest be authorised;**
  - d) **the proposals for the future use of children centre buildings where consultation is not required as outlined in paragraph 26 (c) and Appendix 2 other than in relation to Brookside at Comberton Primary School – Wyre Forest be approved;**

- e) **the summary of impact of the proposals for the future use of buildings as outlined in paragraphs 27 to 31 and the need for further equality impact analyses to inform the final decisions in respect of the proposed changes outlined in paragraph 40 be noted;**
- f) **the final decisions for the use of children's centre buildings, where consultation is required, be delegated to the Cabinet Member with Responsibility for Children and Families, having regard to the outcomes of those consultations and equality impact analyses; and**
- g) **the Director of Children, Families and Communities and the Interim Director of Public Health be authorised to take all necessary steps within their respective responsibilities to give effect to the above including varying and/or extending the existing contracts of the district-based early help providers and public health nursing functions, and the Director of Commercial and Change be authorised to agree appropriate terms for the future use of children's centre buildings.**

4. In accordance with the Council's Constitution, parts (c) to (g) were subsequently called-in. If a decision is called-in, it cannot be implemented until the call-in process is completed.

5. The call-in was considered by the Overview and Scrutiny Performance Board (OSPB) on 1 July 2016. The Board agreed to accept the decisions taken by Cabinet and clear implementation on the 1st July.

6. The Board did however agree to forward the following comments to Cabinet:

- That the final decision on the use of children's centres buildings, where consultation is required, is made at full Cabinet and not by Cabinet Member delegation. The purpose of this request is to provide clearer transparency of the decision in the public's eye, provide a further opportunity for public participation at a Cabinet meeting on the matter and to ensure all Cabinet Members fully understand the implications of the decision being taken;
- That the Children and Families O&S Panel should undertake further pre-decision scrutiny prior to the conclusion of the consultation and report back to OSPB on this. OSPB can then provide Cabinet with feedback before they take the final decision; and
- The Board welcomes the Cabinet Member's offer to hold meetings with local members on Children's Centre sites, in order to discuss local options.

7. This Panel met on the 15<sup>th</sup> July 2016 to further discuss the decisions taken by Cabinet and to question representatives from some Early Help providers and Schools.

### **Further Information**

8. The Chairman of the Children and Families Overview and Scrutiny Panel has requested further information be provided in order to address concerns expressed in the local media; and to ensure that County Councillors are fully aware of the decision that is to be taken by the Cabinet member with Responsibility for Children and Families in early September 2016.



9. This further information as requested by the Chairman of the Panel is detailed below (Requests are detailed in italics).

## **CHILDREN CENTRE'S**

10. *Provide a list of **all** Children Centre's detailing **all** services that they currently deliver and a list of services that will definitely continue.*

All building will continue to provide advice and guidance including signposting to professionals, activities and local provision. The embedded document outlines the proposed changes for those buildings that have been subject to a formal consultation. The detail in paragraph 14 outlines the proposals for the remaining buildings.

Appendix A – details a table showing the proposed future use of each Children Centre

11. *A list of the budgets for every Children Centre before changes and after proposed change.*

This isn't possible to provide as Children Centres are not commissioned services on a centre by centre basis and don't ask Providers to financially report on this basis. The only centre by centre costs we have are related to running costs (e.g. utilities) and a breakdown is attached at Appendix B.

12. *A list of what the statutory sure start services are (Extract below is taken from the Statutory Guidance – April 2013)*

A Sure Start children's centre is defined in the Act as a place or a group of places:

- which is managed by or on behalf of, or under arrangements with, the local authority with a view to securing that early childhood services in the local authority's area are made available in an integrated way;
- through which early childhood services are made available (either by providing the services on site, or by providing advice and assistance on gaining access to services elsewhere); and
- at which activities for young children are provided.

It follows from the statutory definition of a children's centre that children's centres are as much about making appropriate and integrated services available, as it is about providing premises in particular geographical areas.

Early childhood services are defined as:

- early years provision (early education and childcare);
- social services functions of the local authority relating to young children, parents and prospective parents;
- health services relating to young children, parents and prospective parents;
- training and employment services to assist parents or prospective parents; and

- information and advice services for parents and prospective parents.

A children's centre should make available universal and targeted early childhood services either by providing the services at the centre itself or by providing advice and assistance to parents (mothers and fathers) and prospective parents in accessing services provided elsewhere. Local authorities must ensure that children's centres provide some activities for young children on site.

*13. A definition of 'significant change' being used in regards to changes in provision at Children Centres and in early help provision.*

There is no statutory definition of 'significant change' only what is referred to in the Statutory Guidance which states:-

Local Authorities must ensure there is consultation before:

- Making a significant change to the range and nature of services provided through a children's centre and / or how they are delivered, including significant changes to services provided through linked sites.

The June 2016 Cabinet report set out these proposals, which if implemented would mean no closure of Council-owned children's centre buildings as all of the proposals would result in the ongoing delivery services for young children. However, the changes proposed in 18 of the 32 buildings were considered (using the professional judgement of Officers) to be significant and therefore formal consultation was required, to ascertain their impact, before decisions to implement could be made. It is important to note that there is a wide and varied use of centres so the impact of proposed changes differs between centres.

*14. Explanation of why there has not been any consultation on changes for each children centre that was not included in the consultation exercise, with details of what changes are expected at these centres.*

The above interpretation of significant change didn't apply for the 14 remaining Children's Centre buildings. Whilst changes are expected across all of the 14 sites they are not subject to the cumulative impact of changes proposed at the other sites.

For example, there will be a change of lease holder at Oaktrees and St Luke's First School – Redditch to the Childcare Provider. However, the Childcare Provider is currently the main user of this site so this change just represents formalising the current and isn't considered to be significant.

Centre	Proposals for future use	Proposed lease holder
Pear Tree Sidemoor - Bromsgrove	This is a standalone centre and will be used by the Parenting and Family Support provider, term time only childcare provider and health provider*  A number of sessions are provided at and from this centre – independent providers will be able to continue to deliver from this building alongside parenting sessions and family support from the	Parenting and Family Support provider  (Redditch Borough Council)

Centre	Proposals for future use	Proposed lease holder
	provider. This will be the main base for the provider in Bromsgrove.	
Sunshine Poolbrook Centre – Malvern Hills	<p>This space forms an integral part of a wider centre and will become the main base for the provider in Malvern, alongside health provision*</p> <p>There will be a reduction in universal sessions provided directly but the provider will have some capacity to support delivery of sessions by independent providers and parent led provision, alongside their own parenting support sessions and delivery of family support. The provider will also support the transition of services and service users from Evergreen as the lease for that building expires in 2017.</p>	Parenting and Family Support provider (Action 4 Children)
Sunshine The Grove Primary School – Malvern Hills	The use of this centre as an outreach centre and base for parenting and family support services will continue.	Parenting and Family Support provider (Action 4 Children)
Hollytrees at St Stephen's First School - Redditch	This centre is leased to Redditch Borough Council on a long term lease and will continue to be used as a base for parenting and family support provision, by independent providers and health for activity sessions, clinics and other health provision* and for the on-site childcare/nursery	Parenting and Family Support provider (Redditch Borough Council)
Hollytrees at St George's First School - Redditch	This is a small outreach site and few services are currently delivered from the site. The proposal will allow the school to use the space for funded childcare places.	St George's First School
Oaktrees at St Luke's First School – Redditch	Childcare provider will maintain and increase childcare provision on this site	Little Oaks preschool
Buttercup at Fairfield Centre – Worcester City	<p>Continued use by parenting and family support providers alongside health providers* and childcare provision, for a wide range of activities including parenting support and family support.</p> <p>There will be a reduction in universal sessions provided directly but the provider will have some capacity to support delivery of sessions by independent providers and parent led provision, alongside their own parenting support sessions and delivery of family support.</p>	Parenting and Family Support provider (Action 4 Children)
Saffron at Stanley Road Primary School – Worcester City	Continued use by parenting and family support providers alongside health* provision for a wide range of activities including parenting support and family support.	Parenting and Family Support provider (Action 4 Children)

Centre	Proposals for future use	Proposed lease holder
	<p>There will be a reduction in universal sessions provided directly but the provider will have some capacity to support delivery of sessions by independent providers and parent led provision, alongside their own parenting support sessions and delivery of family support.</p>	
<p>Tudor Way at Dines Green Primary School – Worcester City</p>	<p>Continued and expanded use by parenting and family support providers, alongside health* and a childcare provider, and with the potential for use for social care provision.</p> <p>The current childcare provider has a long term lease.</p> <p>A wide range of activities are delivered at this site in partnership with health. There will be a reduction in universal sessions provided directly but the provider will have some capacity to support delivery of sessions by independent providers and parent led provision, alongside their own parenting support sessions and delivery of family support.</p>	<p>Parenting and Family Support provider (Action 4 Children)</p>
<p>Blossomvale at Abbeypark First School - Wychavon</p>	<p>This is a small room situated directly between two schools and will primarily be used as a base for parenting and family support provision both on and off site and for health provision. The provider will have some capacity to support delivery of sessions by independent providers and parent led provision.</p>	<p>Parenting and Family Support provider (4Children)</p>
<p>Greenwood at Wychbold First School</p>	<p>This centre (one room and one small office space) is currently used as an office and meeting space only – transfer to school to meet basic need and make available for multi-agency use for meetings</p>	<p>Wychbold First School</p>
<p>Orchard vale at Evesham Nursery School – Wychavon</p>	<p>Continued mixed use including parenting, family support, health and increased use for childcare provision.</p> <p>The main activity room will be used by the nursery (day and term time only) and will be available for the provision of activities and parenting support outside of these times. Health provision will continue in a separate room*</p> <p>There will be a reduction in universal sessions at this centre, as these are provided elsewhere in the community already.</p>	<p>Evesham Nursery school</p>
<p>WANDS at Westlands First School - Wychavon</p>	<p>Continued and expanded use by parenting and family support providers including childcare, family support and potential expanded community use.</p>	<p>Parenting and Family Support provider (4Children)</p>

Centre	Proposals for future use	Proposed lease holder
	A wide range of activities are delivered at this site in partnership with health*. There will be a reduction in universal sessions provided directly but the provider will have some capacity to support delivery of sessions by independent providers and to continue parent led provision, alongside their own parenting support sessions and delivery of family support.	
Halfcrown wood at St Bartholomew's Primary School – Wyre Forest	Continued use by parenting and family support providers.  A wide range of activities are delivered at this site in partnership with health*. There will be a reduction in universal sessions provided directly but the provider will have some capacity to support delivery of sessions by independent providers and to support parent led provision, alongside their own parenting support sessions and delivery of family support.	Parenting and Family Support provider (10:32)
<p>* Health provision can include midwife clinics, health visitor drop in sessions or routine appointments, speech and language provision and in some cases paediatric or specialist clinics. These services are provided by other organisations who will from time to time review and change their provision in line with contracts and demand and other available community buildings (e.g. Health Centres). It cannot be guaranteed therefore that current health provision at these centres will remain unchanged.</p>		

15. A definition of 'those in most need' being used by Officers for this process.

Worcestershire Children's Safeguarding Board has recently refreshed its Levels of Need Guidance – this will be used by all Providers (and all professionals working in Worcestershire) on assessing risk and need. A link to the guidance is available here. [Levels of Need Guidance | Worcestershire County Council](#)

In addition to this Providers are being asked to target effort at the bottom 40% areas of disadvantage (Indices of Multiple Deprivation). This is based on the findings of the early help needs assessment and the strong correlation between poor outcomes and disadvantaged areas.

16. We know Early Help Providers have been directly consulted but has each Children Centre been consulted by WCC?

All of the Children's Centres are operated by Early Help Providers so by default they have been directly consulted. We have also:

- Promoted an online survey
- Held face to face sessions with service users in all directly affected Children's Centres

- Contacted all members (with an affected Children's Centre on their patch) and offered a face to face session or an additional facilitated session with service users – we haven't had any take up of this so far
- Held two Member briefing to update on proposals and seek feedback
- Written to all schools that are looking to take over the buildings seeking agreement to the proposals
- Had ongoing meeting with providers on proposed changes and how they are working with the community on sharing information and seeking options for sustaining provision

*17. What thought has been given/plans made for other services that are currently delivered in Children Centres such as Foodbanks, Adult Learning, CAB etc*

Wherever possible these services will continue although some may need to re-locate to other community venues if they're currently delivered from Children's Centre buildings. For services such as Foodbanks, existing providers would still continue to promote and signpost these services to vulnerable families. We would also look to promote / signpost these services through online information, advice and guidance as well as through the Family Front Door service.

## **PUBLIC HEALTH**

*18. Details of any change regarding public health element being proposed*

In November 2015, Cabinet agreed a new integrated prevention service for 0-19s using an evidence-based approach to identify and support needs, risk factors and issues early as they emerge to deliver prevention through a progressive universalism approach. This means providing some service for everyone, using those services to find those who need a higher level of support and providing extra support at intensity according to identified need.

The services in scope were the 0-19 public health nursing services and some of the provision delivered by Early Help Providers. An evidence based specification was prepared and tendered but no compliant bids were received. In June 2016, Cabinet approved a revised plan to still move towards the vision of the integrated 0-19 prevention service (Starting Well), within the available budget envelope, but to do this by varying, extending, aligning or integrating existing contracts by 1 October 2016 up to 31 March 2019.

The 0-19 Public Health Nursing service elements including Health Visiting, Family Nurse Partnership, Breastfeeding Support Service and School Health contracts will be extended until March 2019 and redesigned as an overall 0-19 integrated public health nursing service.

The service will deliver prevention by building community capacity, strengthening family and community resilience and providing the universal and targeted requirements of the nationally mandated Healthy Child Programme. The service will be professionally led by a skilled and competent workforce, integrating a range of practitioners into skill mixed teams. The workforce will include health visitor and community public health nurses, nursery nurses, health care assistants, peer supporters and volunteers and support workers. The service will be delivered in a range of community assets and settings, including homes and schools.

Most of the public health elements proposed within the 0-19 service are mandatory and will continue to be provided through a progressive universalism approach, where extra support is provided in accordance with need. The service will however, be required to deliver a 10% saving due to the reduction in the Public Health Ring Fenced Grant as detailed in the July 2015 Cabinet Paper. These savings will be achieved through integration and amendment of skill mix of the workforce across the service elements. This will mean that all children, young people & families will continue to be contacted/seen universally for their mandatory health & developmental reviews and checks across the age range but that the skill mix of the workforce providing this might differ. Those most in need or more vulnerable will be seen by more senior and experienced staff than those children/families with better outcomes.

Over time, as the Starting Well vision is implemented, the Public Health elements will be integrated with the revised services provided by the existing Early Help providers. The Early Help Providers are being commissioned to provide evidence-based parenting support that will be predominantly focussed in areas of disadvantage and community capacity building. All providers will be required to work together to develop the prevention service, improve outcomes, remove duplication and/or repetition and determine integrated service pathways. A Starting Well Transformation Board, and programme of work, is being initiated to oversee all of this work.

In addition to providing parenting support, the Early Help providers (to be re-named Parenting and Family Support Providers) will also be commissioned to deliver targeted family support and support to those young people who are at risk of becoming not in education, employment or training with the remainder of the contract value (£1.5 million) for the same contract length.

*19. How will public health elements be delivered/operate if Children Centre's not part of the consultation close?*

The public health elements can be delivered/operate in a variety of settings and are not reliant on Children's Centre buildings. A minimum service is provided universally to all children, young people & families with any additional interventions or support provided at an intensity in accordance with needs. The service is provided in a variety of settings, often in a families own home or in a health centre, a GP Practice, children's centre, a school or college. Health Visitors do provide health clinics in most Children's Centres, however if the building was not available where possible the service would seek to provide the clinic from an alternative community building in the locality or arrange to see the family at their home.

## **EARLY HELP PROVIDERS**

*20. Contract variation – The variation is too drastic for interim arrangements to be in place for the next 2 years and could lead to a loss of existing skill sets relating to early help services. Can you provide us with a response to this statement?*

With any level of change there is always a risk that skill sets will be lost. All Providers who have a fundamental role in delivering the ambition of the 0-19 Prevention Offer (Starting Well) are being brought together to work collaboratively on implementing the necessary change. This could result in a sharing of skills e.g. through secondment opportunities or ring-fencing roles for certain jobs.

## **Purpose of the Meeting**

21. The purpose of the meeting will be as follows:

- to provide an opportunity for clarification on matters that Members and the Public may not understand;
- to clarify the extent of the change in budget and the consequences of this change; and
- to determine whether it would wish to carry out any further scrutiny.

## **Background Information**

Agenda Report and Minutes of Cabinet: dated 16 June 2016 available on the County Council Website [here](#)

Agenda Report and Minutes of the Overview and Scrutiny Performance Board dated 1 July 2016 available on the County Council Website [here](#)

Agenda Report and Minutes of the Children and Families Overview and Scrutiny Panel dated 17 March 2016 and 15 July 2016 available on the County Council Website [here](#).

## **Contact Points**

### County Council Contact Points

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## **Background Papers**

In the opinion of the proper officer (in this case the Head of Legal and Democratic Services) there are no further background papers relating to the subject matter of this report:

[All agendas and minutes are available on the Council's website here.](#)



A table showing the proposed future use of each Children's Centre

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A table showing the proposed future use of each Children's Centre

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A table showing the proposed future use of each Children's Centre

## A table showing the proposed future use of each Children's Centre

Centre	Proposed use for building	Services that it is proposed will continue to be delivered	Services and activities that will no longer be delivered at this centre due to proposed changes.	New or additional services and activities being planned
<b>Conkers</b> at Hagley Primary School - Bromsgrove	Transfer to school for mixed use including increased childcare, before and after school provision and health provision	Existing before and after school childcare  Health services including Health Visitor Clinics and Ante-natal Clinics	Activity Sessions Family/Adult Learning Parenting Support  <b>These services may continue to be offered at alternative locations</b>	Extended childcare provision including more funded places, extended after school provision and potential Holiday Club
<b>Tulip Trees</b> at Catshill First School – Bromsgrove	Transfer to school for mixed use including support for children open to social care and health provision	Existing before and after school childcare	Activity Sessions Family/Adult Learning Some parenting Support  <b>These services may continue to be offered at alternative locations</b>  Health services including Health Visitor Clinics and Ante-natal Clinics  <b>These services will continue to be offered at alternative locations</b>	A base for social care  Family support base and provision of parenting courses (school funded)  A base for meetings with families and for the school nurse  Relocation of the Before and After School Clubs

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<p><b>Sunny Fields</b> at Charford First School - Bromsgrove</p>	<p>Transfer to school to extend nursery provision and to release space for before and after school provision, parenting support and health provision</p>	<p>Existing childcare provision</p> <p>Some parenting support</p> <p>Some Family learning</p> <p>Support Group for parents of children with additional needs</p> <p>Health provision including Speech and Language, Educational Psychologists, Family Support, health clinics and antenatal clinics.</p>	<p>Universal Activity Sessions</p> <p>Some family/Adult Learning</p> <p>Some parenting Support</p> <p><b>These services may continue to be offered at alternative locations</b></p>	<p>Extending the current before and after school provision for children and to provide more accommodation for the increasing numbers of two year olds.</p> <p>Parenting Support such as 1-1 Family Links and Triple P</p> <p>Family learning for parents with crèche provision.</p> <p>Better accommodation for current support group for parents with children with additional needs</p>
<p><b>Riverboats</b> at Upton upon Severn Primary School – Malvern Hills</p>	<p>Transfer to school to deliver early years provision along with health and wider early help services</p>	<p>Existing childcare provision</p> <p>Universal activity sessions</p> <p>Health services including Midwife &amp; Health Visitor clinics, breastfeeding support and Speech &amp; Language drop-in</p>	<p>Adult learning</p> <p><b>These services may continue to be offered at alternative locations</b></p>	<p>Extended childcare provision (to include 2 year old funded places) and a variety of sessions including Toddler support</p> <p>Before and after school club</p> <p>Parent workshops</p> <p>Family support</p> <p>Counselling support for all ages</p> <p>Parents forum</p> <p>Fitness classes for both adults and children</p>

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<p><b>Cherry Trees</b> at Batchley First School - Redditch</p>	<p>Transfer to school for mixed use including early years provision</p>	<p>Providing accommodation for partners including Speech and Language, Educational Psychologists, Family Support. Health services including health clinics and antenatal clinics</p> <p>Some Family/Adult Learning and parenting Support</p>	<p>Some universal Activity Sessions</p> <p>Some Family/Adult Learning</p> <p>Some parenting Support</p> <p><b>These services may continue to be offered at alternative locations</b></p>	<p>Community use</p> <p>Parenting groups and family learning</p> <p>Drop in sessions for school family support and SENCO</p> <p>Universal activity ie: playgroup</p> <p>Accommodation for Social Workers</p>
<p><b>Maple Trees</b> at Roman Way First School – Redditch</p>	<p>Transfer to school for mixed use including childcare and health provision</p>	<p>Existing Before and After School Club</p> <p>Accommodation for partners including Speech and Language, Educational Psychologists, OT's and School Nurses.</p>	<p>Universal Activity Sessions</p> <p>Family/Adult Learning</p> <p>Parenting Support</p> <p>Some health services</p> <p><b>These services may continue to be offered at alternative locations</b></p>	<p>Provision of a music and drama centre for nursery to year four children.</p> <p>Provision of multi-sensory room for nursery to year four children.</p>
<p><b>Maple Trees</b> at Tenacres First School – Redditch</p>	<p>Transfer to school to deliver a fully operational nursery including increased early education provision.</p>	<p>Existing childcare provision</p>		<p>The existing childcare provision will continue to operate</p>
<p><b>Oak Trees</b> at Oakhill First School – Redditch</p>	<p>Transfer to school for nurture and health provision and to support work with families (Social Care and family support)</p>	<p>Health provision including School Nurse programmes</p> <p>Some parenting workshops, Family Links and Triple P</p>	<p>Universal Activity Sessions</p> <p>Family/Adult Learning</p> <p>Current parenting support including drop-in sessions</p> <p>Some Health Services such as the pediatric clinic</p> <p><b>These services may continue to be offered at alternative locations</b></p>	<p>Nurture groups for school children</p> <p>School based parental support with the use of a Family Support Worker</p> <p>Extend the current Mentor Link Programme</p> <p>Family Contact</p>

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<p><b>Woodlands</b> at Woodrow First School - Redditch</p>	<p>Transfer to school for mixed use including parenting support, nurture and additional support for 3 - 9 year olds and health provision</p>	<p>Parenting groups and family learning  Health provision including Speech and Language, Educational Psychologists, Family Support, Health clinics and antenatal clinics</p>	<p>Some Family/Adult Learning  Some parenting support such as the Early Help drop ins  <b>These services may continue to be offered at alternative locations</b></p>	<p>Nurture groups  Music space for the community</p>
<p><b>Bluebell Wood</b> at Perrywood Primary – Worcester City</p>	<p>Transfer to school for a range of provision including Health, nursery and a potential Safeguarding Team base</p>	<p>Existing foundation unit  Some Family/Adult Learning  Some parenting support</p>	<p>Universal Activity Sessions  Some Family/Adult Learning  Some parenting support  Some Health services  <b>These services may continue to be offered at alternative locations</b></p>	<p>Extension of the foundation unit - more two year olds and increased funded hours  Family programmes and activities for children during the school holidays.  Supervised contact for looked after children</p>
<p><b>Lavender</b> at Oasis Academy – Worcester City</p>	<p>Transfer to school for mixed use including 2 year old funded provision, before and after school activities and support for parents</p>	<p>Existing childcare provision for NEF and before/after school  Some Family/Adult Learning  Some parenting support</p>	<p>Universal Activity Sessions  Some Family/Adult Learning  Some parenting support  Health services  <b>These services may continue to be offered at alternative locations</b></p>	<p>Childcare provision for funded places and before/after school activities  School based parenting Support</p>
<p><b>Apple Vale</b> at Broadway First School – Wychavon</p>	<p>Transfer to school to deliver provision for parental engagement, joint work with the existing childcare provider and a space for community use</p>	<p>Continued use of the building by the existing childcare provider</p>	<p>Universal activity sessions  Health services  <b>These services may continue to be offered at alternative locations</b></p>	<p>Access for other agencies to hold meetings  Quiet room to meet parents away from main school building  Teaching base as required  Rental opportunities for community use</p>

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<p><b>Rainbow</b> at St Mary's School – Wyre Forest</p>	<p>Transfer to childcare provider with access for health and other providers</p>	<p>Existing full day care nursery provision</p> <p>Health services including health clinics and ante natal and post natal sessions.</p>	<p>Universal Activity Sessions</p> <p>Some Family/Adult Learning</p> <p>Some parenting support such as the Early Help drop ins</p> <p><b>These services may continue to be offered at alternative locations</b></p>	<p>Expansion of the childcare provision to offer additional places, including for funded two year olds.</p> <p>Transitional stay and play sessions</p>
<p><b>Chestnut</b> at Franche First School – Wyre Forest</p>	<p>Transfer to the school to deliver early education provision and continued offer of health related provision</p>	<p>Some Family/adult Learning</p> <p>Some parenting support</p> <p>Health services including health clinics, antenatal clinics, along with any other partners and local community groups</p>	<p>Universal Activity Sessions</p> <p>Some Family/Adult Learning</p> <p>Some parenting support</p> <p><b>These services may continue to be offered at alternative locations</b></p>	<p>Expansion of the current childcare provision including the after school club</p> <p>Family learning and parenting workshops, including evenings</p>
<p><b>Treetops</b> at Birchen Coppice School – Wyre Forest</p>	<p>Develop a shared use between school, early help provider and childcare provision with the school being the lease holder</p>	<p>Existing childcare provision</p> <p>Health services including health clinics, antenatal clinics, along with any other partners and local community groups.</p> <p>Some Family/adult learning</p> <p>Some parenting support</p> <p>Some universal activity sessions</p> <p>Meeting rooms</p>	<p>Some universal Activity Sessions</p> <p>Some Family/Adult Learning</p> <p>Some parenting support</p> <p><b>These services may continue to be offered at alternative locations</b></p>	<p>Increased childcare provision for two, three and four year olds, five days a week potentially all year.</p> <p>Family learning and adult learning</p>
<p><b>Half Crown Wood</b> at Stourport Primary – Wyre Forest</p>	<p>Transfer to school to deliver increased early education provision</p>	<p>Current childcare provision</p>	<p>Universal Activity Sessions</p> <p>Health services such as health clinic and speech and language support</p> <p><b>These services may continue to be offered at alternative locations</b></p>	<p>Expansion of the childcare provision to a full time provision for two years olds during term time. There is also the possibility of extending this to offer all year round provision</p>

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<p><b>Riverside</b> at Bewdley Primary School – Wyre Forest</p>	<p>Transfer to the school to deliver extended nursery provision along with continued use for other providers including health</p>	<p>Current childcare provision</p> <p>Health services including health clinics, antenatal clinics, along with any other partners and local community groups</p> <p>Some family learning.</p>	<p>Universal Activity Sessions</p> <p>Some parenting support such as the Early Help drop in</p> <p><b>These services may continue to be offered at alternative locations</b></p>	<p>Extension of the childcare provision to offer more places and hours</p> <p>Providing accommodation for partners including Speech and Language, Educational Psychologists, Family Support.</p>
<p><b>Brookside</b> at Comberton Primary School – Wyre Forest</p>	<p>Shared use by the school and current early help provider i.e. use of main activity room for before and after school childcare by the school, shared use of the garden space and shared use of kitchen and toilets. Use of main activity room by early help provider outside of this wrap around use</p>	<p>Use for provision of Short Breaks for children with disabilities (office and main activity room)</p> <p>School nursery</p> <p>Provision of parenting and family support, including health provision</p>	<p>None relating to the change to shared use of the building</p>	<p>Before and after school childcare</p>



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District	Children's Centre Building	Running Costs
Bromsgrove	Conkers - Hagley Primary School	£9,420.00
	Pear Trees - Sidemoor	£11,460.00
	Sunny Fields - Charford First School	£7,358.00
	Tulip Trees - Catshill First School	£11,115.00
Malvern Hills	Riverboats - Upton upon Severn Primary School	£8,294.08
	Sunshine - Pickersleigh Poolbrook Centre	£8,910.65
	Sunshine - The Grove Primary School	£1,307.32
Redditch	Cherry Trees - Batchley First School	£3,937.78
	Holly Trees - St Stephen's First School	£9,331.00
	Holly Trees - St George's First School	£1,779.00
	Maple Trees - Ten Acres First School	£14,136.00
	Maple Trees - Roman Way First School	£3,989.00
	Oak Trees - Oak Hill First School	£9,123.00
	Oak Trees - St Luke's First School	£6,755.00
	Woodlands - Woodrow First School	£10,634.00
Worcester	Bluebell Wood - Perry Wood Primary School	£7,008.85
	Buttercup - Fairfield Primary School	£17,392.88
	Lavender - Warndon Primary School	£10,124.47
	Saffron - Stanley Road Primary School	£11,000.00
	Tudor Way - Dines Green Primary School	£13,819.40
Wychavon	Apple Vale - Broadway First School	£11,504.00
	Orchard Vale / Spring Vale - Evesham Nursery School	£12,506.00
	Blossom Vale - Abbey Park First School	£7,612.00
	Greenwood - Wychbold First School	£6,880.97
	WANDS - Westlands First School	£16,444.49
Wyre Forest	Rainbow - St Mary's Primary School	£3,623.39
	Chestnut - Franche Primary School	£9,786.45
	Tree Tops - Birchen Coppice Primary School	£27,859.76
	Half Crown Wood - St Bartholomew's Primary School	£9,123.70
	Half Crown Wood - Stourport Primary School	£2,317.59
	Riverside - Bewdley Primary School	£9,058.34
	Brookside - Comberton Primary School	£14,125.80
	Rainbow - St George's Primary School	

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