



Derby Safeguarding Children Board

Annual Report 2011 - 2012

Preface

The Apprenticeship, Skills, Children & Learning Act 2009 introduced a requirement for LSCBs to produce and publish an annual report on the effectiveness of safeguarding in the local area. The report should provide an assessment of the effectiveness of local arrangements to safeguard and promote the welfare of children, set against a comprehensive analysis of the local area safeguarding context. It should recognise achievements and the progress that has been made in the local authority area as well as providing a realistic assessment of the challenges that still remain. (Working Together 2010, paragraph 3.34)

The report should demonstrate the extent to which the functions of the LSCB as set out in Working Together are being effectively discharged. This should include assessments of policies & procedures to keep children safe, including:

- The policies and procedures for the safe recruitment of frontline staff
- An assessment of single and interagency training on safeguarding and promoting the welfare of children to meet the local needs;
- Lessons learnt about the prevention of future child deaths which have been identified by the CDOP
- Progress on priority areas (e.g. child trafficking, sexual exploitation and domestic violence)

Annual reports should also include a clear account of progress that has been made in implementing action from SCRs completed during the year in question; plans to evaluate the impact of these actions and monitor how these improvements are sustained over time.

The report should provide robust challenge to the work of the Children's Trust Board in driving improvements in the safeguarding of children and young people and in promoting their welfare.

'Working Together' 2010, states that each LSCB should have a clear work programme, including measurable objectives and a budget. This Annual Review reflects the priorities set within the DSCB Business Plan for 2011/2012 progress against these priorities, and areas for further development.

This is a public report that will be formally presented to the City Leadership Board and to the Children, Families and Learners Board.

Contents Page

1	Chair's Foreword	4
2	Introduction	5
3	Coordinating Local Work to Safeguard and Promote the Welfare of Children	6
4	Governance and Accountability	9
5	Relationship to the Derby City and Neighbourhood Partnerships Boards	10
6	Participation of Children and Young People	12
7	Policy, Procedures and Practice Guidance	12
8	Membership of the DSCB and subgroups	13
9	Budget	14
10	DSCB Effectiveness	15
11	Inter Agency DSCB Safeguarding Training	16
12	Action Taken on Priority Issues in Safeguarding	17
13	Missing Children	17
14	Child Sexual Exploitation	19
15	Private Fostering	20
16	Allegations Management	20
17	Monitoring the Effectiveness of Local Work to Safeguard and Promote the Welfare of Children	23
18	Quality Assurance	23
19	Early Intervention	25
20	Domestic Violence	26
21	Child Sexual Exploitation	27
22	Serious Case Review Panel	28
23	Audit and Analysis: The impact of DSCB training on practice	29
24	Child Death Overview Panel	30
25	Audit and Analysis: Partner Agency Safeguarding Reports	31
26	Monitoring Effectiveness through External Inspections	38
27	DSCB Performance and Outcome Measures 2011 - 2012	40
28	National Safeguarding Indicators	48
29	Local Safeguarding Outcome Measures	50
30	The DSCB Commentary on the Effectiveness of Safeguarding Arrangements in Derby	60
31	DSCB Membership (Appendix 1)	62

1. Chair's Foreword

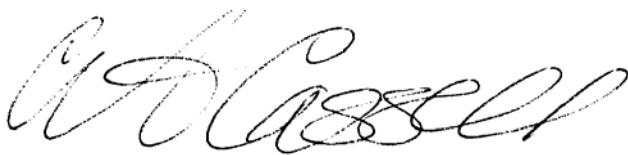
1.1 Welcome to this public report setting out the work of Derby Safeguarding Children Board over the past year. I would like to begin by thanking, on behalf of the Board, those practitioners and managers across the various agencies who work tirelessly to protect children and young people from significant harm. The Board recognizes that the effectiveness of safeguarding in Derby is dependent on the quality and co-ordination of the work of those people in direct contact with children, young people and families. It is their ability to be vigilant of what is happening in children's lives, to listen to them, to share what they observe and to reflect on the implications that matter above all else.

1.2 The Board has taken a number of actions this year to strengthen its role in response to both its own assessment and that from Ofsted. The capacity of the Board has been increased to ensure that the full range of statutory functions can be carried out and that we are able to promote and monitor safeguarding in the city.

1.3 In addition to improving its own functions, the Board's focus this year has been on promoting early intervention and effective approaches to domestic violence. There are promising early signs of some shift towards earlier help for children and families and the Board continues to work with partners to develop specific responses to domestic violence in the city. These areas remain priorities for us in the coming year.

1.4 The context in which services have been working over the past year has been challenging and will be increasingly challenging in the coming year. The challenges have been both financial and structural, with financial issues in all agencies and structural ones in health in particular. Whilst we acknowledge the difficult decisions leaders will be facing, it is our duty to monitor and challenge organizational change where there may be implications for the effectiveness of safeguarding arrangements. I am very pleased with the commitment given by agencies, through the Board, to ensure that safeguarding impact assessments are undertaken where organizational change is proposed.

1.5 Finally I would like to thank members of Derby Safeguarding Children Board for their continuing commitment to the work of the Board, challenging their own and other agency performance and raising the profile of safeguarding

A handwritten signature in black ink, appearing to read 'Christine Cassell', written in a cursive style.

Christine Cassell
31/05/2012

2. Introduction

2.1 This report is the annual review of the work of the DSCB for the business year 2011/2012.

2.2 The purpose of this Annual Report is to:

- provide an outline of the main activity and achievements of the Derby Safeguarding Children Board (DSCB) during 2011/2012
- provide an assessment of the effectiveness of safeguarding activity in Derby
- provide the general public, practitioners and main stakeholders with an overview of how well children in Derby are protected
- identify gaps in service development and any challenges ahead
- priorities for action 2012/2013

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

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

The body of the report falls into two main sections to reflect these two objectives.

3. Objective One: Coordinating Local Work to Safeguard and Promote the Welfare of Children.

3.1 This section sets out what the Derby Safeguarding Children Board has achieved to co-ordinate what is done by each person or body represented on the Board to safeguard and promote the welfare of children in the Derby.

3.2 Our priority actions for 2011 – 2012 were to:

- ***Ensure that a domestic violence strategy is established so that partner agencies have in place arrangements to safeguard Children and Adults affected by domestic violence and abuse.***
- ***Ensure Early Intervention is developed and monitor the impact.***
- ***Develop processes to collate information derived from quality audits of safeguarding practice for regular evaluation by senior managers, DSCB and elected members.***
- ***Complete Serious Case Review Action Plans and report exceptions to the Board.***

3.3 Progress against these priorities:

- A ***domestic violence strategy*** has been established by the Derby and Derbyshire Domestic Violence and Sexual Violence Leadership Group. This group incorporates agencies with responsibilities for keeping both children and adults safe and includes representation from the Derby and Derbyshire Safeguarding Children Boards and Derby and Derbyshire Safeguarding Adults Boards. The DSCB is playing an active role in the development of the action plan so that: children affected by domestic violence are effectively identified at an early stage; arrangements are in place for key staff to ask routinely whether a person is affected by domestic violence; and is involved in the revision of guidance for responding to concerns about domestic violence.
- The DSCB has received regular updates on the development and progress of the ***early intervention*** arrangements, monitored the impact and raised the profile of the limited progress that has been made to embed the common assessment framework locally.
- The ***Quality Assurance Group*** has carried out quality audits of safeguarding practice for regular evaluation by senior managers, DSCB and elected members. (This is commented upon in more detail in section 18).
- Action has been taken to ensure that learning from past ***Serious Case Reviews*** is embedded in practice:

- The Derby Safeguarding Children Board "Suicide Prevention and Self Harm Awareness Strategy" has been put in place. Pathways for accessing services for children who self harm have been made clearer for staff. Guidance documents for staff to help them identify and respond to self harm have been issued and leaflets developed with young people for them and their carers have been distributed through schools and GP surgeries.
- The Child Protection Manager with specific responsibility for Child Sexual Exploitation (CSE) took up post in April 2011 and has overseen the implementation of the CSE strategy. This has included engaging young people in meetings about the concerns for their welfare. Their engagement has been successful in over 90% of the cases considered and there is evidence that this has made a difference to reduce the levels of risk the young people are experiencing.

3.4 Additional actions in the 2011 – 12 business plan focussed on improving the working arrangements of the Board included:

- ***Implement joint working arrangements for the Policy and Procedures function and Training function with the Derbyshire LSCB.***
- ***Implement new working arrangements for the Monitoring and Evaluation function carried out by the Quality Assurance Group.***
- ***Complete the revision of the Safeguarding Children Procedures so that all practitioners have up to date guidance about what action they should take to keep children safe.***
- ***Report on the evaluation of the effectiveness and impact of DSCB training on practice alongside the annual training needs audit and review of the training programme.***
- ***Review arrangements for the operation of the Named and Designated Group so that the DSCB can satisfy itself that robust and effective arrangements exist for the recruitment and retention of staff in all agencies.***
- ***Improve the consistency and comprehensiveness of the recording of the casework of the Local Authority Designated Officer (LADO) and ensure regular liaison between the LADO and the complaints service.***
- ***Ensure that all partners are aware of their reporting responsibilities in regard to privately fostered children and young people.***

- ***Promote the improvement of E Safety arrangements including publishing a leaflet advising practitioners how to respond to e safety concerns.***
- ***Extend the local information that helps to keep children safe in Derby online to the public and professionals with the revision of the Derby Safeguarding Children Board website.***

3.5 Progress against these actions:

- ***Joint working arrangements*** have been established over past 12 months for the Policy and Procedures function and Training function with the Derbyshire LSCB. The two Boards now have a good foundation for improved integrated practice in 2012/13. This will ensure consistency for agencies which work across both local authority areas. A review of any existing guidance and procedures, that are separate to the Safeguarding Children Procedures, is in progress to ensure that any difference between Derby and Derbyshire LSCB guidance is addressed to promote standardisation where possible.
- The ***Monitoring and Evaluation function*** is carried out by the newly configured Quality Assurance Group. To allow the DSCB to have more detailed feedback and broader engagement on the quality of safeguarding the Quality Assurance Group has five sub-groups or "hubs" that meet on a regular basis and provide formal feedback on the completion of the quality assurance action plan. The hubs are: The Education Hub; The Health Hub; The Community Safety Hub; The Local Authority Hub; and The Children and Young People's Network Hub.
- The DSCB undertook a risk assessment to determine how far the ***Safeguarding Children Procedures*** should be revised in advance of the expected revision of Working Together. It was determined that immediate updates were required for the section on Child Sexual Exploitation and for the section that sets out the arrangements for Early Intervention and Social Care. Other Procedures and Practice Guidance was also either reviewed or developed in the year, including:
 - **The SUDI (Sudden Unexpected Death of an Infant) protocol** has been revised and signed off
 - **Delivery Protection Plan** guidance has been developed to assist practitioners to coordinate the safeguarding arrangements for expected babies
 - **Self Harm Prevention** - Practice guidance and leaflets were produced for practitioners to help them identify and respond to concerns about self harm.
 Work in progress includes:
 - **E Safety** – a new piece of practice guidance to support practitioners to respond to concerns raised with them by children, young people or parents/carers.

- **Notification guidance** – a new piece of guidance to ensure that key events affecting the safety of children are notified to the DSCB and relevant regulatory bodies.
 - **Home Visits** – updating current guidance so that all agencies have a shared understanding of home visits and the integrated roles that keep children safe.
 - **Escalation Procedures** – Revised guidance to ensure there is effective multi agency resolution of difference of professional opinion and that the outcomes safeguards children
 - **Early Intervention and Social Care** – Multi agency guidance to clarify new working arrangements and ensure that appropriate judgements about need and harm inform referrals
- Report on the evaluation of the ***effectiveness and impact of DSCB training on practice*** alongside the annual training needs audit and review of the training programme.
 - The arrangements for the operation of the ***Named and Designated Group*** have been reviewed. Further work is being undertaken to establish the group and to ensure appropriate multi agency commitment.
 - The consistency and comprehensiveness of the recording of the casework of the ***Local Authority Designated Officer (LADO)*** have improved over the year. There is now greater uniformity with the work of the Derbyshire LADO. There is now also regular liaison between the LADO and the complaints service. Arrangements are in place for regular meetings with the residential childcare sector and a training course is now incorporated within the DSCB training programme.
 - The Training, Learning and Development Group has taken action to ensure that all partners are aware of their reporting responsibilities in regard to ***privately fostered children and young people***. This included:
 - the circulation of private fostering leaflets to schools, health and housing staff;
 - the inclusion of private fostering throughout all safeguarding courses provided by DSCB;
 - articles included in schools and health circulars;
 - briefing for head teachers and Heads of Services in the Local Authority.
 - A leaflet advising practitioners how to respond to e safety concerns is ready for publication and dissemination to all partners. Capacity to promote the improvement of E Safety arrangements has been limited to the agreed delivery of a specific course as part of the 2012/2013 joint training programme. ***This will be a key priority for the newly appointed DSCB Policy and Development Officer.***

- The revision of the Derby Safeguarding Children Board website was deferred pending increased capacity. ***This will be a key priority for the newly appointed DSCB Policy and Development Officer.***

Extending the local information that helps to keep children safe in Derby online to the public and professionals with the revision of the Derby Safeguarding Children Board website will be a key priority.

4 Governance and Accountability

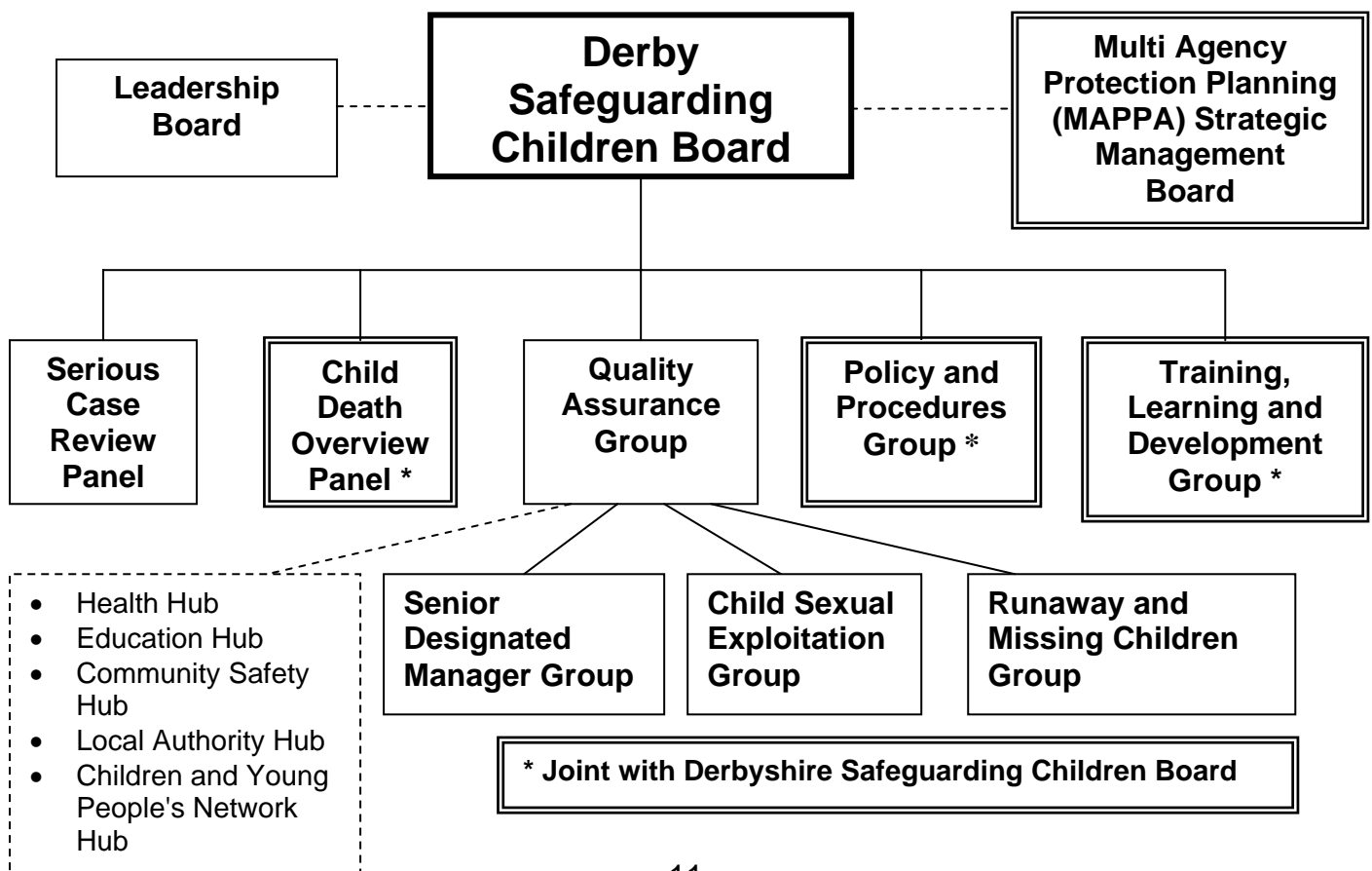
4.1 The governance arrangements for the DSCB were ratified at Board meeting in September 2011 following a review of the constitutional and operational arrangements of the Board. The review resulted in a more streamlined structure focussed on the delivery of the business plan. Each of the subgroups has Terms of Reference, Annual Work Plans and reports quarterly to the main DSCB.

4.2 Each subgroup is chaired by a member of the Derby Safeguarding Children Board or in the case of the subgroups with shared membership with Derbyshire LSCB, the chair person is a member of either Board.

4.3 The DSCB has received more detailed feedback and broader engagement from the quality assurance group as a result of the establishment of five supporting hubs (Health Hub; Education Hub; Community Safety Hub; Local Authority Hub and Children and Young People's Network Hub). This has provided the opportunity for closely related activity to be analysed more succinctly by organisations with shared and similar roles and has fed into the work of the DSCB.

4.4 There has been an improvement with engagements with partners in education as a result of representation from all education sectors attending the education hub.

The Derby Safeguarding Children Board Standing Subgroups



5 Relationship to the Derby City and Neighbourhood Partnerships Boards with responsibilities for children and families

5.1 The responsibilities of the DSCB are complementary to those of the Derby City and Neighbourhood Partnerships Boards with responsibilities for children and families to promote co-operation to improve the wellbeing of children in Derby. (These include the Leadership Board; Children, Families and Learners Board; Health and Well-being Board; Safe and Strong Communities Board)

5.2 The DSCB role is to ensure the effectiveness of the arrangements made by wider partnership and individual agencies to safeguard and promote the welfare of children. The DSCB reports directly to the partnership Leadership Board and to the Children, Families and Learners Board, but is not an operational sub-committee of either.

5.3 The overarching outcomes of the Derby Children and Young People's Plan during 2011 to 2012 reflect the priority issues raised by DSCB:

1. All children and young people in Derby are safe and healthy
2. All children and young people in Derby will achieve more

5.4 The indicators that all children and young people in Derby are safe and healthy included:

- No homeless young people below 18 years old
- A reducing teenage conception rate (locally defined)
- Fewer children receiving statutory children in need and safeguarding support
- More families accessing support at lower tier threshold
- Fewer young people involved in crime, the criminal justice system and risky behaviour
- Lower levels of domestic violence and family conflict
- More children living healthier lifestyles

5.5 The Independent Chair attends the Children, Families and Learners Board (CFLB) and reports on safeguarding issues at each Board meeting.

5.6 The Director of Children's Services is a member of the DSCB and reports on Children, Families and Learners Board (CFLB) matters to all DSCB meetings. The DSCB seeks to provide challenge and scrutiny to the work of the CFLB ensuring that in the commissioning, planning and delivery of services, the safeguarding of children is paramount in the CFLB's decision making.

5.7 The DSCB has ensured that is included as part of the consultation of the development of the Children and Young People's Planning 2012 - 2013.

6 Participation of Children and Young People

6.1 Derby City Council has a Participation Strategy and the DSCB draws upon the work of the DCC and members of the Children and Young People's Network to help inform it about the views of children and young people about the services they receive. There have also been specific areas of DSCB activity in which young people have been actively engaged over the past year.

6.2 Children and Young People were central to a consultation undertaken by the Derby Hospitals NHS Foundation Trust to develop DSCB guidance about self harm. This led to the development of leaflets for children, young people and families and their involvement in the successful launch of these materials and practice guidance for staff. Young People were involved in the recruitment of a consultant paediatrician and child psychiatry posts.

6.3 Central to the engagement, assessment of risk and developing safer outcomes with young people at risk of sexual exploitation has been their involvement in the multi agency meetings. This has proved to have helped improve outcomes and reduce risk. The monitoring and audit section illustrates this in more detail.

6.4 Community Service Volunteers supports young people (available to all children and young people who are looked after by the local authority) by providing a monthly meeting where they can discuss issues which effect children and young people in care and care leavers. CSV give them a voice as a consultative group which influences services and those who make decisions about the services.

6.5 Community Service Volunteers (CSV) Derby also provides two services for children and young people; An Independent Visitor Service, Allies, and the advocacy service called the VOYCE Project; these are Independent Volunteer Advocates for children in need and children and young people in care.

6.6 The Board recognises the need to be more systematic in gathering the views of children and young people on how safe they feel and the extent to which they feel their views are taken into account in the planning and delivery to services to help keep them safe.

Embedding consistent and robust arrangements to consult with children, young people (including those who have been missing) and their families will be one of the priorities for the DSCB in the coming year.

7 Policy, Procedures and Practice Guidance

7.1 The Education Hub has revised and launched the self assessment tool (based on Ofsted guidance and a safeguarding policy checklist, **The 39 Steps**) for all schools to ensure that they have suitable safeguarding arrangements in place. Alongside this, the Education Hub has reviewed

national exemplars of child protection policies and procedures and has agreed to produce a local exemplar as a priority for education settings.

Embedding up to date and effective policies and procedures across the all agencies will be one of the priorities for the DSCB in the coming year.

This will include:

- ***monitoring of the effectiveness of the impact of revised and new guidance;***
- ***ensuring that there are strong consistent links between early intervention and child protection procedures and guidance;***
- ***Board members' assurance that Board approved guidance is embedded in their own agency.***

8 Membership of the DSCB and subgroups

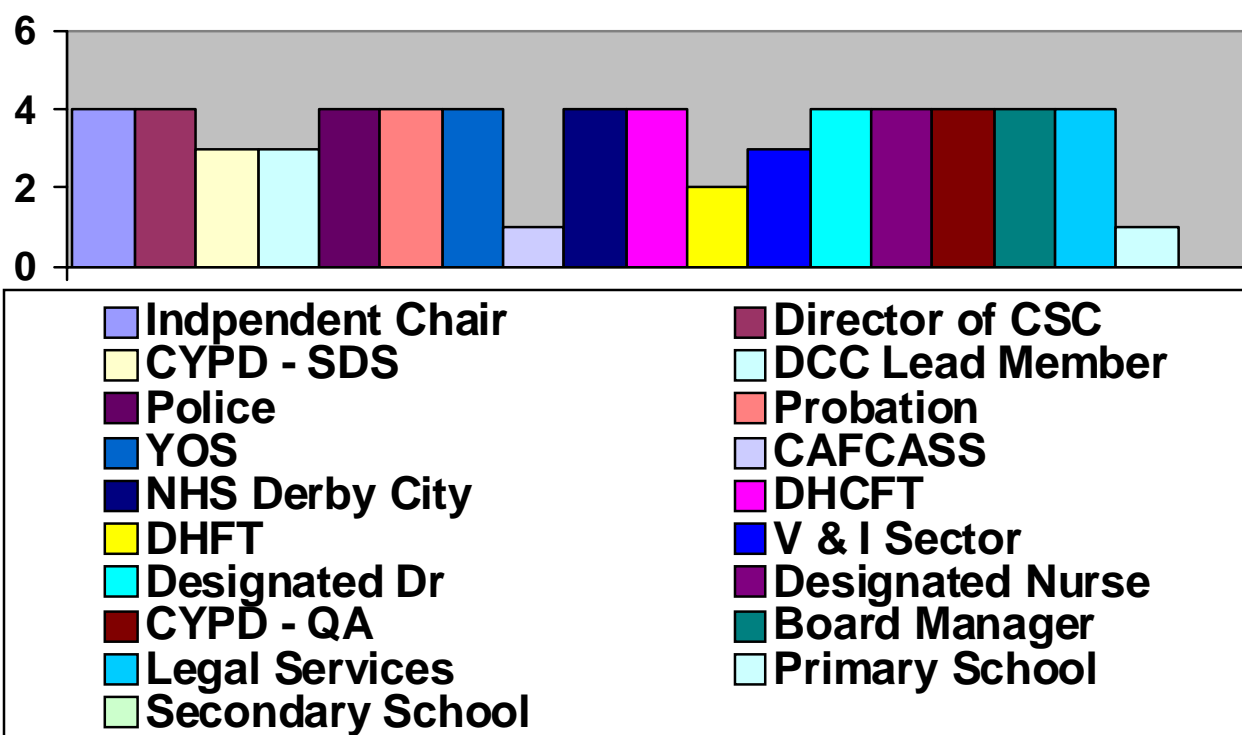
8.1 The DSCB membership list for 2011 – 2012 can be found at Appendix 1. There has been consistent representation of the DSCB from agencies with membership occurring at the right level of seniority and remaining stable, taking into account individual officers changing roles/jobs.

8.2 Currently there is no representation on the DSCB from lay members and plans are in place to commence recruitment in summer 2012.

Establishing representation from lay members will be one of the priorities for the DSCB in the coming year.

8.3 The DSCB holds meetings on a quarterly basis with additional extraordinary meetings being convened where necessary. Regular and consistent representation is key to drive forward and monitor the DSCB business plan and the work of the subgroups.

8.4 Analysis of the attendance set out in the chart below indicates that in nearly all cases the attendance has been good. Representation from schools and education settings has improved at the Education Hub and further work needs to achieve suitable representation at the board meetings. There have been changes in some organisations and shared representation between the DHFT and NHS Derby City occurred for a period of time with full representation now back in place. The Vice Chair (Quality Assurance Chairperson) has been present at all meetings.



9 Budget

9.1 To function effectively the DSCB needs to be supported by member organisations with adequate and reliable resources. The budget allocation by agency was agreed as set out below specifically for 2011/2012.

The total budget to support DSCB activity in 2011 / 2012 was £178 260

Agency	Amount
CYP - baseline contribution	74, 275
CYP - additional funds to enhance capacity	42, 000
CYP Total	116, 275
Strategic Health Authority	1, 000
NHS Derby City	
(on behalf of Health Services in Derby/Derbyshire)	32, 640
Health Total	33, 640
Derbyshire Constabulary	16, 074
Youth Offending Service	7, 140
Derbyshire Probation Service	5, 358
CAFCASS	550
Total contributions	179, 037
Total Budget	178, 260
Actual Expenditure	147, 558
Balance (to)/from Reserve	(30,702)

9.2 In addition the DSCB clarified the amount of reserve monies that had accumulated (£103,143) and a programme of priority actions were agreed alongside the completion of the recruitment process for the Policy and Development Officer to work alongside the Board Manager, Training Coordinator and Administrator.

9.3 Budget allocation for 2011 - 2012 was:

	Budget	Expenditure	Variance
Employees Sub Total	162, 428	126, 320	36, 108
Premises Costs Total	600	500	100
Transport Sub Total	1, 500	1, 062	438
Supplies and Services (Including Training Costs)	13, 732	19, 677	-5, 945
Total	178, 260	147, 558	30, 702

9.4 The DSCB agreed to ongoing partner contributions from 2012/2013 in the following proportions:

Derby City Council	55%
Health - Derbyshire Healthcare NHS Foundation Trust / Derby Hospitals NHS Foundation Trust / Southern Derbyshire Clinical Commissioning Group / Strategic Health Authority	24%
Derbyshire Constabulary	12%
Derbyshire Probation	4%
City and Neighbourhood Partnership	4%
CAFCASS	1%

10 DSCB Effectiveness

10.1 The DSCB undertook a self assessment of its effectiveness using the model contained within the publication Good Practice by Safeguarding Children Boards (Ofsted 2011). Key elements identified progress and areas for further development. These included:

- **Governance**

The Independent Chair had added value to the function of the DSCB, ensuring clarity in the work of the DSCB and was open to challenge. There had been an improvement in the use and analysis of the DSCB data and links with the Children's Trust had been extended.

- **Partnership Working**

Progress had been made to embed partnership working and whilst this was reflected in much of the work of the sub groups, further extending the

involvement of the education sector in the main board and the development of links with Clinical Commissioning Groups was a goal for the coming year.

- **Engagement with Young People**

Progress had been documented in the report and there was a reliance on existing arrangements to promote engagement. Opportunities to extend this were identified as part of the plan for the coming year and include a DSCB member engaging further with Voices in Action (Young People's Group) to seek their contribution and reflections of the effectiveness of safeguarding arrangements.

- **Business planning and relationship between DSCB and the CFLB**

The DSCB has identified the few, really important priorities which could make a significant difference and will be producing the updates to ensure that partner agencies and their staff are aware of the priorities and why they are important for improving outcomes for children and families.

- **Quality Assurance**

The programme of DSCB led audit activity had proved to be effective over the last year and the development of consistent audits across agencies was an agreed action to improve the effectiveness of the DSCB in the year ahead.

- **Learning from Serious Case Reviews**

Examples of changes to practice and improved outcomes were evident and are included in the annual report. Further work has been identified to measure the impact of changes through the work of the Quality Assurance Group.

- **Multi agency training and learning**

Evidence of the impact of DSCB training on practice has been obtained through local research and identified further areas of development that will ensure that the correct safeguarding training is linked with the individual roles of key staff in different agencies.

- **Measuring impact**

The annual report includes examples of how the DSCB is measuring the impact and has identified further areas of quality assurance activity that will develop the way in which the DSCB captures what difference is made to the safety of children in Derby.

11 Inter Agency DSCB Safeguarding Training

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

11.2 During 2011 The Derby and Derbyshire Safeguarding Children Boards joined their two subgroups with responsibility of training together. This enabled an economy of scale and provided an opportunity to establish

consistent content and descriptions of the courses for partner agencies which crossed borders.

11.3 The Training, Learning and Development Subgroup is responsible for fulfilling this and other functions in relation to safe working practices across all partner agencies in Derby and Derbyshire.

11.4 The Ofsted Inspection in July 2011 assessed that "A good range of training opportunities are available for staff with some evidence of impact, for example in raised awareness of the impact of domestic violence and child sexual exploitation. DSCB has developed more robust plans to evaluate the impact of training."

11.5 The Inspection identified that "the wider elected member group, including those who have a role on the scrutiny commission, have limited training on safeguarding and their role and responsibilities". Robust action was taken and a mandatory training programme was established and the DSCB and CYP provided three specific safeguarding training sessions to enable elected members provide sufficient scrutiny and challenge to the quality of services. Electoral services within the local authority have monitored attendance and will be taking action in respect of members who have not attended these mandatory sessions.

11.6 During 2011/12, the DSCB has continued to provide a full multi agency training programme, has quality assured single agency training and has put in place arrangements to independently quality assure the impact of DSCB training on practice. (See paragraph 23.1)

11.7 During the year **68** (62) courses were delivered and **1247** (1124) participants booked courses, **1127** (1036) **attended courses**. **120** (88) participants failed to take up their place. Of these **115** (76) participants cancelled their places with notification whilst **5** (12) did not notify the board. (Previous Year Figures in brackets).

11.8 Analysis of the increased rate of cancellation indicates pressures on agencies arising from changes within organisations led to greater number of cancellations. Attendance and cancellation rates will be monitored over the coming year and raised with the agencies as appropriate.

12 Action taken on Priority Issues in Safeguarding

12.1 The DSCB has a number of Subgroups with work plans that are aligned to the DSCB Business Plan priorities. These groups are chaired by representatives of partner agencies and report to the Quality Assurance Group or DSCB on a quarterly basis. A brief summary of the work of each group is provided below:

13 Missing Children

13.1 Progress has been made over the last year to ensure that children who go missing are seen within 24 hours of their return to where they live. The majority of missing episodes recorded are made about a small number of children who are repeatedly missing.

13.2 A multi agency meeting is held on a monthly basis to consider children and young people who are missing on a frequent basis. For young people who go missing most frequently, joint working arrangements are agreed where needed, to ensure that the most appropriate worker / agency is leading the work with the young person.

13.3 During the year April 11 to March 31st 2012 there were a total of 699 missing episodes recorded of children and young people. 19 young people were repeatedly missing and accounted for 417 of these episodes (60%).

	Total Number of episodes	LAC missing from DCC care homes	Missing from independent homes
October 2010 – March 2011 (Six Month Figures ONLY)	357	86 (24%)	Not available
April 2011- March 2012 (Comparison 6 months in brackets)	699 (390)	97 (53)(13.5%)	61 (34)

13.4 The numbers of episodes of children who are reported as missing from Derby City Council children's homes during this period has reduced in comparison with figures collected from the previous year (13.5% in 2011/12 compared with 24% in a comparable period 2010/11). The analysis by the subgroup is that the children's homes have worked hard successfully to reduce the numbers of missing episodes by engaging with the young people and working with the Runaways staff, Safe and Sound Derby and other external agencies to provide appropriate support and guidance.

13.5 All children and young people who are reported as missing are seen by a professional, screened for risk of future episodes of running and referred to multi-agency locality teams for support if required. Routine engagement has been established between the independent and local authority children's homes which has allowed for sharing of concerns and intelligence. The Education Welfare Officer for Looked After Children monitors the education of young people in the independent sector in partnership with the independent sector providers.

13.6 A key element to improve arrangements for the children and young people has been the return interview and improved data collection. The Board will this year work with young people to evaluate return interviews and the new arrangements.

Embedding consistent and robust arrangements to consult with children, young people (including those who have been missing) and their families will be one of the priorities for the DSCB in the coming year.

14 Child Sexual Exploitation

14.1 The Child Sexual Exploitation (CSE) subgroup has a lead role in ensuring that multi agency arrangements coordinate the early identification of the risks of CSE and ensure that action is taken where children are experiencing abuse. This involves promoting the early identification of children and young people who may be at risk of exploitative situations.

14.2 Exploitative situations include circumstances and relationships where they (or another person) receive 'something' (for example: food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of the child/young person performing or being involved in sexual activities. . In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidation are common along with the child or young person's limited availability of choices because of their social/economic and/or emotional vulnerability.

14.3 The development of a sexual exploitation strategy was completed under the steer of the CSE multi agency subgroup and embedded three key elements across services in Derby: Prevention, Protection and Prosecution. (The impact of these arrangements is further illustrated in section 21).

14.4 In addition to the continued support offered by Safe and Sound Derby, a specialist organisation working with children who are being, or at risk of being, sexually exploited, and their families, a network of CSE Champions is being established to offer initial guidance and support for their respective agencies. They monitor cases where there are concerns about the risks of CSE and ensure that advice for all staff is widely available and accessible (and in the longer term it is planned to increase links with local communities).

14.5 In 2011/12, Safe and Sound Derby:

- Raised the awareness of grooming and child sexual exploitation with 959 children and young people in Derby through work in schools, college and the wider community to help prevent young people from becoming victims of CSE
- Delivered training to 1,108 professionals working with children, young people and families in Derby to enable them to spot the signs of child sexual exploitation to ensure children affected receive the support they need.

14.6 Alongside this, the DSCB delivered multi agency training for the CSE Champions and key staff to enable and support them in their work with more complex cases.

14.7 Funding has been identified within the CYPD to develop resources for training and for information for families and young people, with a budget ring fenced for the next 2 years. A detailed Action plan has been developed and will be evaluated and reported to the DSCB on a quarterly basis. Information leaflets for parents and young people have been completed and parents and young people were consulted thorough the process of compiling them. The Police Public Protection Unit now includes a dedicated Child Exploitation Investigation Unit and this has contributed to improved coordination of arrangements. Members of the Derby CSE subgroup have been invited to be members of the National Working Group for Sexually Exploited Children and Young People and Derby is actively engaged in national research

14.8 The DSCB remains committed to building upon the work that has been undertaken so that early recognition of the risks to children and young people continues and exploitation prevented wherever possible.

The DSCB will continue to take action to promote awareness of the risks of Child Sexual Exploitation and ensure that local arrangements focus on prevention and on improving outcomes for those children and young people affected by CSE.

15 Private Fostering

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

15.2 The DSCB has a responsibility to oversee private fostering arrangements within Derby and monitor the Local Authority's compliance with their duties and functions. In discharging this responsibility, an annual report is presented to the DSCB Quality Assurance Group by the Local Authority Officer with lead responsibility for private fostering.

15.3 Action has been taken to provide briefings and circulate Private Fostering information leaflets to Headteachers, health visitors, school nurses and Youth Offending Team staff. Private Fostering is regularly discussed at the Early Intervention and Integrated Services Heads of Service meetings. Consideration is being given to a joint seminar with Derbyshire LSCB to raise the profile of private fostering further in the coming year.

15.4 Early figures do not illustrate a significant increase in the numbers of private fostering arrangements that are known in Derby. In light of this, the DSCB will continue to prioritise promoting the responsibilities of agencies to identify Private Fostering arrangements and scrutinise the outcomes for children and young people.

The DSCB will continue to take action to promote awareness of private fostering and monitor rate of referrals and the outcomes for children and young people.

16 Allegations against staff, carers and volunteers

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

16.2 The framework for managing cases where allegations have been made against people who work with children is wider than those situations where there is a reasonable cause to believe that a child is suffering, or is likely to suffer significant harm. It also caters for cases of allegations that might indicate that a perpetrator is unsuitable to continue to work with children in his or her present position, or in any capacity. The procedures are adhered to in those cases where it is alleged that a person who works with children has:

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

16.3 All partner agencies of the DSCB have a Named Senior Officer with responsibility for dealing with allegations. In addition, the Local Authority Designated Officer (LADO) manages and oversees all individual cases. The LADO provides advice and guidance in relation to allegations as well as monitoring the progress of cases to ensure that they are dealt with as quickly and consistently as possible.

16.4 In addition, the Child Protection Managers deal with allegations against staff and volunteers on a day to day basis. This includes supporting those settings with the development of policy, practice and training that arise as a result of an allegation or concerns.

16.5 There were 102 referrals to the LADO between 01/04/11 and the 31/03/12. This compares with 82 referrals in the previous year.

16.6 Working Together 2010 states “it is reasonable to expect that 80% of cases should be resolved within one month, 90% within three months and that all but the most exceptional cases should be completed within 12 months, although it is unlikely that cases that require a criminal prosecution or a complex police investigation can be completed in less than three months.”

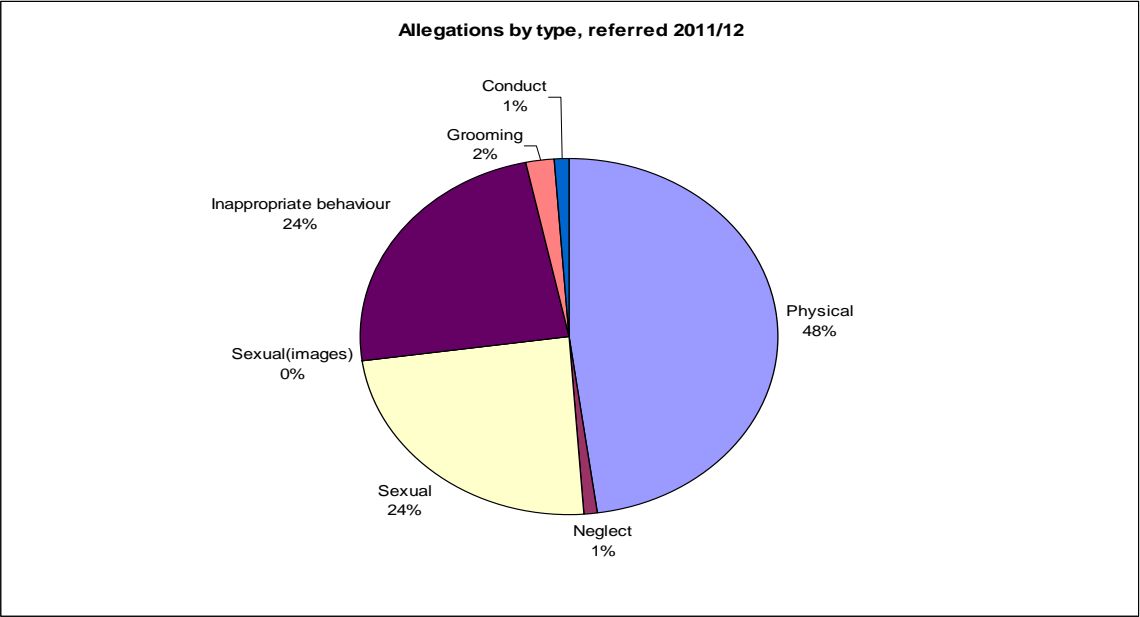
16.7 During 2011/12, the service has operated with two Child Protection Managers (CPM) and has struggled to undertake this work with recommended or reasonable timeframes, when the priority has been child protection conferences. This has principally affected the time to the first

meeting. 51% of cases were resolved within one month and 86% were resolved within three months.

16.8 Funding has now been agreed for a third CPM who will start in July 2012. A full annual report on the allegations against staff, carers and volunteers sets out the analysis of the effectiveness of the arrangements.

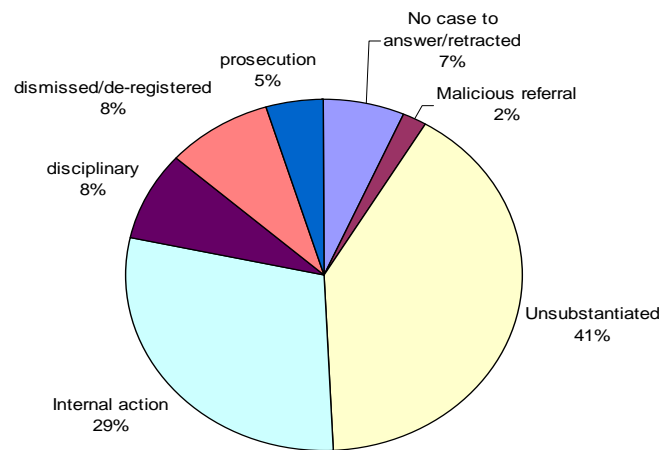
The DSCB will further develop arrangements to report allegations about staff and volunteers with partner agencies and improve the timeliness of action taken in respect of the concerns

The type of allegations made during 2011/2012



Resolution

Resolutions 2011/12 by outcome



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

17.1 This section sets out the monitoring activity of the Derby Safeguarding Children Board on the effectiveness of safeguarding activity in the city.

18 The Quality Assurance Group

18.1 The Quality Assurance Group is responsible for coordinating the monitoring and evaluation of the effectiveness of the local arrangements to safeguard and promote the welfare of children and advise partners and the Children, Families and Learners Board on ways to improve.

18.2 External scrutiny of the effectiveness of the quality assurance arrangements by Ofsted in May 2011 identified the significant impact of the serious case reviews on the work of the DSCB. This had contributed to the limited progress that had been made to have in place robust quality assurance arrangements.

18.3 The Quality Assurance Group has progressed the use of quality assurance arrangements and further development is planned with the newly recruited policy and development officer to work alongside the board manager to improve the work of the DSCB.

18.4 The audit and analysis of the case file audits and child protection conference processes has provided a snapshot of the effectiveness of early intervention arrangements in Derby and the findings are set out below.

Audit and Analysis: Case File Audits

18.5 A case file audit was carried out in November 2011 looking at a random selection of 12 cases that had been raised as contacts or referrals to Children's Social Care during a week in March 2011 (this was prior to the establishment of Multi Agency Teams as part of the early intervention strategy).

18.6 A report was considered by the DSCB and it was evident that good practice and successful engagement with children and their families was demonstrated in eight of the cases and in seven cases the outcomes for the child were judged to have improved as a result of the contact/referral.

18.7 The main areas of learning that relate to early intervention are summarised as follows:

- The process of seeking and sharing information to ensure analysis and decision making was not sufficiently widespread.
- There was infrequent use of the Common Assessment Framework to formally embed multi agency analysis and action prior to decisions to escalate concerns to Children's Social Care.
- The Team around the Child or Family is not embedded in practice.

18.8 The views of children were given appropriate weight in half of the cases. Additionally it emerged that there remains the need to consider and analyse what they don't tell us. In circumstances where it is identified that it is likely that a child has been living with trauma and abuse, their views should not be regarded at a superficial level but appropriate consideration be given to how their experiences may impact upon their ability to tell their story fully.

Action arising from the case file audit

18.9 The Quality Assurance Group has identified recommendations and will audit the outcome of the action plan. Further development of the links between the SCRs / Learning Reviews will inform areas for case file audit work in the coming year.

Audit and Analysis: Children and Young People with Protection Plans – Data Analysis and Commentary

18.10 A study was undertaken in response to the rising trend in the number of children and young people with protection plans in Derby, against a pattern of rising and falling numbers over the last twelve years. Derby's position was considered in comparison against national and local benchmarking groups, and the analysis included feedback from two focus groups to obtain qualitative information from staff from different agencies about the effectiveness of local arrangements.

18.11 A report was considered by the DSCB and it was evident that there is much to applaud in child protection practice in Derby. Children do not remain subject to plans over extended periods, agencies work very well together and outcomes are generally good, with the vast majority becoming children in need or not requiring social care support at all, and only small numbers coming into care. Those outcomes are in large part maintained, with low numbers becoming subject to repeat plans.

18.12 Of significance in understanding numbers of children subject to plans in Derby is the relatively high number of referrals to social care. This suggests children and families, during the period covered by this report, may not have had access early help to prevent them from becoming "in need" or experiencing harm. Multi- agency teams have now been introduced across the city with the aim of providing help at an earlier stage. There are early signs of some reductions in referrals to social care and in numbers of children with child protection plans have reduced by 15.5% since the analysis was undertaken. There are a range of factors including refocusing and increased scrutiny of the use of child protection plans alongside increasing awareness of the availability of early intervention services that may account for the changes. It will be important to maintain stability over the coming year in the threshold for the use of child protection plans.

Action arising from the case file audit

18.13 The Quality Assurance Group has identified recommendations and will audit the outcome of the action plan. This will include incorporating the findings within DSCB training specifically in relation to the management of risk, working with families who disengage and child protection conferences.

19 Early Intervention

19.1 The DSCB has received regular updates on the development of an early intervention strategy and the development of Multi Agency Teams that provide an opportunity for early multi agency engagement with families requiring additional support.

19.2 At the DSCB meeting in March 2012, the DSCB members considered a draft report entitled ***The Case for Early Intervention***. The report set out priorities that included: providing early help to families to prevent the need for children to become subject to child protection plans or come into care, 'narrow the gap' between children's achievements and provide positive experiences in care when children cannot remain safely with their birth or extended families.

19.3 The report stated that "to enable Children's Services to effectively target resources to support families, prevent harm to children and protect children who are risk of harm we must ensure that that right children receive the right support at the right time."

19.4 The DSCB members considered in particular the use of the common assessment framework set out in the report alongside the learning from both audit reports referred to above.

19.5 Data for the use of the common assessment framework (CAF) indicated that despite widespread training, in 2010 – 2011, a total of 375 were completed yet this had dropped to 302 between April 2011 and the end of February 2012

19.6 The Board agreed to write a joint letter to the Executive Members of the Children, Families and Learners Board and copied to all schools to alert them to concerns about the limited use of the Common Assessment Framework and seek assurance that measures will be taken so that:

- Key staff and managers are alerted about their use of the Common Assessment Framework
- The use of the Common Assessment Framework is being monitored on an ongoing basis

19.7 The last quarter figure total demonstrated an increase in CAF completion to a year end figure of 344.

Ongoing arrangements to monitor and audit

19.8 Establishing lead indicators or measurement that tell us about the effectiveness of early intervention arrangements is complex and cannot solely rely on the performance figures for the use of the common assessment

framework. The Quality Assurance Group has established a framework that pulls together three sources of information to illustrate how effective arrangements are in Derby.

19.9 These are

- Demographics
 - Broader set of demographic data.
 - Specific aspects of population in respect of DV and early intervention.
- Performance Measures provided by services / organisations – key processes related to evidence based practice
- Outcomes Measures that help illustrate whether the intended outcome is being achieved, and children and young people are not experiencing abuse or growing up in circumstances that are significantly detrimental to their welfare

19.10 Examples of these type of outcome measures in respect of early intervention include:

- Data on categories of preventable deaths
- Hospital and community numbers of children examined for non accidental injury
- Children who are referred to the community paediatric service who are diagnosed with ADHD
- Children who are receiving School Action Plus specifically to address needs in relation to (a) Behaviour, Emotional and Social Difficulties and (b) Speech Language and Communication Needs
- Early Years foundation stage assessment (“Readiness for School”).
- Decayed, filled and missing teeth (DMFT index - as indicative of levels of neglect, will be available to the DSCB in 2013)

Embedding consistent and robust Early Intervention arrangements remain a key goal in Derby. The DSCB will continue to promote such arrangements. The inter relationship between early help and child protection remains a key factor in assessing whether local arrangements are improving the safety and positive outcomes for local children and young people.

20 Domestic Violence

20.1 This year the Domestic Violence and Sexual Violence Strategy was established by partner agencies responsible for safeguarding children and adults in both Derby and Derbyshire.

20.2 Ensuring effective arrangements are in place to address the harm caused by domestic violence was identified as a priority and the DSCB challenged partners to produce a detailed action plan for the city. The DSCB will measure the impact of the action plan and the effectiveness of the arrangements.

20.3 The Criminal Justice Board and Partnership agencies complete quarterly and annual analysis of trends and activity including the incidence and impact of domestic violence. This information will additionally assist the analysis of the DSCB on an annual basis.

20.4 Performance Measures (that illustrate service responses to domestic violence)

- The number of referrals made by the Police where domestic violence is a factor,
- The number of Multi Agency Risk Assessment Conferences that are held where children are in the household
- The number of child protection conferences where domestic violence is a factor.

20.5 Examples of outcome measures in respect of domestic violence include:

- Repeat Victim statistics (measure offences related to the same repeat victim)
- Repeat Offender (measure offences carried out by the same repeat offender)

The analysis of the effectiveness of arrangements in place to prevent and respond to domestic violence and its impact on children and young people remains a key priority for the DSCB.

21 Child Sexual Exploitation

21.1 Since the implementation of the strategy in April 2011, Children's Social Care, Health Services, the Police, Education Sector and the Voluntary and Independent Sector partner agencies have made progress to embed awareness raising of sexual exploitation. This has led to 217 early concerns being raised about children or young people and *possible* links and vulnerability to exploitation.

21.2 Consideration of these early concerns resulted in 105 meetings being held involving different agencies. Whilst early concerns resulted in a more in depth consideration of the circumstances of 81 young people during the year, it was noted that only a small number of children and young people (eight) were subject of child protection plans arising from concerns about potential abuse.

Auditing whether the CSE meetings and strategy meetings are making a difference to outcomes for young people

21.3 The involvement of young people in the arrangements to keep them safe has been a cornerstone to the strategy. The Child Protection Manager (who has responsibility for the CSE strategy) has visited and spoken to 94% of young people who have been subject of concerns and 51% of the meeting

have been attended by young people. 89% of the meetings have been attended by the parents.

21.4 Evaluation forms for young people indicate that they find CSE meetings very positive. Of the Young People who attended meetings, 100% felt listened to, 89% found the meetings supportive, 100% have a better understanding of CSE issues, 94% agreed with the CSE plan agreed at the meeting.

21.5 100% of parents found the meeting supportive and felt listened to. Comments made by parents/carers include. "Excellent support is always given at every meeting"; "Thank you for being in the background with good constant support", "M (Child Protection Manager) was easy to talk to". "I didn't realise she was so at risk", "I can't believe I didn't know how she felt"

21.6 Risk is assessed at the first meeting and subsequent meetings, using risk assessment tools. The analysis of the levels of risk to young people on engagement to the strategy shows that there is a significant reduction for the majority of young people.

21.7 Of the young people assessed as high risk at their initial meeting, 45% have already had the risk removed or reduced to low risk within 3 months, 37% are reduced to medium risk and are awaiting a review at the 6 month meeting, and 18% have been escalated to for formal child protection consideration.

22 Serious Case Review Panel

22.1 The Serious Case Review (SCR) Panel is responsible for undertaking reviews of cases where abuse or neglect of a child is known or suspected, a child has died or a child has been seriously harmed, and there is cause for concern as to the way in which the authority, their Board partners or other relevant persons have worked together to safeguard the child.

22.2 The SCR Panel ensures that:

- relevant cases are considered and serious case reviews are carried out according to regulations and guidance
- all organisations carry out their roles in respect of serious case reviews
- action plans from serious case reviews and local multi agency reviews are implemented, monitored and evaluated.
- staff in all agencies are aware of the outcomes of serious case reviews and their part in action plans
- learning is disseminated across partner agencies

22.3 Progress has been made with the Serious Case Review Action Plans which have been completed for two cases. The Serious Case Review Panel members provided evidence and reviewed progress to ensure that actions were completed.

22.4 Between 01/04/11 and 31/03/12 no Serious Case Reviews were initiated.

22.5 Agencies in Derby/Derbyshire made individual contributions to a Serious Case Review being undertaken by a LSCB in the South West of England and its publication is due in summer 2012.

22.6 In addition the Serious Case Review Panel commissioned a Learning Review monitored the implementation of the recommendations and provided a framework for challenge to ensure that actions taken in the context of the learning review were fully embedded.

22.7 Some of the themes consistent with the ongoing monitoring of multi agency arrangements included:

- Whether sufficient work has been undertaken to ensure that cases assessed at the Children In Need threshold are not then excluded from child protection considerations.
- Whether the impact of domestic violence and the key risks it poses to children is understood and acted upon across the organisation.
- Whether challenge and escalation procedures well understood and acted upon across practice.

23 Audit and Analysis: The impact of DSCB training on practice

23.1 The DSCB commissioned research into the impact of DSCB training to measure the effectiveness of this training and whether the training had made a demonstrable improvement for the outcomes for children and families.

23.2 An independent researcher contacted a selection of people who had attended DSCB training (attendees). The full report provides specific examples, learning points and suggestions from these four areas of training:

- Inter-Professional Working
- Domestic Violence
- Substance Misuse
- Safeguarding Disabled Children

23.3 A summary of the research concluded that the DSCB training had made a difference to the practice of attendees in a number of ways and these included:

- An increase in knowledge and awareness regarding safeguarding issues and there were some specific examples of this in respect of procedure and policy.
- The value of multi agency training, especially in respect of meeting other professionals, learning from them, broadening and enhancing understanding regarding safeguarding roles and responsibilities and providing a bigger picture of safeguarding practice.
- There was increased confidence in the attendee's own role and feeling better able to challenge others and contact other professionals.

- An increased understanding regarding thresholds, levels of concern and making referrals to Childrens Social Care. There were also examples regarding increased confidence in respect of exploring concerns with other professionals.

23.4 There were positive comments from some attendees regarding an increase in confidence in engagement in their direct work with service users and in managing and supporting others.

23.5 Comments on the training as a whole were generally positive and this is reflective of meeting the learning outcomes. There were some specific comments about the structure, input and organisation of the training, which were generally very positive. There was some useful feedback regarding how the training had highlighted and identified future training needs.

23.6 The full report will inform the work of the Training, Learning and Development subgroup in the coming year. The learning will underpin updates of the content of some of the courses, opportunities to develop the training pool members and contribute to the development of revised methods for future evaluation of courses.

The DSCB will incorporate the learning arising from the review of the effectiveness of training and embed consistent and robust training and development pathways within the action plan for the Training, Learning and Development subgroup

24 Child Death Overview Panel (CDOP)

24.1 In October 2011 the CDOP published the second annual report summarising the work of the Child Death Overview Panel (CDOP) up to end of December 2010. Because of the nature of the work carried out by the CDOP the data relates to the previous year, however it should be noted that the CDOP carries out relevant actions in a timely manner and not restricted by the reporting arrangements that are in place. The CDOP covers Derbyshire County and Derby City.

24.2 The panel has three main functions:

- To maintain and report on a database of all deaths of children and young people aged 0 to 17 years (inclusive).
- To oversee the investigations into these deaths.
- To learn lessons from these investigations, identify where there may be preventable causes and disseminate those lessons to Safeguarding Boards and other relevant stakeholders in Derbyshire County and Derby City.

24.3 The panel is not directly responsible for the investigations themselves, but key figures involved in the investigations attend the panel's meetings. The work of this panel has been mandatory since April 2008.

24.4 The panel has had good multi agency representation the following key points are highlighted from the report:

- The panel is effectively and comprehensively analysing deaths and learning lessons from them
- The largest single category of deaths is that of perinatal and neonatal events (mostly premature births)
- No modifiable factors are identified in the majority of deaths (70%)
- Modifiable factors are identified in a significant minority of deaths (20%). Many of these relate to unsafe sleeping in sudden unexpected deaths in infants (SUDI).
- Most categories of death are showing a stable or downward trend
- SUDI deaths have shown a significant reduction (by two thirds). Although the numbers are too small to draw conclusions this is encouraging in respect of the possible effectiveness of the sleep safe initiative including a direct safe sleeping assessment
- Analysis of recommendations shows that:
 - Many of them have been encompassed within the two major areas of work, safe infant sleeping practice and suicide prevention, for which CDOP does not take operational responsibility but with which CDOP members are involved

24.5 Specific actions have been identified for individual organisations/agencies; feedback on these is not formally received by CDOP. It was agreed in March 2012 that the Quality Assurance Group formally take on the auditing of CDOP recommendations so that there is assurance that they are implemented and monitored.

24.6 Further representation by the DSCB is required to ensure that the Children, Families and Learners Board/commissioning processes ensure that all CDOP processes, including the rapid response, are appropriately and robustly funded.

25 Audit and Analysis: Partner Agency Safeguarding Reports

25.1 The DSCB received reports from partner agencies illustrating particular themes that were audited, and included within the national guidance in respect of section 11 of the Children Act 2004. The following illustrate audit activity completed by partner agencies:

Children's Social Care

25.2 Children's Social Care reported on audits in respect of *Placement with Parents Regulations* and *Monthly Case File Audits*.

- An audit was completed of the 21 children subject to Care Orders/placed with their own parents confirmed that all were the Subject of Assessment Reports which had been 'signed off'/authorised by a Head of Service. This demonstrated compliance with a recommendation arising from a serious case review.

25.3 Children's Social Care completed a report on the findings of internal case file audits for a total of 58 cases that had been audited to the end of January. The report identified strengths evident within practice and areas for development and scrutiny as part on ongoing case file audit work.

Health Services

25.4 The NHS Services in Derby and Derbyshire have used the Strategic Health Authority (SHA) **Markers of Good Practice** to undertake annual audits and identify developmental action plans. These were scrutinised by the SHA at both executive board level and with the named and designated health professionals and the chair of DSCB. With governance changes affecting providers and commissioners of health services (locally and nationally) the ongoing audit arrangements remain a priority on the agenda for the transfer to the Southern Derbyshire Clinical Commissioning Group and the local unit of the National Commissioning Board.

Police

25.5 The Derbyshire Constabulary undergoes a continual process of audit and scrutiny. All reports of child abuse are investigated by a specialist team of officers based within Derby City and all such reports are audited by a Detective Inspector to ensure that they have been thoroughly investigated and the relevant referrals made.

25.6 In addition to this, the Central Referral Unit based at Police Headquarters checks all incidents that have been identified as having a Safeguarding issue and reassesses the levels of risk and makes appropriate referrals where necessary. Each quarter an audit takes place of incidents and crimes reported to the police to ensure that they have been categorised and marked off appropriately. Any case that is identified as failing to meet the standard is reassessed and measures put in place to prevent reoccurrences where necessary. There have been no issues identified from a safeguarding perspective.

Probation

25.7 Derbyshire Probation Trust completed an audit of all domestic violence/risk to children cases in November 2011. All cases registered as domestic violence cases were reviewed to see if child protection issues had been dealt with, referrals made to children's social care and followed up appropriately. Each audit form identified whether further action was necessary. This audit led to a senior management review of domestic violence and child protection policies/instructions, including an increased expectation that all risk to children cases are home visited within 10 working days. Additionally the audit led to an amendment of the risk to children policy and procedures and staff briefings have been planned for May 2012 to alert them to the changes and how it will help keep children safe.

Youth Offending Service

25.8 Youth Offending Services have used the recommendations of both the 2005 and 2008 reports to develop an assessment process covering 5 themes and 29 requirements. The assessment process is based on the methodology employed to underpin both the CAA and Youth Justice Planning Framework and in line with the comments of Ofsted in section 14 of the 'stakeholder responses to Ofsted's consultation on its contribution to comprehensive area assessment.

25.9 The Youth Offending Service undertakes a self assessment on an annual basis and mirrors the requirements of S11 audit. There is a monthly Quality and Performance group where safeguarding (vulnerability) audits are undertaken on a periodic basis - the last internal scrutiny of vulnerability was undertaken in August 2011. A quality assurance framework that draws together all aspects of QA was subsequently developed and implemented in the service (November 2011).

25.10 The Youth Offending Service has also been subject to external scrutiny of safeguarding practices through inspection and the report will be published in July 2012.

City and Neighbourhood Partnership: Neighbourhoods Directorate (DCC)

25.11 A Section 11 audit was completed in respect of the diverse range of responsibilities that include– substance misuse, violent extremism, domestic and sexual violence. Notably the audit considers safeguarding arrangements both with reference to services for children and adults. In respect of violent extremism – safeguarding is embedded into the strategic and operational responses of the City and Neighbourhood Partnership and linked to the multi agency "Channel process" for assessing vulnerable individuals. (See below re specific substance misuse services)

25.12 Arrangements within the City and Neighbourhood Partnership were reviewed and formalised in relation to the Chief Executives office and corporate safeguarding arrangements. Safeguarding is built into the new business plan as a corporate objective and is included in training and development elements of the yearly appraisal of all staff. Action has been taken to clarify representation at the DSCB and QA subgroups.

25.13 Bi-annual audit cycle including safeguarding is being embedded in substance misuse services and from April 2012 a dedicated service is being commissioned to provide family support and training awareness and practice relating to safeguarding. Commissioned services have specific reference to safeguarding policies and procedures in key service areas and contained in Service Level Agreement's/contracts and these are audited.

City and Neighbourhood Partnership: Substance Misuse Services

25.14 Local intelligence led the City and Neighbourhood Partnership to seek to improve the reporting on the safeguarding of children, young people and vulnerable adults with drug and alcohol misusing parents and deliver interventions was identified as a priority to ensure the harm caused by substance misuse was minimised.

25.15 To achieve this, the Derby City Substance Misuse Safeguarding Monitoring group was established. Its primary aims were to co-ordinate and ensure the effectiveness of substance misuse treatment agencies, individually and collectively for the purpose of safeguarding. The group, led by the Young Person's Senior Executive Officer supported agencies in complying with relevant statutory duties and ensuring quality and effectiveness within substance misuse agencies. This audit work has helped City and Neighbourhood Partnership ensure that suitable action is being taken in respect of these families and contribute to the planning and commissioning of appropriate services.

Supporting young people with substance misuse problems

25.16 Analysis of quarter three (2011/2012) figures indicated that services in Derby were more successful supporting young people with substance misuse treatment, exceeding the national figures with:

- YP leaving treatment in an agreed & planned way 84% and
- YP leaving treatment in a planned way who met goals agreed on their care plan at exit 93%

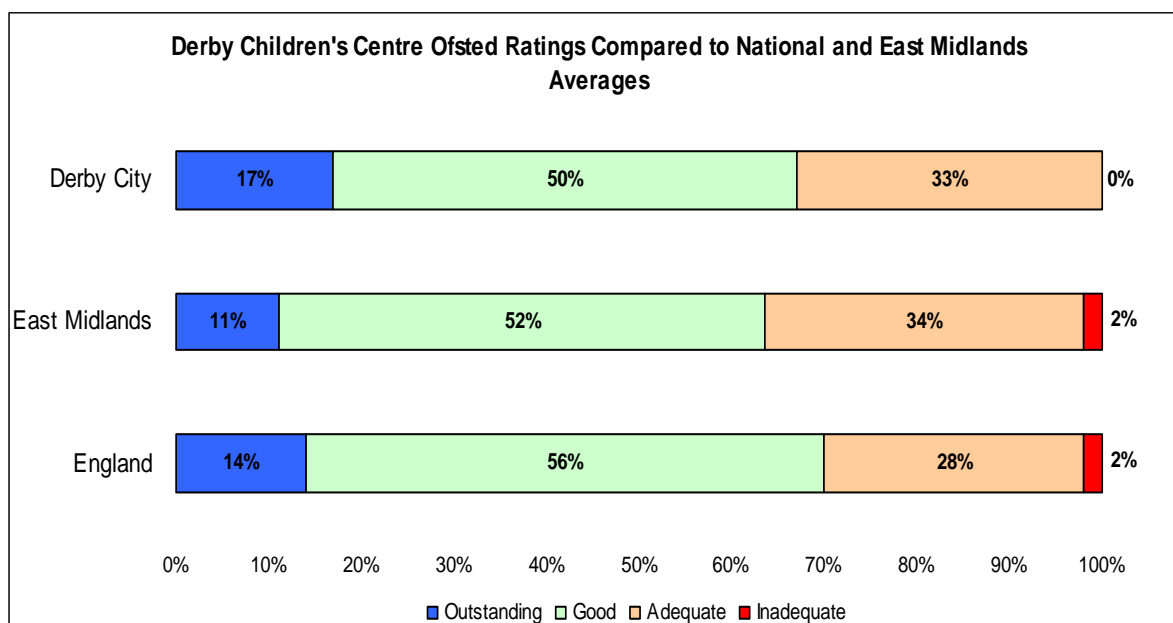
25.17 However local analysis identified concerns about the a large number of East Midlands Ambulance Service 'pick ups' of young people in Derby City that are alcohol related do not culminate in referrals to substance misuse services - and the nature of the causative alcohol use is not routinely captured or available to substance misuse commissioners

25.18 Ambulance data for Derby between April 2009 and March 2010 revealed that 9.02% of alcohol related call outs were for young people aged 18 or under (1,005 out of 11,139 - 1.66% of their population).

25.19 A detailed report has been submitted to the Joint Commissioning Group with recommendations to improve service delivery and the DSCB will receive further reports on the effectiveness of arrangements to support young people and substance misuse.

Children's Centres

25.20 There have been six inspections of Derby's Children's Centres in the time period April 2010 to December 2011, with the 'overall effectiveness' being judged by Ofsted as follows:



The Children and Young People's Network

25.21 The Children and Young People's Network has 55 voluntary sector members, these organisations and groups monitor and evaluate their services and activities in a number of different ways, for example through regular assessments of the impact of their work and feedback from service users. Quality assurance a key part of members' work, and a number utilise recognised assessment frameworks, such as PQASSO (Practical Quality Assurance Systems for Small Organisations), Matrix, Ofsted, or Investors in People, Children and Volunteers and Early Years.

CSV Derby

25.22 CVS Derby, who provide the independent visitor service, advocacy service and the Children in Care Council, involve children and young people centrally in the audit of the services they provide. Evidence from young people's progress indicates that at least half of the young people monitored are all well on their way to achieving recognisable outcomes. The remaining young people are working towards the outcomes identified, and are making good progress.

Education Settings

Further Education:

25.23 One Further Education Setting completed an annual self-audit that included safeguarding and the main developments arising from the audit included:

- In conjunction with the Human Resources department, a robust Single Central Record has been compiled

- Safeguarding is being promoted as a key component of all curriculum activities
- Ensuring robust communication systems are in place with any external agencies so that there is both proactive and reactive management of safeguarding

Schools

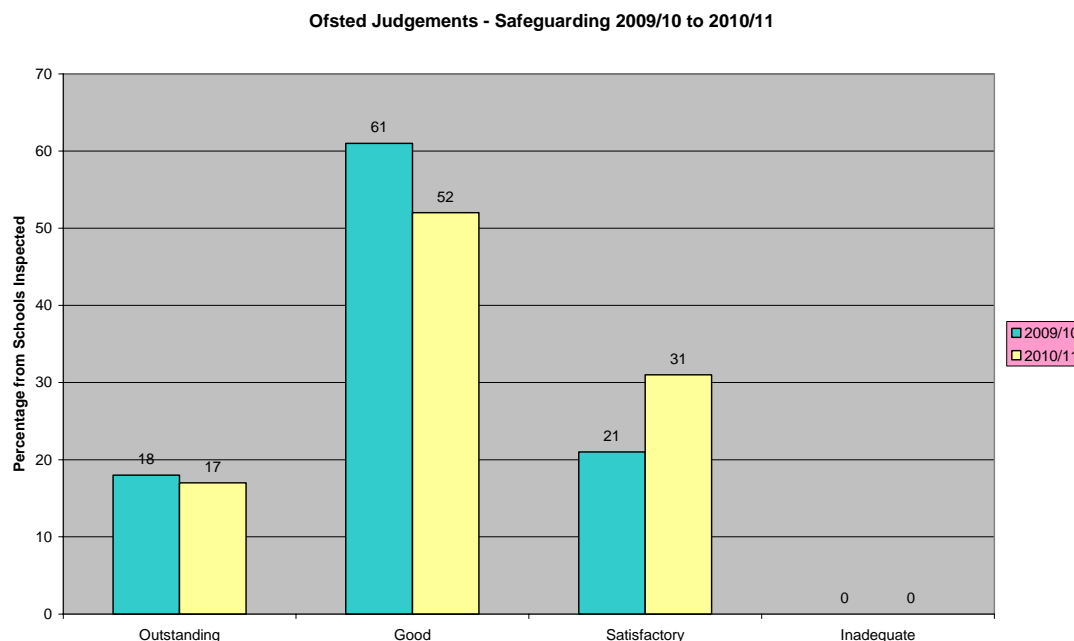
25.24 A small sample of schools, which participate in the education hub, were consulted on their use of audit tools on a yearly basis. Responses were as follows:

- One school had yet to establish an annual audit that included safeguarding as an explicit element.
- Five schools had completed an in-house audit leading to a range of outcomes including:
 - policy changes - particularly updates to the Child Protection Policy and a Physical Restraint Policy
 - improvements were made to the safety of the school grounds and buildings
 - action taken to ensure all risk assessments were in place and known by staff
 - incorporating the learning from a Serious Case Review
 - ensuring safeguarding practices included regular updates at staff meetings and briefings on "in-school systems" to ensure their robustness and highlighting any training needs
 - cascading training to Newly Qualified Teachers and less experienced staff.
- One school completed a Self Evaluation Judgement followed by completion of a full Internal Audit alongside an assessment of Safeguarding Policy and Practice Documents carried out by an external practitioner. This led to the school drawing up a Safeguarding Action Plan and establishing a clear 'tracking' process in place and these actions have been completed according to the schedule.
- One school drew upon the experience of a different setting to assist with the self audit and has reported back to governors on progress being made.

25.25 The responses of schools to the consultation have helped identify action that is needed to support the development of consistent audit arrangements (see below).

The Local Authority

25.26 The Learning and Inclusion Department audited the grading (in respect of the safeguarding arrangements) that schools were awarded from their Ofsted inspections in a two year period (2009 – 2011).



25.27 It is evident that there was an increase in the *Satisfactory* grading and a reduction in the *Good* and *Outstanding* gradings over this period. In January 2012 Ofsted changed the inspection framework and safeguarding arrangements are no longer a specific standard therefore future use of these figures as an audit tool will not be possible.

25.28 An evaluation of the arrangements that were in place to ensure that schools were effectively supported to maintain high standards was undertaken. The Local Authority subsequently redefined the role of key staff to improve capacity to engage schools more proactively. This has led to the establishment of the Education Hub, as mentioned previously, that will engage schools, independent and further education providers to improve both the coordination and monitoring of safeguarding arrangements in individual settings.

25.29 Education providers participated in the DSCB case file audit process for the first time this year and brought an important perspective to the subsequent learning. Alongside this, the Education Hub has considered what will support local education settings to most effectively audit and monitor their own safeguarding arrangements. Over the next year the Education Hub will be developing a local exemplar of a S11 Audit tool for schools that is compliant with their responsibilities under s175 of the Education Act and s157 of the Children Act.

Embedding effective early intervention and robust safeguarding audit arrangements across the education sector will be one of the priorities for the DSCB in the coming year.

Section 11 Audit

25.30 Whilst partner agencies have demonstrated that they are undertaking audits of their safeguarding arrangements, it is evident that is not consistent and in some cases concentrates on only some elements set out in the requirements of Section 11.

25.31 The Quality Assurance Group has drawn up a revised Section 11 audit pro forma to establish a more consistent and extensive set of audit reports. Partner agencies will undertake revised Section 11 Audits and these will be scrutinised by the Quality Assurance Group in summer 2012.

Embedding consistent and robust S11 audit arrangements across the all agencies will be one of the priorities for the DSCB in the coming year.

Workforce Audit: Training, Learning and Development

25.32 The Training, Learning and Development subgroup undertook to obtain respective in-house evaluations of single agency training needs and to establish sufficient consistent evidence that all agencies had robust training pathways in place to ensure that safeguarding training was prioritised specific to the role of staff.

25.33 The subgroup was not able to satisfy itself from the inconsistent completion of the self assessment training needs audit regarding the existence or robustness of individual agency pathways for safeguarding training.

25.34 As a result of this, the subgroup agreed in February 2012 to use part of the Munro development grant to commission a piece of work achieve sufficient clarity about training needs and pathways across all agencies. This will inform the Board of good practice, assure the Board that standards are in place and identify areas of future development. Estimated timescale for completion is December 2012.

The DSCB will incorporate the learning arising from the review of the effectiveness of training and embed consistent and robust training and development pathways within the action plan for the Training, Learning and Development subgroup

26 Monitoring Effectiveness through External Inspections

26.1 Ofsted and the Care Quality Commission undertook a joint inspection of Safeguarding and Looked After Services between 9 – 20 May 2011 and the resulting Report was published on 27 June 2011. The full report is available using the link <http://www.ofsted.gov.uk/local-authorities/derby> .

26.2 The overall effectiveness of **Safeguarding Services** was judged to be adequate and **Partnership Working** was judged to be adequate.

26.3 The local authority and partners were identified as having clear ambition and appropriate priorities that were reflected in the CYPP and the DSCB business plan. However progress in fulfilling these had been adversely affected by changes in senior management including four different Directors of Children's Services since April 2010, three of whom also chaired the DSCB until the appointment of the independent chair in March 2012.

26.4 The Ofsted Inspection of Safeguarding and Looked After Services (July 2011) found:

"The DSCB has effectively overseen the completion of three recent serious case reviews and two management reviews and is effectively monitoring the delivery of the subsequent action plans. There is a good level of partner engagement with the work of the DSCB and there are good examples of strong joint working to improve service delivery in response to learning arising from serious case reviews."

26.5 The inspection goes on to recognise that as a consequence of the demands of the work in relation to the serious case reviews there were some functions of the work of the Board that needed development. The inspection noted evidence of a recent step change in the robustness and focus of DSCB with strong leadership from the new independent chair and a well focused business plan.

26.6 The use of multi-agency auditing was noted as a priority for development and progress has been achieved since May (as illustrated above) with clarity about the outstanding areas for further development and action by the DSCB.

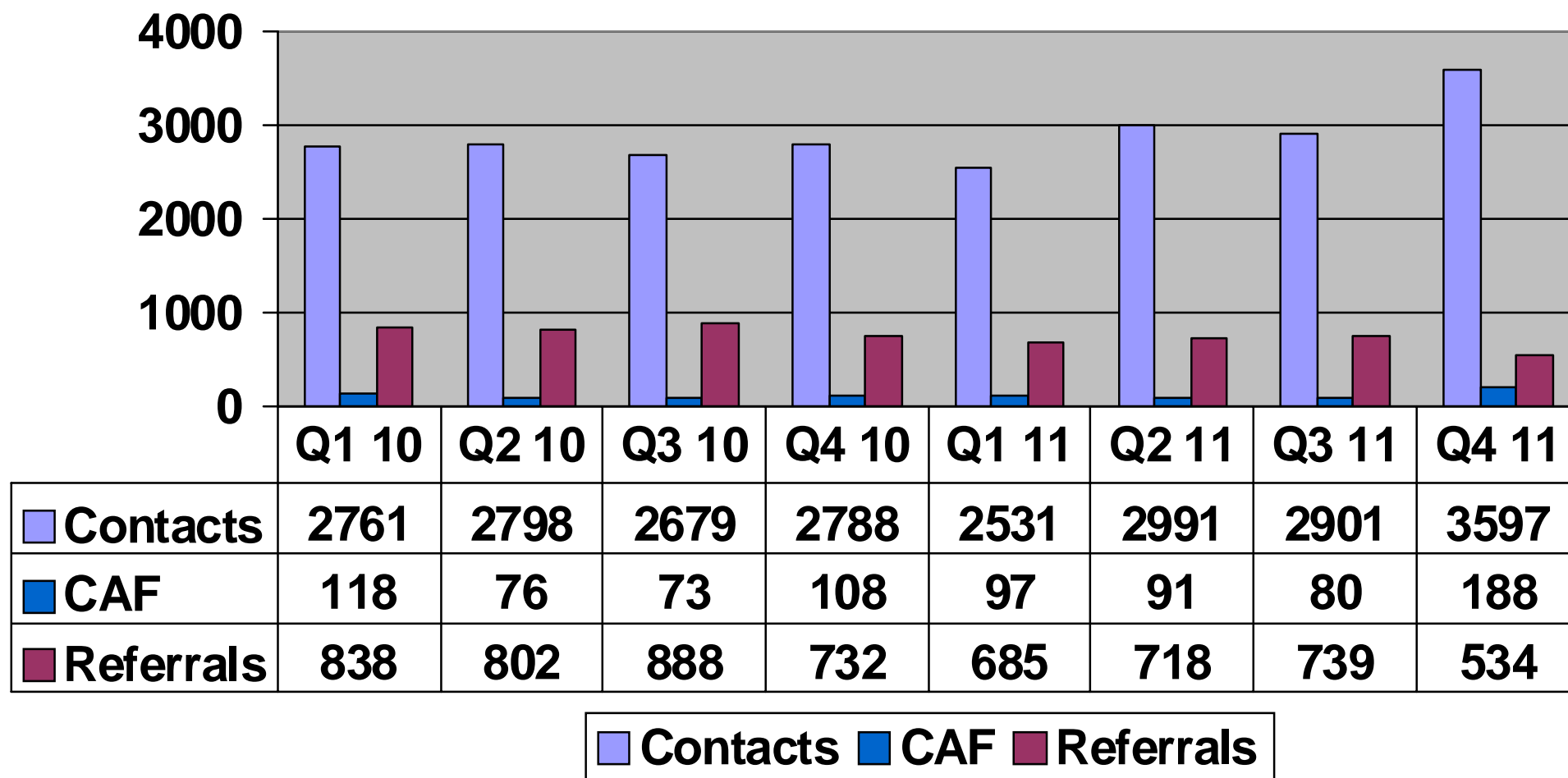
27.1 Demographic Data: Derby Population, Referrals to CYPD, Domestic Violence Victims (all ages) and Children Subject of Child Protection Plans

(The descriptions of ethnicity have been grouped together to facilitate accessible information. Full details have been presented to the Board and are available on request)

Ethnicity	DERBY Population % (Note 1)	CAF 2010 - 2011	Referrals 2010 - 2011 (Note 2)	Police Recorded DV victim data 2010 - 2011		CAF 2011 - 2012	Referrals 04/2011 - 03/2012 (Note 2)	Police Recorded DV victim data 2010 - 2011		Child Protection Plans 03/2012 (Note 3)
				F	M			F	M	
Of Asian heritage including - Bangladeshi, Indian, Pakistani and dual heritage	9.9%	5.7% (24)	10.4% (400)	6.7% (90)	6.5% (18)	6.6% (30)	11.2% 365	7.5% (94)	6.3% (19)	8.3% (19)
Of Black heritage including – African, Caribbean and dual heritage	3.3%	7.9% (33)	7.8% (301)	5% (69)	4.7% (13)	4.2% (19)	9.4% (304)	0.5% (57)	5% (15)	3.9% (9)
Dual Heritage – Other	0.3%	1.4% (6)	2% (76)	6	1	1.5% (5)	2.7% (87)	10	2	2.7% (6)
Of White heritage including – British, Irish, European and non European	85.3%	56% (235)	68.1% (2615)	73% (991)	67% (185)	64.9% (296)	70.4% (2286)	73.4% (916)	66.7% (199)	82% (187)
Other	1.3%	0	0.5% (16)	5	1	0	1.1% (35)			
Not Declared / Known or Recorded		29% (122)	10.4% (398)	14% (188)	2% (58)	22.8% 104	5.3% (171)	13.2% (165)	21% (63)	3% (7)
Total	100%	420	3842	1346	276	456	3248	1242	298	228

Note 1 From: State of the City Report 2010 Chief Executives Department (From Mid Year Population Estimates June 2006)
 Note 2 Referrals managed by Reception Team
 Note 3 Data as of 31/03/12

27.2 Contacts, CAFs and Referrals – Quarterly illustration of trend in numbers 2010 - 2011 and 2011- 2012



27.3 Source of Contacts, CAF and Referrals

	Contacts 2010 – 2011	CAF 2010 - 2011	Referrals 2010 - 2011	Contacts 2011 - 2012	CAF 2011 - 2012	Referrals 2011 - 2012
Police	2 389 (21.7%)	1	16%	2 544 (21.2%)	1	14%
School / Other Educational Organisation	1 577 (14.3%)	188	20%	1 547 (12.9%)	206	17%
Primary Health / Community Health	1 407 (12.8%)	113	12%	1 326 (11%)	94	8%
Secondary Health (A & E, Hospital)	435 (3.9%)		5%	443 (3.7%)		3%
Derby City Council	778 (7.1%)	57	14%	1 346 (11.1%)	121	24%
Other Local Authority	512 (4.6%)		15%	702 (5.8%)		12%
Other Legal Agency (Court, Probation, Immigration)	1,185 (10.7%)			1 066 (8.9%)		
Other Agency (including Voluntary Sector)	428 (3.9%)	49		362 (3%)	23	
Family / Relative / Self / Neighbour / Friend	1 373 (12.5%)		11%	1 463 (12.1%)		11%
Other including Concerned Individuals and agencies	488 (4.4%)	2	3%	619 (5.1%)	2	3%
Anonymous	148 (1.3%)			139 (1.2%)		
Not Recorded / Not Known	305 (2.7%)	3	4%	463 (3.9%)	13	8%
Total Number of Re Referrals			22%			21%
Rate of section 47 enquiries per 10 000 pop			78 Actual 415			62 Actual 327
Total	11 026	420	3842	12 020	456	3248

27.4 Demographic Data: Domestic Violence Victims

Police recorded domestic violence victim data for Derby City by gender and age for 2009/10 and 2010/11.

Derby City Age Group	2010/11				2011/12			
	Female	Male	NA	% Male	Female	Male	NA	% Male
17 and under	55	19	1	26%	46	23		33%
18 to 24	409	56		12%	397	68		15%
25 to 34	403	69		15%	374	73		16%
35 to 44	279	71		20%	289	71		20%
45 to 54	158	40		20%	115	43	1	27%
55 to 64	30	14		32%	16	15		48%
65 and over	12	7		37%	5	5		50%
Total	1346	276	1	17%	1242	298	1	19%

CAADA DASH Evaluation Forms

From October 2011 the Police complete the ACPO CAADA Dash risk assessment scoring tool for all DV incidents they attend.

Children involved in DV Incidents

One of the DASH questions is are there any children within the household.

Of the 7799 forms 4167 (54%) stated there were children within the household. This proportion matches the estimates of around 50% of DV incidents having children either present or within the household based on Calls for Service and Record Crime analysis.

DASH Q3 Any Children Responses 3/10/11 to 31/3/12.

	Yes	No	Not Known	Blank	Total	% Yes
Derby City	1479	1225	107	2	2813	53%
Derbyshire County	2688	2174	120	4	4986	54%
Total	4167	3399	227	6	7799	54%

27.5 Multi Agency Risk Assessment Conference (MARAC)

Overview

There has been a reduction in the number of cases and repeats within both the City and the Administrative County. The percentage of repeats has decreased in Derby City from 23% in 2010/11 to 17% in 2011/12. The reduction in numbers follows the introduction of the CAADA Dash form with a lower number of cases meeting the MARAC threshold.

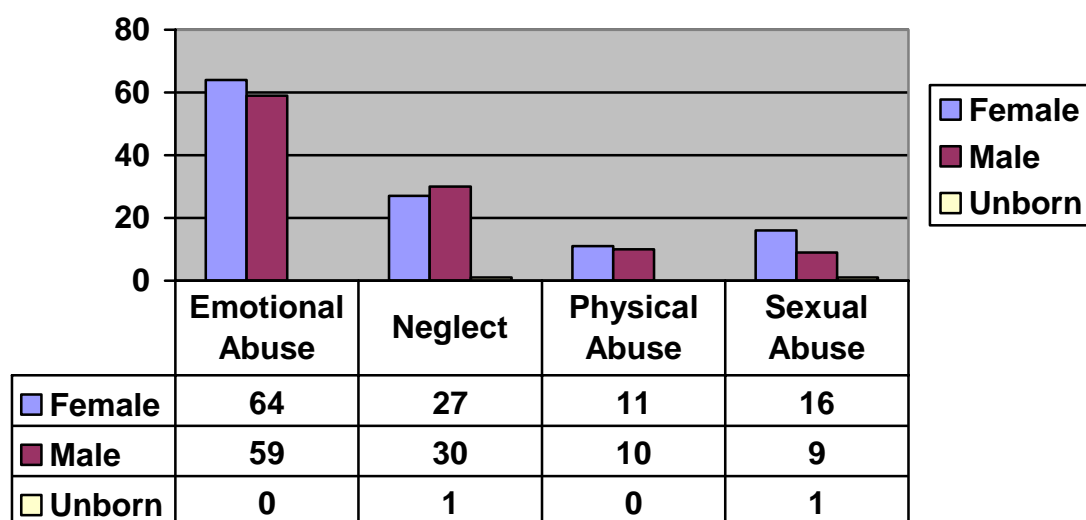
2011/12	Alfreton	Buxton	Chesterfield	South Derbyshire	County Total	Derby City
Number of Cases Discussed	66	65	106	47	284	158
Number of Repeat cases	12	13	22	6	53	27
% Repeats	18%	20%	21%	13%	19%	17%
Number of children in the household	100	79	129	66	374	199
Average children per case	1.5	1.2	1.2	1.4	1.3	1.3

2010/11	Alfreton	Buxton	Chesterfield	South Derbyshire	County Total	Derby City
Number of Cases Discussed	103	78	162	67	410	214
Number of Repeat cases	18	20	46	14	98	50
% Repeats	17%	26%	28%	21%	24%	23%
Number of children in the household	171	104	217	110	602	280
Average children per case	1.7	1.3	1.3	1.6	1.5	1.3

27.6 Children Subject of Child Protection Plans (Year End Figures)

Proportion of Section 47 enquiries which led to an initial child protection conference	10/11	11/12
	92% (382)	95% (312)

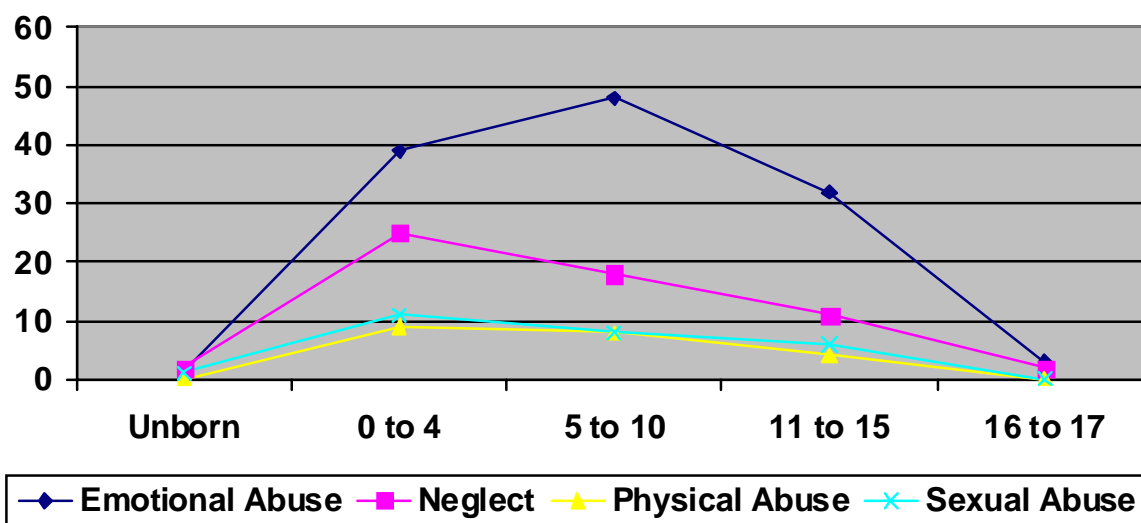
Numbers with Child Protection Plans (Total 228 30/03/12)



Domestic Violence

- New CP Plans due to Domestic Violence: 73 (24%)

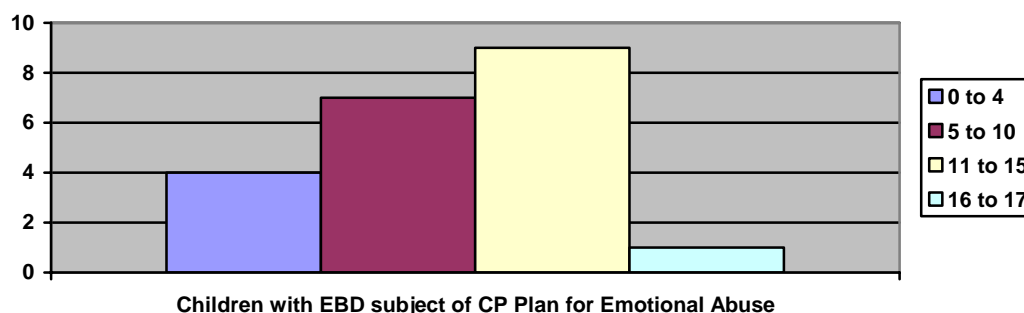
CATEGORY OF ABUSE – BREAKDOWN BY AGE GROUPS



Main Category	Unborn	0 – 4	5 – 10	11 – 15	16 – 17	Total
Emotional Abuse	1	39	48	32	3	123
Neglect	2	25	18	11	2	58
Physical Abuse	0	9	8	4	0	21
Sexual Abuse	1	11	8	6	0	26
Total	4	84	82	53	5	228

Children subject of Child Protection Plans with a Disability or Learning Difficulty

There are 21 children who have emotional and behavioural difficulties and are subject of child protection plans for Emotional Abuse. The spread of their ages is illustrated below. (The numbers are too small to provide meaningful information about trends in ethnicity)



There is one child (7 years old) who has emotional and behavioural difficulties and is subject of child protection plan for Physical Abuse.

There is one child (9 years old) who has a sensory disability and is subject of child protection plan for Neglect.

Family Attendance In Conference / ACYP Meetings:**Total 'Chaired Sessions': 604**

('Chaired Session' may be in respect of just one Child Protection Conference or Abuse by Child or Young Person (ACYP) Meeting, but may include siblings)

Family Present: 516 (85.4%)

Not Present: 88 (14.6%)

Attendance by yp & children 4 years and over

Children and young people over the age of four who attend their Conference or ACYP Meeting : 41

Partner Agency submission of reports for Child Protection Conferences and Child in Need Reviews

A small survey was conducted of one week's meetings from 28/11/11 (26 conferences and 18 CiN reviews) to monitor agency contributions to conferences and child in need reviews,

Reports were submitted as follows:

CiN reviews – usually received the same day or day before:

	Yes	No
Social Care	94%	6%
Health	22%	78%
Schools	83%	17%
Others	22%	78%

CP conferences, showing timeliness of submitting reports for both Initials and Reviews:

	NONE		SAME - 1 DAY		2-3 DAYS	
	Initial	Review	Initial	Review	Initial	Review
Social Care	0	0	100%	76%	0	24%
Health	0	6%	18%	50%	82%	44%
Schools	0	9%	57%	36%	43%	55%
Others	0	0	0	75%	100%	25%

DSCB Performance and Outcome Measures 2011 - 2012

28 National Safeguarding Indicators 2011 - 2012

Percentage of referrals to children's social care going on to initial assessment **(NI 68)**

2010/2011	53.2%	21011/2012	57%
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Initial assessments for children's social care carried out within 10 working days of referral **(NI 59b)**

2010/2011	63.8%	21011/2012	67.5%
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Core assessments for children's social care that were carried out within 35 working days of their commencement **(NI 60)**

2010/2011	91.9%	21011/2012	87.1%
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It should however be noted that overall performance is good compared to comparator authorities.

Stability of placements of looked after children: number of moves **(NI 62)**

2010/2011	6.7%	21011/2012	9.6%
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The performance measures the percentage of children with three or more placements in a year is better than the national average.

Stability of placements of looked after children: length of placement **(NI 63)**

2010/2011	69%	21011/2012	66.5%
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The percentage of looked after children aged under 16 who had been looked after continuously for at least 2.5 years who were living in the same placement for at least 2 years, or are placed for adoption and their adoptive placement together with their previous placement together last for at least 2 years. This result is slightly below the national average.

Child Protection Plans lasting two years or more **(NI 64)**

2010/2011	1.8%	21011/2012	6%
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This figure relates to a very small group of children (three children). Children with plans greater than 18 months are reported on monthly and subject to additional scrutiny to ensure appropriate steps are taken to remove the need for a plan within the two years. 86% of current plans are of a year's duration or less.

Children becoming the subject of a Child Protection Plan for a second or subsequent time **(NI 65)**

2010/2011	10.2%	21011/2012	12.4%
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This is a small group of children (38) which has gone slightly over target (32). The local authority is using repeat plans as an alternative to care, where safe to do so. This measure will however need monitoring to ensure that work with families is concluded effectively and the need for repeat interventions avoided.

Child Protection cases which were reviewed within the required timescales **(NI 67)**

2010/2011	100%	21011/2012	100%
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DSCB Performance and Outcome Measures 2011 - 2012

First time entrants to the Youth Justice System aged 10 to 17 **(NI 111)**

2010/2011	219	21011/2012	215
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Provisional data (until validation by the Youth Justice Board). In comparison to the increases experienced towards the end of last year and beginning of this year when youth crime prevention intervention effectively stopped as a result of funding reduction and re-structuring of service delivery in this area, each quarter's reduction in 2001/12 is potentially indicative of the incremental positive impact early intervention teams are now having upon FTE after one year in existence. Despite concerns that there would be a continual rise, the curve has been turned, albeit marginally, but provides a solid foundation from which to build on over the next 12 months.

Care leavers in employment, education or training **(NI 148)**

2010/2011	57.7%	21011/2012	62.9%
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Although this year end figure does not meet local target (65%) it remains indicative of progress from the previous year.

Care leavers in suitable accommodation **(NI 147)**

2010/2011	84.6%	21011/2012	91.4%
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This year end figure exceeds local target (90%) and is indicative of progress from the previous year.

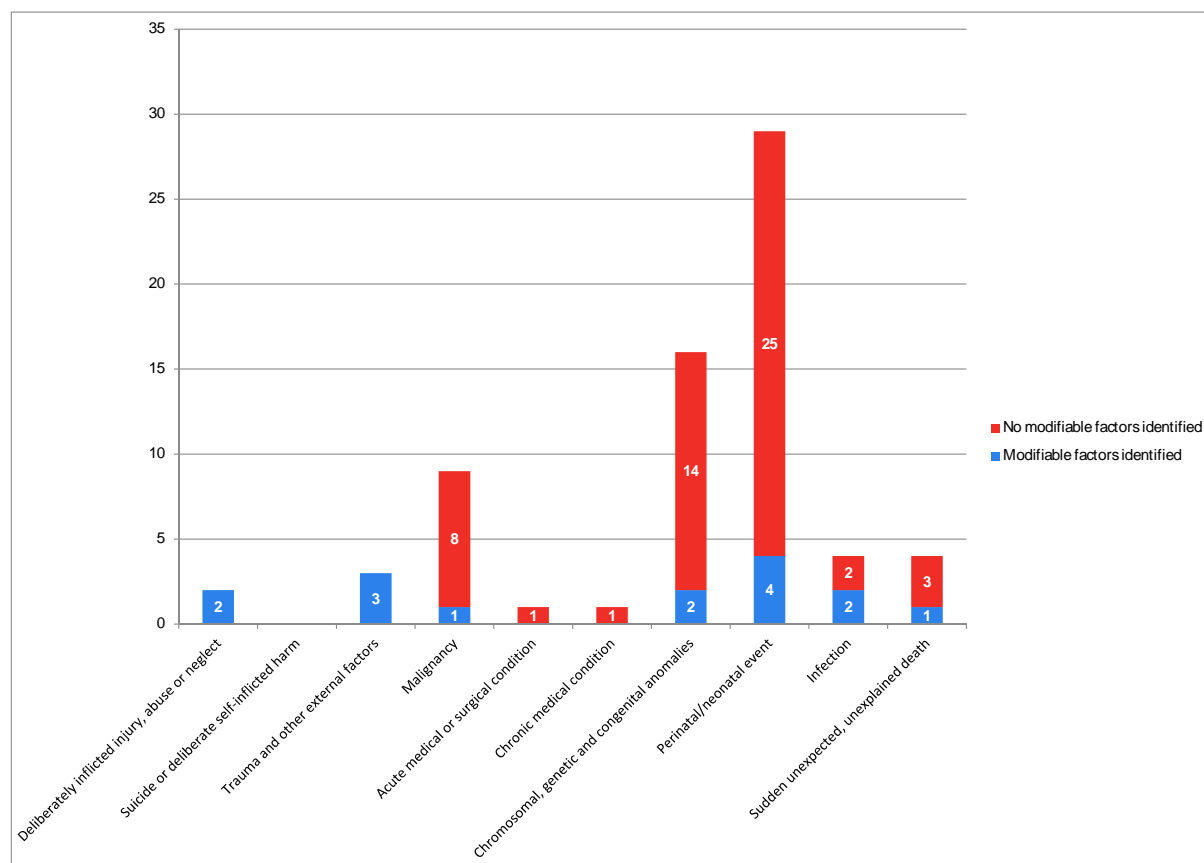
DSCB Performance and Outcome Measures 2011 - 2012

29 Local Safeguarding Outcome Measures 2011 - 2012

29.1 Early Intervention Outcome Measures

Data on categories of preventable deaths:

Source CDOP Annual Report 2010



Numbers of children examined for Child Sexual Abuse and Non Accidental Injury (Community Paediatric Service and Hospital)

	April 2007-March 2008	April 2008-March 2009	April 2009-March 2010	April 2010-March 2011
Child Sexual Abuse (Community Paediatric Service)	62	45	79	62
Non Accidental Injury (Community Paediatric Service)	73	63	72	99
Child Protection Medicals (Hospital)	64	58	69	87

DSCB Performance and Outcome Measures 2011 - 2012

29.2 Children and Young People who are victims of crime 04/11 to 03/12

Recorded Crimes	Force Area	Derby City
Recorded Crimes where Victim U18	3892	1477
Victim U18 for Violent Crimes % of total recorded violent crimes where Victim U18	2056 52.83%	664 44.96%
Victim U18 for Sexual Crimes % of total recorded sexual crimes where Victim U18	475 12.20%	175 11.85%
Victim U18 for Robbery % of total recorded robbery where Victim U18	166 4.27%	106 11.85%
Victim U18 of Acquisitive Crime * % of total recorded acquisitive crimes where Victim U18	279 7.17%	144 9.75%
Sanction detections where Victim U18 NB: Sanction Detections exclude all Restorative Disposals and NFA's	964	327
Sanction detections where Victim U18 for Violent Crimes % of total sanction detections for Violent Crimes where Victim U18	834 86.51%	271 82.87%
Sanction detections where Victim U18 for Sexual Crimes % of total sanction detections of Sexual Crimes where Victim U18	158 16.39%	52 15.90%
Sanction detections of Cruelty to & neglect of children % of total sanction detections of cruelty to and neglect of Victim U18	14 1.45%	6 1.83%

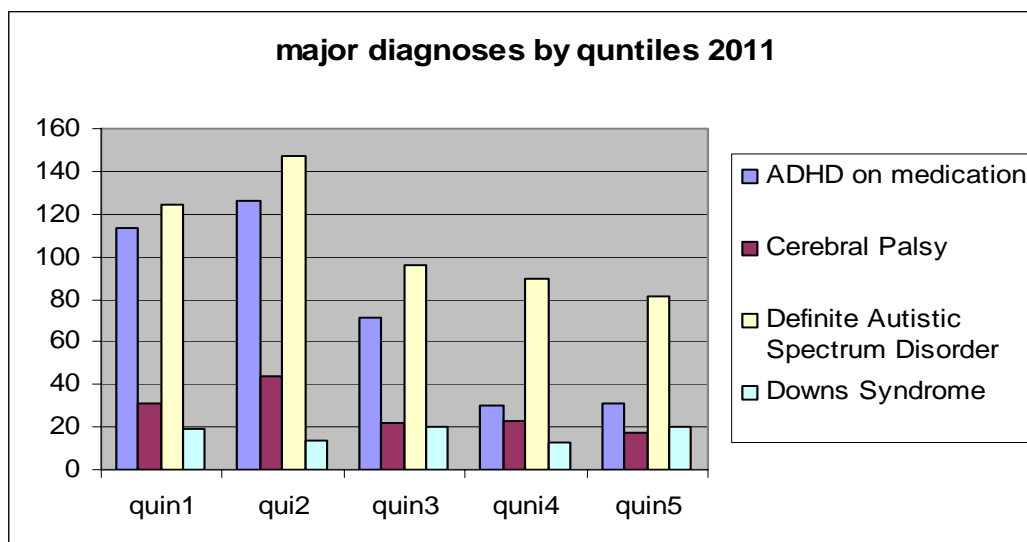
Please Note: Acquisitive Crime includes Burglary Dwelling, Robbery, Theft of Vehicle and Theft from Vehicle

29.3 Children in Derby City diagnosed by Community Paediatricians with Attention Deficit Hyperactivity Disorder as a marker for emotional well being

Rationale:

- Research has shown that children who face difficult domestic environments are more likely to have poor concentration, poor impulse control and to respond to triggers in the environment that are not apparent to others
- Research into the early development of the brain gives a pathological basis for this as neural networks and pathways will develop abnormally in children exposed to a threatening, uncertain, uncaring environment
- Local evidence shows a significant association of ADHD diagnoses by community paediatricians with deprivation as measured by the Index of Multiple Deprivation (2007)

DSCB Performance and Outcome Measures 2011 - 2012



#This graph compares four conditions across the deprivation quintiles (fifths) with quintile 1 being the most deprived and quintile 5 the least deprived.

- Down's syndrome diagnoses show no linkage with deprivation
- Cerebral palsy may show some linkage
- Autistic spectrum disorder also shows some linkage
- ADHD shows significant linkage

This would suggest that early intervention to improve the lives of a significant number of these children could have prevented them presenting to and being diagnosed by specialist services. Hence the rationale for including this as a marker for child wellbeing and the effectiveness of prevention and early intervention.

The number of children with a diagnosis of ADHD in 2010/11 is 267 (183 children are on medication).

29.4 Children who are receiving School Action Plus specifically to address needs in relation to (a) Behaviour, Emotional and Social Difficulties and (b) Speech Language and Communication Needs

Figures in respect of Primary Need indicate baseline evidence (January 2012)

Behaviour, Emotional and Social Difficulties

- 628 children were receiving School Action Plus

Speech Language and Communication Needs

- 499 children were receiving School Action Plus

These two outcomes for children may be significantly influenced by environmental factors and would suggest that early intervention to improve the lives of a significant number of these children could have prevented them from requiring additional services through School Action Plus. Hence the rationale for including these figures as a baseline for future evaluation of and as

DSCB Performance and Outcome Measures 2011 - 2012

markers for child wellbeing and the effectiveness of prevention and early intervention.

29.5 Early Years foundation stage assessment (“Readiness for School”)

The Department for Education’s (DfE) Statistical First Release (SFR) provides information and an indication of both national and Local Authority (LA) achievement outcomes at the end of the DfE Early Years Foundation Stage (EYFS) Profile Census 2011. The primary purpose of the profile is to provide year 1 teachers with reliable and accurate information about each child’s level of development as they reach the end of the EYFS, allowing the teacher to plan an effective, responsive and appropriate curriculum that will meet the needs of the child. In addition to this national dataset, Derby City’s School Health and Children and Young People’s Public Health Team have coordinated a ‘Readiness for School Survey 2011’

The full report will be published in 2012 in Derby

The key points are:

The EYFS includes 13 assessment scales within 6 areas of learning:

- Personal, Social and Emotional Development (3 assessment scales)
- Communication, Language and Literacy (4 assessment scales)
- Problem Solving, Reasoning and Numeracy (3 assessment scales)
- Knowledge and Understanding of the World (1 assessment scale)
- Physical Development (1 assessment scale)
- Creative development (1 assessment scale)

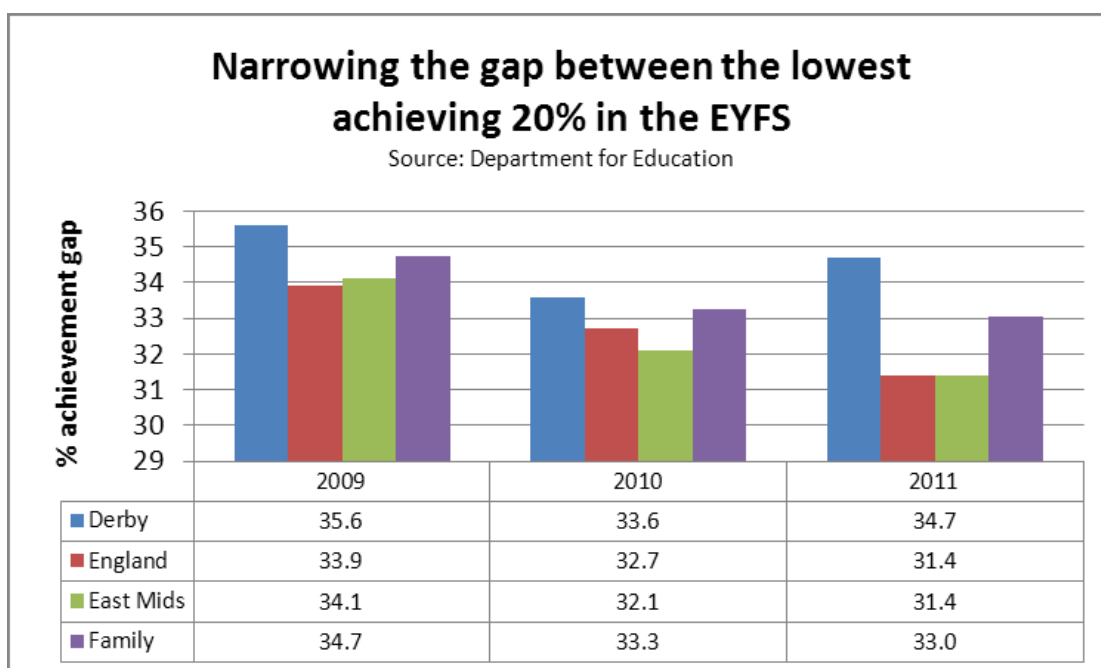
“Derby performs worse than England, the East Midlands and Family group of LAs in each of the 13 assessments, and consequently six areas of learning.

The most common developmental issues for children starting school in Derby are: the inability to use cutlery (24%); and to dress/undress independently (22%).

The least common developmental issues for children starting school in Derby are: bottle use (1%); and pushchair travel (1%).

The highest rates of developmental issues are found in Locality 3 – Arboretum, Normanton and Abbey Wards.

Derby is just one of 39 LAs in England where the gap, and therefore inequality of achievement between the lowest performing 20% in the area and the average for the area, has widened since 2010.”



Although Derby saw a 2% fall in the proportion of children achieving 20% of the EYFS between 2009-2010, it experienced a rise of 1.1% between 2010-2011. This fluctuating trend is something that should continue to be monitored.

Derby's Family, the East Midlands and England comparator groups have all experienced a continued reduction in the gap over the past three years; of 1.7%, 2.7% and 2.5% respectively.

Derby is just one of 39 Local Authorities (of a total 147) that has experienced a widening gap and therefore, inequality of achievement since 2010.

29.6 Decayed, filled and missing teeth (DMFT index - as indicative of levels of neglect, will be available to the DSCB in 2013)

29.7 Domestic Violence Outcome Measures

Comparing 2010/11 and 2011/12 there has been:

- an decrease in number of DV incidents,
- an increase in the number of recorded DV crimes,
- an increase in the proportion of DV crimes where there has been an arrest (up 1.7%),
- an increase in the number and proportion of Restorative Disposals
- a decrease in the number of MARAC cases (down from 136 to 92)
- a decrease in the rate of repeat cases at MARAC (down 0.3%).

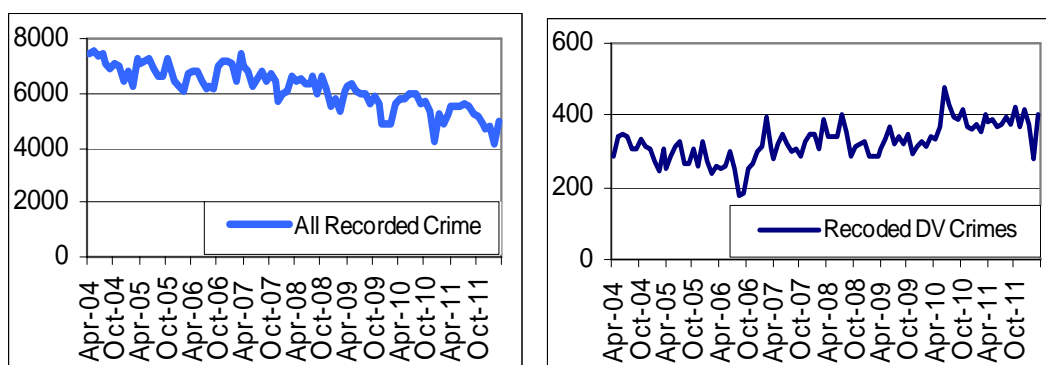
This contrasts with around a decline in overall recorded crime meaning the proportion of all crime that is Domestic Violence has increased - **so more**

DSCB Performance and Outcome Measures 2011 - 2012

than 1 in 12 recorded crimes is Domestic Violence related (an increase from around 1 in 23 in 2004/5).

POLICE	08/09	09/10	10/11	11/12
All Crime	73660	68005	65884	
Number of DV Incidents	17265	18087	18726	
Number of DV crimes	4148	4212	4540	
% of Incidents crimed	24%	23%	24%	
% All Crimes that are DV	5.6%	6.2%	6.9%	

The charts below show that although all recorded crime numbers have been falling consistently from 2004 recorded DV offences have been rising from 2007 and this will in part be due to increased understanding, better recording but also increased reporting due to the many initiatives that have been carried out. However certain spikes are also due to specific events such as the one seen in June/July 2010 is likely to have been caused by the football world cup. The current and increasing economic pressures are also likely to increase the stresses within relationships and may lead to increasing incidents.



29.8 Analysis of Data

Demographic Data: Derby Population, CAF, Referrals to CYPD, Domestic Violence Victims (all ages) and Children Subject of Child Protection Plans

Demographic figures show a disproportionate representation referrals to CYPD of the collective figures for the BME community. There is insufficient data at this time to identify the reason for this, and further action will be taken over the next year to identify whether this is attributable to identifiable factors.

Contacts, CAFs and Referrals – Illustration of trend in numbers 2010 – 2011 and 2011-2012

Contacts and Referral rates have begun to reduce in the last quarter and this may be indicative of progress with the early intervention strategy. There has been an increase in CAF in the last quarter. Examining trend direction and quality assurance findings from case audit will provide evidence for further analysis about this in the coming year. The DSCB will need to ensure that factors such as thresholds for services and for concerns about the welfare of

DSCB Performance and Outcome Measures 2011 - 2012

children are being appropriately applied and this is evident in the effect on these trends.

The figures for the completion of the CAF do not show substantial change and therefore the concerns about the use of the CAF will be monitored over the coming year.

Demographic Data: Domestic Violence Victims

Whilst there has been a decrease in domestic violence incidents, this remains a significant issue for both the Police attending the majority of incidents, and the subsequent referrals to CYPD and Health Services.

Full figures for Police attendance and referral in Derby will be published when available. Early figures for contacts from the Police to CYPD have increased in actual numbers and do not indicate a reduction as reflected in the rate of referrals.

Multi Agency Risk Assessment Conference (MARAC)

Figures indicate a reduction of the number of MARAC meetings held and this is attributed to an improvement in the assessment of the vulnerability of the victim using the new model of assessment by the Police.

Children Subject of Child Protection Plans

The ratio of children who became the subject of a child protection plan per 10,000 population aged under 18 reduced from 63.60 per 10,000 population (10/11) to a year end ratio of 57.00 per 10,000 population (11/12) which is around the number to be expected in a city with Derby's profile.

There remains an issue about a greater than average use of short-term CP plans in Derby which maintains pressure on this indicator and will be subject to further scrutiny and action. It will be important to try and maintain consistency around this threshold into the future, as historically the number has varied significantly.

The number of children from minority communities subject to CP plans appears to have fallen across the year to Dec 11 but stabilised since then. Although numbers are small and hence may not show an accurate trend, CIN figures do not appear to show this same pattern. This may mean that harm to children in minority communities is not being identified and responded to in the same way, but further scrutiny and analysis is needed before conclusions can be drawn. This work will be undertaken this year.

Specific additional information identifies the number of children and young people who participate in their child protection and ACYP meetings. Revised data will be sought over the coming year to illustrate their ages and how participation has impacted upon the outcome.

Partner Agency submission of reports for Child Protection Conferences and Child in Need Reviews

DSCB Performance and Outcome Measures 2011 - 2012

The small sample of data collected was not broken down for schools but it appears that primary schools are more likely to submit reports and in good time, than secondary schools.

Timeliness of submitting reports makes a big difference to the effectiveness of the conference; the chair is well prepared and can make sure time is allocated appropriately, parents are also more likely to have seen the report and therefore there are fewer points of contention for them, and proper consideration can be given to the participation by children and young people. It is particularly disappointing that so few review reports are submitted in advance, when there has been 3 or 6 months notice of the date of the meeting.

Attendance at all meetings was good; Health staff have begun working together so that where more than one is involved, only one attends and can supply information from the other. This relies on good communication between them, but is helpful in managing the number of professionals especially for sibling groups.

Joint work has been undertaken by the Named Doctor for Derby City and a Child Protection Manager to facilitate and encourage better participation and contributions from GPs, including parents' GPs. A standard report format is being encouraged, conferences wherever possible will be scheduled for 11.30 or 1.30 where presence of the GP is particularly important, and the details of parents' GPs are being taken when a conference is set up. Further work is needed to facilitate contributions by Paediatricians and examining doctors, including looking at conferencing technology.

In 2012/13, there will be routine monitoring of attendance and submission of reports, as well as participation by parents and children, so more information and analysis will be available.

Early Intervention Outcome Measures

The collective illustration of outcome measures for children and young people sets out evidence of the concerns that remain about progress made to improve outcomes for children.

Baseline Data illustrating the numbers of child protection medicals and crimes against children and young people will inform analysis of trends in the coming years.

Establishing baseline for outcome measures such as School Action Plus and levels of ADHD will sit alongside the Early Years foundation stage assessment ("Readiness for School") to indicate how effectively multi agency intervention is progressing early intervention.

Using these outcome measures provides the evidence for the DSCB to evaluate on a transparent basis the progress being made. Current evidence substantiates the decision for the DSCB to maintain Early Intervention as a priority action

DSCB Performance and Outcome Measures 2011 - 2012

Domestic Violence Outcome Measures

The Police are taking action to capture the data on repeat victims and repeat perpetrators and this should be available to the DSCB in the coming year.

This will provide an opportunity, alongside the other data, for the DSCB to monitor the implementation of the domestic violence and sexual violence action plan.

30 The DSCB Commentary on the Effectiveness of Safeguarding Arrangements in Derby

30.1 There has been some demonstrable progress following the implementation of the multi agency teams to provide a coordinated early response to children and their families.

30.2 Whilst the multi agency team arrangements were being implemented during spring and summer 2011, there were other changes and reorganisations impacting upon partner agencies.

30.3 The Derby Safeguarding Children Board is satisfied that there is sufficient evidence to indicate that there needs to be continued focus on the two key priorities of Early Intervention and Domestic Violence.

30.4 The Derby Safeguarding Children Board has also identified areas for further work and scrutiny with an emphasis on outcomes for children, young people and their families. These are set out below:

30.5 Action for the DSCB in the coming year

Extending the local information that helps to keep children safe in Derby online to the public and professionals with the revision of the Derby Safeguarding Children Board website will be a key priority.

Embedding consistent and robust arrangements to consult with children, young people (including those who have been missing) and their families will be one of the priorities for the DSCB in the coming year.

Embedding up to date and effective policies and procedures across the all agencies will be one of the priorities for the DSCB in the coming year.

This will include:

- monitoring of the effectiveness of the impact of revised and new guidance;***
- ensuring that there are strong consistent links between early intervention and child protection procedures and guidance;***
- Board members' assurance that Board approved guidance is embedded in their own agency.***

Establishing representation from lay members will be one of the priorities for the DSCB in the coming year.

The DSCB will continue to take action to promote awareness of the risks of Child Sexual Exploitation and ensure that local arrangements focus on improving outcomes for those children and young people affected by CSE.

DSCB Performance and Outcome Measures 2011 - 2012

The DSCB will continue to take action to promote awareness of private fostering and monitor rate of referrals and the outcomes for children and young people.

The DSCB will further develop arrangements to report allegations about staff and volunteers with partner agencies and improve the timeliness of action taken in respect of the concerns

Embedding consistent and robust Early Intervention arrangements remain a key goal in Derby. The DSCB will continue to promote such arrangements. The inter relationship between early intervention and child protection remains a key factor in assessing whether local arrangements are improving the safety and positive outcomes for local children and young people.

The analysis of the effectiveness of arrangements in place to prevent and respond to domestic violence and its impact on children and young people remains a key priority for the DSCB.

The DSCB will incorporate the learning arising from the review of the effectiveness of training and embed consistent and robust training and development pathways within the action plan for the Training, Learning and Development subgroup

Embedding consistent early intervention and robust safeguarding audit arrangements across the education sector will be one of the priorities for the DSCB in the coming year.

Embedding consistent and robust S11 audit arrangements across the all agencies will be one of the priorities for the DSCB in the coming year.

DSCB Performance and Outcome Measures 2011 - 2012

31 Derby Safeguarding Children Board Membership 2011-2012

Member	Role	Agency
Christine Cassell	Independent Chair	Derby Safeguarding Children Board
Andrew Bunyan	Strategic Director for Children and Young People	Children and Young Peoples Services
Liz Adamson (VICE CHAIR)	Designated Doctor	Derbyshire Healthcare Foundation Trust
Councillor Evonne Williams	Lead Member	Derby City Council
Jacqui Jensen	Director of Early Intervention and Integrated Safeguarding	Children and Young People Directorate
Nina Martin	Head of Service Quality Assurance	Children and Young People Directorate
Suanne Lim	Head of Youth Offending Service	Derby City Council
Cathy Winfield	Deputy Director of Nursing	Derby Hospitals NHS Foundation Trust
Lynn Woods	Deputy Chief Nurse and Safeguarding Lead for the Trust	NHS Derbyshire County
Stephen Edgeley	Head of Patient Safety/ Safeguarding Lead	Derbyshire Healthcare NHS Foundation Trust
Neville Hall	Service Manager Derby Cafcass	CAFCASS
Debbie Platt	Detective Superintendent and Head of Public Protection	Derbyshire Police
Rosemary Plang	Director of Probation	Probation
Jane Appleby	Lead Children, CAMHS and Safeguarding	NHS East Midlands Strategic Health Authority
Simon Emsley	Headteacher	Schools - Primary
Phil Harrison	Headteacher	Schools Secondary
Nathalie Walters	Representative for the Children and Young People's Network	Safe and Sound Derby

DSCB Performance and Outcome Measures 2011 - 2012

Ray McMorrow Designated Nurse (Adviser)	Designated Nurse	NHS Derby City
Hannah Hogg	Head of Legal Services (Children and Adults)	Derby City Council Legal Services
Mark Sobey	Board Manager	Derby Safeguarding Children Board

Derby Safeguarding Children Board Membership 2012 - 2013

Member	Role	Agency
Christine Cassell	Independent Chair	Derby Safeguarding Children Board
Andrew Bunyan	Strategic Director for Children and Young People	Children and Young Peoples Services
Liz Adamson (VICE CHAIR)	Designated Doctor	Derbyshire Healthcare Foundation Trust
Councillor Martin Rawson (from June 2012)	Lead Member	Derby City Council
Jacqui Jensen	Director of Early Intervention and Integrated Safeguarding	Children and Young People Directorate
Nina Martin	Head of Service Quality Assurance	Children and Young People Directorate
Suanne Lim	Head of Youth Offending Service	Derby City Council
Cathy Winfield	Deputy Director of Nursing	Derby Hospitals NHS Foundation Trust
Lynn Woods	Deputy Chief Nurse and Safeguarding Lead for the Trust	NHS Derbyshire County
Stephen Edgeley	Head of Patient Safety/ Safeguarding Lead	Derbyshire Healthcare NHS Foundation Trust
Judith Russ	Service Manager Derby Cafcass	CAFCASS
Andrew Stokes	Detective Superintendent and Head of Public Protection	Derbyshire Police
Rosemary Plang	Director of Probation	Probation

DSCB Performance and Outcome Measures 2011 - 2012

Dawn Robinson	Head of Service - Prevent	City and Neighbourhood Partnerships
Jane Appleby	Lead Children, CAMHS and Safeguarding	NHS East Midlands Strategic Health Authority
Simon Emsley	Headteacher	Schools - Primary
Liz Coffey	Principal	Schools Secondary
Nathalie Walters	Representative for the Children and Young People's Network	Safe and Sound Derby
Ray McMorro Designated Nurse (Adviser)	Designated Nurse	NHS Derby City
Hannah Hogg	Head of Legal Services (Children and Adults)	Derby City Council Legal Services
Mark Sobey	Board Manager	Derby Safeguarding Children Board