



**ISLE OF WIGHT SAFEGUARDING
CHILDREN BOARD
ANNUAL REPORT 2013/14**

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Maggie Blyth

I am pleased to present the 2013/14 Annual Report of the Isle of Wight Safeguarding Children Board (IOWSCB). It outlines progress made during 2013/14 and summarise the key challenges ahead for all agencies to ensure children on the Island are safe from harm, abuse or neglect.

I took up the role of the Independent Chair in October 2013 and have carefully considered the work undertaken by all agencies working with children on the Isle of Wight. The local authority children's services entered into a partnership with Hampshire County Council just before my arrival and this has benefitted both the Isle of Wight and partner agencies in establishing joint policies and procedures to keep children safe. It has been a challenging year for all agencies following the issuing of the Government Improvement Direction in January 2013. However, I have been impressed by the willingness of the Isle of Wight Council to work strategically with the Isle of Wight CCG and NHS Trust alongside Hampshire Constabulary and improve the partnership. Good examples of integrated working on the Isle of Wight can be seen in the instigation of the multi-agency safeguarding hub (MASH) introduced in January 2014 and the plans for locality hubs across the Island – ensuring local responses to children in need. Children and Young People on the Isle of Wight must expect the agencies involved to work even more closely together and to be visionary and creative.

The IOWSCB has also benefitted from increasing commitment from schools across the Island, from children's centres and voluntary sector organisations to protect children. Consequently, some of the improvements of this year have seen significantly more multi-agency training for front line staff in protecting children, the launch of new guidance for professionals in how to access child protection services and greater clarity over the sharing of information. Agencies will be required to make on-going system improvement on the Island to be effective, but the achievements made during this year gives me confidence that children's needs are prioritised by all key organisations. Until the IOWSCB is functioning fully effectively a Children's Improvement Board will remain in place as part of the Improvement Direction.

The IOWSCB Members have agreed with me the priorities for the coming year 2014/15 and these are captured at the end of this Annual Report.

Alongside the change on the Island to protect children, we are seeing significant differences to the child protection system nationally. Referrals into the system have continued to increase and there are many more children on child protection plans or in need of protection than a few years ago. This is at a time when public sector resources have diminished significantly and this puts pressure on professionals at the front line. The impact of the economic downturn over the last 3 years is also affecting the lives of children and families on the Isle of Wight and is placing demands on those working with families and organisations too. Isle of Wight Children's Services has seen an increase in the number of children on child protection plans and those being looked after in care over the last year at a time when the re-structuring of children's services to ensure provisions are robust and of high quality is still bedding down.

Effective Safeguarding and child protection involves committed integrated working between professionals based on knowledge and confidence. Experience shows that change in safeguarding arrangements mean that working relationships change and trust needs to be re-established. I have been impressed with how many front line staff work together on the Island. Children's Services has worked hard to train up newly qualified social workers. The Isle of Wight is well on track to recruit more Health Visitors in line with national expectations and the recent review of policing has ensured continuing presence on the Island in relation to child protection.

The success of the coming year will depend on how front line staff working in social care alongside GP's, midwives, teachers and the rest of the children's workforce share information and work closely together. Supported by increasing robust procedures, learning from difficult cases and having high expectations of strong management and leadership within children's services, then the IOWSCB will continue to exercise its scrutiny role and provide the necessary assurance about what is working well and what requires improvement.

I am grateful for all the hard work put in to make these changes from front line staff and managers on the Isle of Wight and to the commitment and engagement shown by the political leadership from the Council.





LOCAL DEMOGRAPHICS

There are approximately 26,258 children and young people living on Isle of Wight. The 0-17 population accounts for around 19% of the resident population, a proportion lower than both the regional and national average. There is a significantly higher than average population of the 65+ age group, being approximately 24% of the island's population, and predicted to increase to 36% of the population by 2035.

The proportion of children and young people entitled to free school meals is currently 19%; this is above the regional average (15%), but slightly below the national average of 21%. Child poverty levels are currently at 21.1%, which is above the regional figure but in line with the national average. Indices of Multiple Deprivation 2010 show the Isle of Wight as within the 40% most deprived local authorities in England ranked 126th/326.

Children and young people from minority ethnic groups account for 8.3% of the total population, compared to 14.3% in the South East and 17.2% in the country as a whole. Although lower than regional and national averages the number of children from minority ethnic groups has trebled since 2001. The largest category within this group are 'White: Other' – this group consists of mainly Eastern European children. 'Asian or Asian British' follows this. The proportion of pupils with English as an additional language is significantly below the national average. The following data was correct as at 30 June 2013.

VULNERABLE GROUPS

It is impossible to offer a complete picture of the children whose safety is at risk on the Isle of Wight because some abuse or neglect may be hidden, despite the best efforts of local services to identify, step in and support children who are being harmed or are at risk of being harmed. Many groups of children on the Isle of Wight are vulnerable and are at increased risk of being abused and/or neglected. This annual report starts by looking at the categories of children and young people on the Isle of Wight who have been identified by the local authority and other agencies as in need of protection as they are more vulnerable. These categories are not exhaustive and many factors such as going missing from home and living in households where there is domestic abuse, substance misuse and / or parents are mentally ill can place children at increased risk of harm from abuse and/or neglect.

CHILDREN IN CARE

Children in care are those looked after by the local authority. Only after exploring every possibility of protecting a child at home will the local authority seek a parent's consent or a court decision to remove a child away from his or her family. Such decisions, whilst incredibly difficult, are made when it is in the best interest of the child.

During 2013/14, the number of children in care remained stable (195) but is higher than statistical neighbours and the national average and LSCB projections indicate it should be lower. 165 could be anticipated based on the Island's demography. A plan is in place to ensure the right cohort are in care. Positively, there is a decrease in the number of children coming through the system. As reported to the May 2014 IOWSCB there were 32 children in care placed off Island. All these children are being reviewed by senior managers in Social Care to ensure appropriate planning and protection is secured for this vulnerable group and reported into the IOWSCB.

CHILDREN WITH A CHILD PROTECTION PLAN

Children who have a Child Protection Plan are considered to be in need of protection from either neglect, physical, sexual or emotional abuse; or a combination of one or more of these. The Child Protection Plan details the main areas of concern, what action will be taken to reduce those concerns, by whom and how we will know when progress is being made.

During 2013/14 the number of children with a CPP has increased from 101 at the end of March 2013 to 164 at the end of March 2014. This is higher than the national and statistical averages and the trajectory is that it will continue to rise.

This rise is almost certainly due to the impact of changes associated with the new leadership, systems and oversight put in place through the Isle of Wight's strategic partnership with Hampshire.

The partnership with Hampshire was put in place to improve child protection systems which were previously failing. One of the necessary tasks has been to identify more clearly and accurately those children who are currently at risk of neglect and abuse.

A particularly significant factor in this increase is due to the creation of a child in need (CIN) service within children's social care. Previously there was no CIN service within social care and those children who were deemed to be in need were referred to early help hubs. After the implementation of the strategic partnership Children's Services audited all of the cases being held at this level and 120 children were identified as having needs that fell within the social care thresholds and were then stepped up to social care for an assessment. A significant number of these children were subsequently progressed to a child protection plan and held within the newly created CIN teams.

Furthermore, during the course of the year, as professionals have begun to trust the revised arrangements, and also with the implementation of Hants Direct, a more consistent and rigorous approach of thresholds is now applied. The IOWSCB believes these factors have resulted in the rise in child protection plans.

The LSCB has also noted that the increase in child protection plans creates pressures within the system for all partners to service the multi-agency planning meetings and for children's social care in particular to maintain close oversight and visiting arrangements.

Children's Social Care has been asked to undertake an audit and analysis of the rise in Child Protection Plans to assist the IOWSCB in its understanding of the reasons for the increase.

The IOWSCB routinely scrutinises child protection activity at an Island Level and compares information to statistical neighbours and the England average to understand any trends or issues impacting on safeguarding activity.

CHILDREN WHO ARE AT RISK OF SEXUAL EXPLOITATION

A lot of progress has been made over the last year in identifying children living on the Isle of Wight who are or potentially could be at risk of Child Sexual Exploitation. This is driven by a highly motivated group from multiple agencies via the LSCB CSE Sub-Group. One of the key pieces of has been the introduction of the Sexual Exploitation Risk Assessment Framework (SERAF). The SERAF has allowed all agencies to standardise their approach to identify children who may be at risk of CSE. Another key tool being developed is the formation of an operational group to share intelligence between agencies and identify risk management plans to safeguard vulnerable children. This group is called the CSE Risk Assessment Conference (CSERAC) and is based around the same principles used to identify and manage risk to victims of Domestic Violence through the MARAC. This group has been up and running since February 2014 and has so far identified 19 children at risk of CSE along with 5 perpetrators.

Part of the progress made over the last year involves raising awareness of the signs and issues relating to CSE, both with professionals and children. In March 2014, various schools were attended by a theatre company that put on a play called "Chelsea's Choice". After the play, a plenary session was held and run by the actors to engage directly with the children. The play reached over 1500 students on the Island and further funding has been secured via the Police and Crime Commissioner to run further events in order to reach more students across the Island. Professionals are also receiving further training in the use of the SERAF and free e-learning is available for all agencies through the IOWSCB website.

YOUNG PEOPLE WHO OFFEND OR AT RISK OF OFFENDING

The Isle of Wight Youth Offending Team (YOT) works with children and young people (age 10-17) who have offended or are at risk of offending. The YOT has seen the number of children and young people they work with decrease over the past year. In 2012-13 the YOT worked with 295 young people – this reduced to 194 over the 2013-14 year.

Significant work with partners, particularly the police, over the past year to decrease the number of first time entrants coming into the criminal justice system has started to take effect, and explains the downwards trend. However, those young people who are involved with YOT are becoming more complex in terms of their risk and needs. This was noted by a recent HMIP Inspection (April 2014).

The number of young people sentenced to a custodial sentence on the Isle of Wight has remained at 9 for the past 2 years. However there has been a significant reduction in the number of young people remanded to secure accommodation: In 2012-13 it was 7, reducing to 1 over the past year. The IOW YOT was successful in bidding to the Office of the Police and Crime Commissioner for funding to create a specific crime prevention function within the Targeted Youth Support team. These posts are currently being recruited to, and will work with children and young people who are at risk of offending or anti-social behaviour.

CHILDREN WHO ARE PRIVATELY FOSTERED

Parents may make their own arrangements for their children to live away from home. These are privately fostered children. The local authority must be notified of these arrangements. At the end of March 2014 the local authority was aware of 1 privately fostered child. Reported numbers remain low and efforts of the local authority and the IOWSCB have been reviewed to raise awareness of the need to notify the local authority of these arrangements.

An action plan is in place and monitored by the performance and quality assurance sub-group of IOWSCB.

CHAPTER 1

LOCAL AREA SAFEGUARDING CONTEXT

MENTAL WELLBEING AND SELF ESTEEM

The Children's Society survey found that primary school children on the Island are happier than the England average, however, older children of secondary school age are less happy. Older girls in particular are more worried about their appearance than their counterparts in the rest of England and Wales. We also know that children's experience of bullying has strong associations with levels of overall wellbeing (Rees et al. 2010). On the Island about a third (34%) of all children asked, in years five to ten, said they had been bullied and just under half (46%) said they had never been bullied.

During 2012 and 2013 the Isle of Wight Local Involvement Network (LINK) carried out a series of discussion groups and a survey with young people focusing on young people's mental health and support services on the Island. The resultant report (Bringing it Together) was published by Healthwatch in July 2013. Whilst it was acknowledged that there are areas of good practice on the Island, the report made several recommendations which included: work needs to be done to reduce the stigma associated with poor mental health, all involved organisations need to work together to reduce the risk of isolation and bullying, there should be a range of choice for our young people to access help and support and support networks should be commissioned separately for children and young people, and adults.

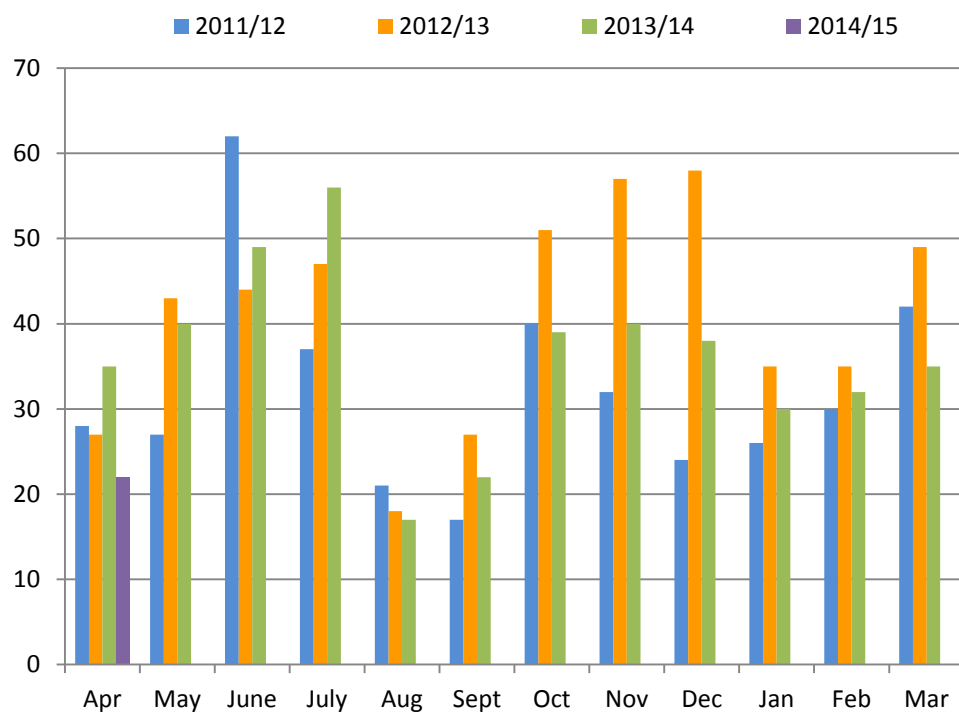
YOUNG PEOPLE ATTENDING A&E

In 2013/14, a total of 83 children attended A&E with self-harming behaviours. The majority were admitted to the Children's Ward for review by the Community Child and Adolescent Mental Health Service prior to discharge. The mean age of those attending was 15 years. The youngest was 8 years old, admitted for deliberately stopping eating and had two separate admissions. 71% were female which is a consistent trend.

A total of 70 young people attended A&E with alcohol related incidents. Only 4 (6%) were admitted to a ward with the majority (94%) being discharged from A&E. Admission was required due to ongoing medical need.

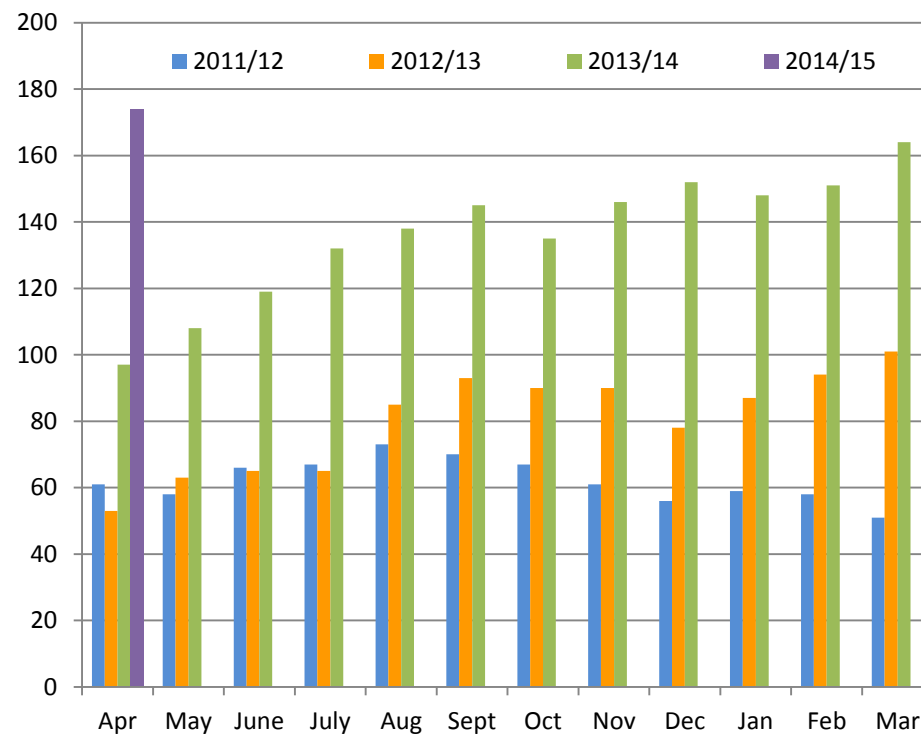
A total of 64 children attended A&E with alleged assault in 2013/14. 52% of the alleged assaults were reported to have occurred in school. The mean age of the victim was 14.3 years. 53 (83%) were male.





Total Number of CAFs opened during a calendar month

The trend of a reduced number of CAFs in comparison to 2012-13 has been maintained. Lead professionals are not reporting concerns about cases being held inappropriately at a CAF level. Cases are being appropriately stepped up to referral and assessment and stepped down from social care to early help with lead professionals taking on the co-ordination of team around the family action plans.



Number of Children subject to a Child Protection Plan at Month End

The number of children subject to a child protection plan is continuing to rise. A plan is in place to undertake an audit and analysis of these figures to gain a greater understanding of this increase. There continues to be no children subject to a plan for over 2 years

WHAT IS THE ISLE OF WIGHT SAFEGUARDING CHILDREN BOARD

It is the key statutory mechanism for agreeing how the relevant organisations on the Isle of Wight will co-operate and work together to safeguard and promote the welfare of children and for ensuring that this work is effective, this includes the early help offered.

The IOWSCB was established in compliance with The Children Act 2004 (Section 13) and the Local Safeguarding Children Board Regulations 2006

The work of the IOWSCB during 2013-14 was governed by the statutory guidance “Working Together to Safeguard Children 2013”, which sets out how organisations and individuals should work together to safeguard and promote the welfare of children, and the Local Safeguarding Children Board Regulations 2006 which sets out the functions of Local Safeguarding Children Boards.

Our Objective

To co-ordinate and ensure the effectiveness of what is done by each agency on the IOWSCB for the purposes of safeguarding and promoting the welfare of children on the Isle of Wight.

We aim to do this in two ways:

To co-ordinate local work by:

- Developing policies and procedures for safeguarding and promoting the welfare of children on the Isle of Wight
- Communicating to agencies on the Isle of Wight the need to safeguard and promote the welfare of children
- Monitoring what is done by partner agencies to safeguard and promote the welfare of children and advising them on ways to improve
- Participating in the planning of services for children on the Isle of Wight
- Undertaking Serious Case Reviews and other multi-agency case reviews and advising on lessons to be learnt

To ensure the effectiveness of that work by:

- Assessing the effectiveness of the help being provided to children and families, including early help
- Assessing whether partner agencies are fulfilling their statutory obligations
- Quality assuring practice, including joint audits of case files
- Providing, monitoring and evaluating the effectiveness of training to safeguard and promote the welfare of children
- Publishing an annual report on the effectiveness of local arrangements to safeguard and promote the welfare of children on the Isle of Wight.

ORGANISATION OF THE ISLE OF WIGHT SAFEGUARDING CHILDREN BOARD

The IOWSCB meets at least four times during the year and has a membership made up of representatives from all statutory partners and others concerned with safeguarding children.

The IOWSCB will include at least one representative from each of the agencies or organisations as out below:

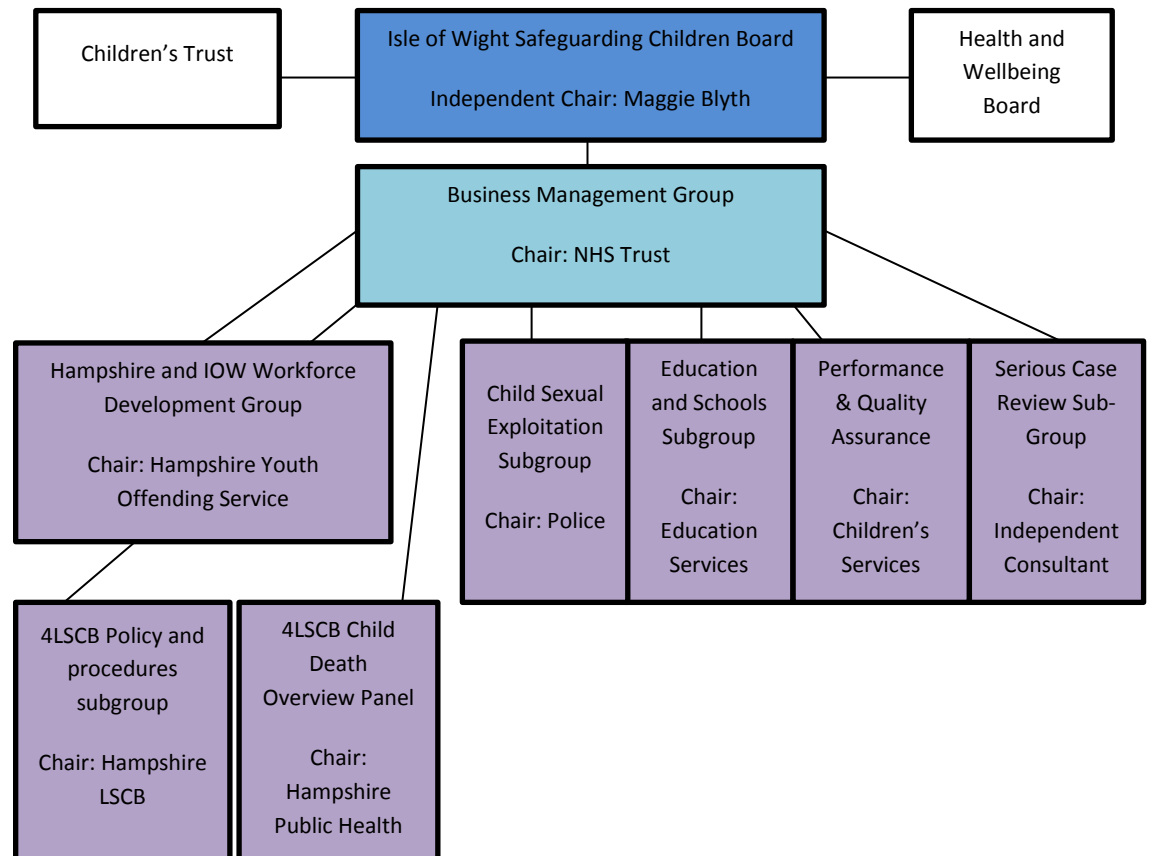
- Adult Services
- Cafcass
- Isle of Wight Children's Services
- Isle of Wight Education Services
- Isle of Wight NHS Trust
- Hampshire Constabulary
- Hampshire Probation Trust
- Isle of Wight Clinical Commissioning Group
- NHS Wessex Local Area Team
- Primary School / Secondary School
- Public Health
- Youth Offending Service
- 2 Lay Members

ATTENDANCE

Attendance from agencies at sub groups has improved in the last few months but in 2013 there was limited engagement from some key statutory agencies in health and education. This has improved significantly but there remain challenges around securing input from secondary schools. Appendix A illustrates attendance at the Main Board Meeting for the year ending March 2014

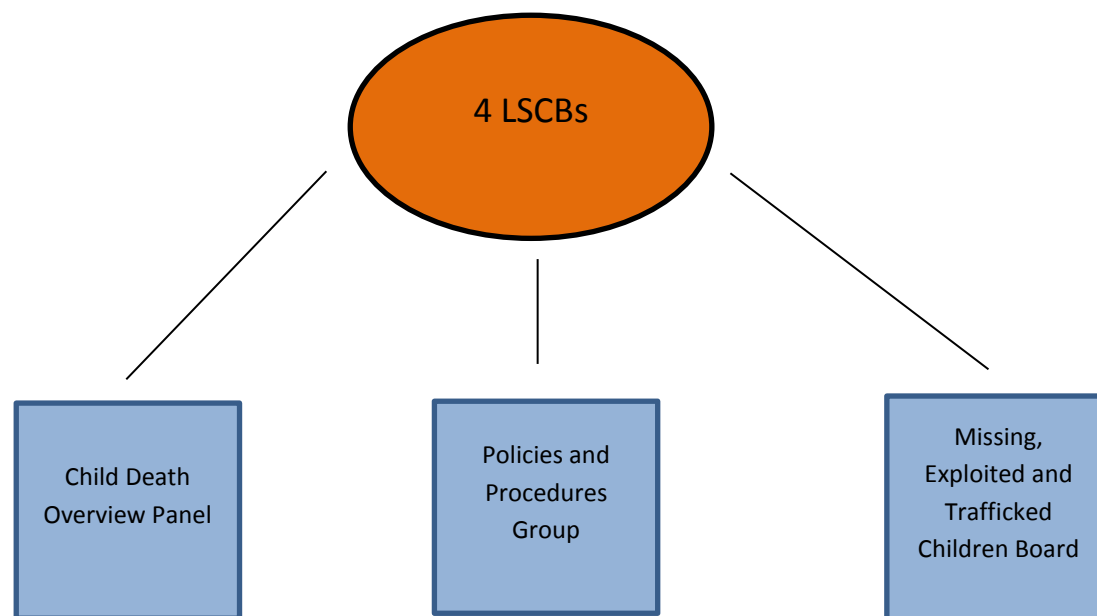
Structure of the Isle of Wight Safeguarding Children Board

The IOWSCB is supported by a range of sub-groups that deliver the priorities of the strategic plan. The structure is illustrated below.



4LSCB PARTNERSHIP WORKING

Hampshire, Isle of Wight, Portsmouth and Southampton each has its own LSCB, but come together to undertake joint work and to share procedures and policies, skills, knowledge, resources and learning. There are a number of joint subgroups as set out below:



KEY ROLES

The IOWSCB is led by an **Independent Chair**, ensuring a continued independent voice for the IOWSCB. The Independent Chair on the Island is accountable to the Managing Director of the IOW Council alongside chief officers within the NHS, Hampshire Constabulary and partners.

The **Director of Children's Services** for Hampshire and the Isle of Wight is required to sit on the main Board of the IOWSCB as this is a pivotal role in the provision of children's social care on the Isle of Wight. This post holder has a responsibility to make sure that the IOWSCB functions effectively and liaises closely with the Independent Chair.

The ultimate responsibility for the effectiveness of the IOWSCB rests with the **Leader of the Isle of Wight Council**. The **Managing Director of the Isle of Wight Council** is answerable to the Leader.

The **Lead Member for Children's Services** is the Councillor elected locally with responsibility for making sure that the Local Authority fulfils its legal responsibilities to safeguard children and young people. The Member contributes to the IOWSCB as a participating observer and is not part of the decision making process.

PARTNER AGENCIES

All partner agencies on the Isle of Wight are committed to ensuring the effective operation of the IOWSCB. This is supported by the constitution which sets out the governance and accountability arrangements.

LOCAL AUTHORITY

The Isle of Wight Council is responsible for establishing an LSCB in their area and ensuring that it is run effectively.

The Director of Children's Services is held to account for the effective working of the LSCB by the Managing Director of the Isle of Wight Council and challenged where appropriate by the Lead Member.

DESIGNATED PROFESSIONALS

Health commissioners should have a designated doctor and nurse to take a strategic, professional lead on all aspects of the health service contribution to safeguarding children across the local area. Designated professionals are a vital source of professional advice on safeguarding children matters to partner agencies and the LSCB. During 2013/14 the designated doctor position has been vacant, though interim arrangements have been in place. The absence of a permanent designated doctor remains a concern for the IOWSCB.



KEY RELATIONSHIPS

ISLE OF WIGHT CHILDREN'S TRUST

The IOWSCB has a strong relationship with the Isle of Wight Children's Trust, which is responsible for developing and promoting integrated front line delivery of services which serve to safeguard children. The Chair of the IOWSCB attends the Children's Trust and the Chair of the Children Trust sits on the IOWSCB. The Children's Trust has produced a Children and Young People's plan (CYPP) which sets out the Trust's priorities, including a focus upon early help, and how these will be achieved.

The IOWSCB presents this Annual Report to the Children's Trust outlining key safeguarding challenges and any action required from the Children's Trust.

A protocol was agreed in March 2014 confirming the IOWSCB's relationship with the Children's Trust

THE HEALTH AND WELLBEING BOARD

The 2012 Health and Social Care Act established Health and Wellbeing Boards. They are intended to be a forum where key leaders from the health and care system work together to improve the health and wellbeing of their local population and reduce health inequalities. A Health and Wellbeing Board was set up on the Isle of Wight in 2012/13.

The Health and Wellbeing Board drives local commissioning of health care, social care and public health and creates a more effective and responsive local health and care system. Other services that impact on health and wellbeing such as housing and education provision are also addressed. The Health and Wellbeing Board also provides a forum for challenge, discussion, and the involvement of local people.

In March 2014, a protocol was developed which ensured that the Health and Wellbeing Board, the IOWSCB and the Adult Safeguarding Board work together in equal partnership to ensure more effective safeguarding.

CLINICAL COMMISSIONING GROUP

During 2013/14 the arrangements on the Isle of Wight for new GP commissioning were developed. The Clinical Commissioning Group completed a Section 11 audit during 2013.

POLICE AND CRIME COMMISSIONER

The Police and Crime Commissioner's role is to hold the Chief Constable to account in relation to policing priorities. They have appointed an Assistant Police and Crime Commissioner for the Isle of Wight. The Assistant Police and Crime Commissioner is actively engaged with the IOWSCB to ensure an understanding of the need to protect the most vulnerable children on the Island.

FINANCIAL ARRANGEMENTS

IOWSCB Partners continue to contribute to the IOWSCB budget.

Total contributions from partner agencies remained at £252,105 with a contribution of £8,550 towards the cost of running the 4LSCB child death overview panel. An underspend of £86,005 was carried forward from the previous financial year making the total income available to the board £252,105. This income ensured that the overall cost of running IOWSCB was met.

2013/14 Budget Summary as at 31 st March 2014		
Final Accounts	2013/14 agreed Budget Plan	2013/14 Actuals
Income		
Total Contributions from Partners	252,105	252,105
Brought forward from previous year's surplus	0	0
Other income	0	0
Total Budget Available	252,105	252,105
Expenditure		
Training and conference budget	52,000	6,335
Communication	1,000	0
Administration	10,191	19,743
Venues and Refreshments	1,800	3,433
Serious Case Reviews	60,000	5,445
Staffing including costs & travel	97,814	100,640
Independent Chair	20,750	20,851
CDOP IOWSCB Contribution	8,550	8,553
Total Expenditure	293,450	166,100
Net Expenditure (Income)		-86,005

The priorities of the IOWSCB are driven by the required improvements set out in Ofsted's Inspection Report published on 15 January 2013 and the subsequent Improvement Plan overseen by the Department of Education. The Isle of Wight remains under a government directive to improve the child protection system. The IOWSCB must continue to improve how it co-ordinates work with children at risk. During 2013/14 the system has been steadily strengthened but the IOWSCB must continue to get right the core business of leadership, scrutiny and challenge and improve practice on the Island.

IOWSCB has focused its attention on key priorities areas: These were:

- Ensuring children get the right service at the right time and we intervene in the right way at the right time when children are suffering harm
- Ensuring we learn from what we do
- Ensuring we know vulnerable children and young people feel safe
- Ensuring we have made it easier for practitioners to work together more effectively

Our Focus for 2013/14

Priority One: Leadership and Governance

Aim: To have in place transparent and effective partnership governance structure that confirms and evidences clear leadership of safeguarding across the Island. All meetings enable an open, effective dialogue to take place so that the IOWSCB routinely monitors, challenges practice and identifies barriers to improvement.

Priority Two: Scrutiny, Performance and Assurance

Aim: The IOWSCB evaluates the effectiveness of the safeguarding system and is fully aware of the performance on safeguarding children through the consistent use of information to drive the quality of service and delivery of outcomes vigilantly, transparently and unfailingly across all agencies.

Priority Three: Improving Quality of Practice

Practice improvement is supported through a consistent IOWSCB wide learning and improvement framework, effective support and supervision arrangements, providing the right training for the right practitioners and the learning from every type of review and audit is proactively disseminated and acted upon.



SCRUTINY, PERFORMANCE AND ASSURANCE

The Performance and Quality Assurance Subgroup has received comprehensive reports from the deep dive audits undertaken in 2013. These identified practice issues around understanding and interpretation of thresholds, and capacity of lead professionals for the Common Assessment Framework.

Section 11 Audits have been undertaken by all partner agencies. Findings will be presented to the September IOWSCB meeting after analysis and challenge by the Performance and Quality Assurance Subgroup.

The multi-agency data set has been reviewed and is used to produce quarterly performance reports for each agency.

There was a good return of Section 175 audits from all schools. The Education and Schools Subgroup has approached the Island's Independent Schools and Studio School to undertake Section 175 Audits. Key findings from the audit are around improving record keeping, the teaching of e-safety and code of conduct for safe working in primary schools.

The IOWSCB agreed and implemented its Quality Assurance Framework in December 2013 based on the South East Region Model.

LEARNING AND IMPROVEMENT FRAMEWORK

The IOWSCB is committed to learning lessons from cases where there have been concerns around safeguarding practices and where there have been good examples of working together. In order to support learning, the IOWSCB has set up an annual programme of practitioner workshops to share key learning from both national and local cases. 5 workshops took place across the Island in 2013/14 with over 350 practitioners attending.



LEADERSHIP AND GOVERNANCE

All subgroups have reviewed their terms of reference and membership with their new strategic leads as Chairs and produced a workplan for 2013 following IOWSCB agreement to the revised Constitution in December 2013. The Business Management Group began monitoring the performance and functioning of the subgroups and holding them to account for delivery of their workplans. Meetings between the Independent Chair and workstream leads took place in January and February to ensure the pace of change and implementation of key actions is as required and expected.

A meeting was held in March 2014 between the strategic leads of Child Sexual Exploitation across the 4LSCBs, the national lead on CSE and Policing working with CEOP and the National College of Policing led by the IOWSCB's Independent Chair. A critical piece of work is the production of a robust multi-agency problem profile that has clear oversight from each of the LSCBs. The group took stock of progress and agreed what actions are needed over the next 6 months, including where the 4 LSCB areas need to work on collaboratively.



IMPROVING QUALITY OF PRACTICE

The Serious Case Review processes were reviewed and agreed by the IOWSCB in March 2014. These have introduced a systematic approach to refer and consider cases/incidents.

The first Learning Lessons events were held in January 2014 to share learning from a number of serious case reviews. In total over 350 practitioners benefited from attendance across all events held.

The Threshold document was reviewed and presented to the IOWSCB in March 2014. All staff attending Learning Lessons were reminded about the Escalation Policy. The use of it will be tested through the annual audit plan.

The redesign of the website was completed and re-launched along with a review and refresh of the 4LSCB online procedures.

An interim training plan was agreed in December 2013 to reintroduce Level 3 working together with training and events around Neglect. The IOWSCB has implemented its Learning and Improvement Framework and a new training policy.

The re-introduction of multi-agency training on the Island is having a positive impact on frontline practice across all agencies. Ensuring knowledge is up to date and reflects lessons from local and national case reviews as well as recent research is critically important. The planned events and courses over 2014/15 will offer on-going valuable opportunities for working and learning together in multi-agency groups.



(Learning Lessons 2014 feedback)

TRAINING

The Section 11 audit referred to earlier in this report found that all local agencies were reporting adequate induction and training around safeguarding children. IOWSCB is supporting agencies in meeting their responsibility to ensure staff receive safeguarding training by providing a multi-agency training programme. The development of the 2013/14 programme was based on serious case review themes, IOWSCB priorities and national and local learning. The multi-agency training programme was re-introduced in the early part of 2014. Positive feedback was received from the professionals who attended IOWSCB training during January to March 2014.

As outlined earlier in this report as part of its learning and improvement framework, the IOWSCB is rolling out an annual programme of practitioners workshops to share key learning from both national and local cases.

Working together 2013 requires that LSCBs monitor and evaluate the effectiveness of training, including multi-agency training, for all professionals in the area. The IOWSCB has recognised that further work is required by the IOWSCB and partner agencies to understand what difference training is making on frontline practice. The joint Workforce Development Group (Hampshire and the Isle of Wight) is piloting methods to capture impact on frontline practice in 2014..

THE CHILD'S JOURNEY

Where early child welfare concerns arise, professionals involved with a child may use the Common Assessment Framework (CAF), which is a national early assessment tool and process for use across all children's services. It aims to help early identification of need and promote co-ordinated service provision. The Isle of Wight has revised a number of its early help tools to order to improve the effectiveness of its early help assessment. In addition, the Strengthening Families Initiative has provided another route into early help.

The number of CAFs open is now proportionate to the population (434 completed during 2013/2014). There are no children open to Early Help services that should be receiving a statutory service. This has been quality assured by file auditing and the position will continue to be closely monitored. CAF data is collected monthly and reported quarterly to the IOWSCB. It is showing a healthy distribution across agencies (48% Schools; 14% health; 23% step-down from Social Care). Hants Direct is showing a positive impact on step-up and the escalation procedure. The number of eligible children in need with a CIN plan continues to increase (40% as at 31.03.14) and is on trajectory for 100% by August 2014. 164 children were on a Child Protection Plan at the end of March 2014 (compared to just over 100 in March 2013).

Multi-Agency Safeguarding Hub (MASH) Wight

Isle of Wight Children's Services, in partnership with Hampshire, have developed a Multi-Agency Safeguarding Hub (MASH). The MASH Team of Children's Services, Police and Health Professionals are based in the same location with close links to virtual members such as probation and housing. The implementation of this model, Hants Direct and Children's Reception Team ensure that safeguarding concerns about children receive a consistent and co-ordinated response which utilises up to date multi-agency knowledge. This enables better informed decision making and quicker response times ensuring that the most vulnerable children and adults are protected.

The Children's Reception Team commenced managing contacts for the Island in November 2013. The data indicates that January and March 2014 were particularly busy with over 300 telephone contacts made to Children's Reception Team.

Since January 2014, the Children's Reception Team has assumed responsibility for the management of Children and Young Person Reports. The Children's Reception Team provides initial triage for each Child and Young person report where a recommendation is made to either close the contact or progress to referral or transfer to MASH for work and information sharing.

Comparisons to November 2013 (prior to implementation) highlight a steady increase in the number of Children and Young Person Reports received in respect of new contacts to Children's Services (November 2013 – 70; March 2014 – 110), as reported to the June 2014 Improvement Board in the MASH update.

THE CHILD'S JOURNEY

As reported in the MASH update to the June 2014 Improvement Board there were 22 section 47 investigations undertaken in February and March 2014. Face to face strategy discussions with Police were held on all section 47 referrals and health information was provided for consideration within these discussions. The number of referrals progressed to assessment under section 17 was 145 in March 2014 compared with 78 in February 2014. This increase in referrals correlates with the increase in contacts across the board.

Although MASH has only been operational since January 2014; the use of health and education information in determining outcomes for section 47 referrals has been beneficial. The use of multi-agency information increases the number of families receiving the right services at the right time.

MASH is strengthening the way in which new referrals are handled (as noted by Ofsted during their recent inspection in

164 children were on a Child Protection Plan at the end of March 2014 (compared to just over 100 in March 2013). This number is predicted to carry on rising and as at the end of April 2014 was 175. An audit has been organised to understand the decision-making around this to gain a better picture of the ongoing rise in numbers. The analysis will explore the number of registrations for sexual abuse being comparatively low and the small number of plans for unborns. This will be a multi-agency evaluation and will also consider the impact the rise in Child Protection Plans is having across all agencies. The findings will be reported at the September 2014 IOWSCB meeting.

The percentage of children with an initial Child Protection Conference on time during March dipped to 50% from the previous month of 90%. The issue has been identified and resolved by Children's Services with April 2014 figures showing an upward trend in performance.



CHILD DEATH REVIEW

The Child Death Overview Panel (CDOP) is a group covering the Isle of Wight, Hampshire, Southampton and Portsmouth LSCBs. CDOP is responsible for reviewing all child deaths from birth to 18 years, including both expected and unexpected deaths. Serious Case Reviews (SCR) are carried out when a child dies but they are not required for every unexpected death. CDOP has a clear process in place for informing each LSCB of a child death and whether this is likely to be referred for a SCR. The CDOP manager reports directly to the Serious Case Review Sub-Group and provides an update on each death to them. CDOP received 141 notifications covering the 4 LSCBs in 2013/14. 7 of these were children from the Isle of Wight.

The CDOP process has two integral parts to the process:

- A rapid response by a group of key professionals who come together for the purpose of enquiring into and evaluating each unexpected death of a child
- An overview of all child deaths in the 4LSCB area, undertaken by a panel (CDOP)

The rapid response procedures have recently been reviewed and provide clear guidance on what warrants a rapid response, the action required by each agency and support required and by whom for the bereaved family.

Using thematic analysis of data and information, CDOP has been able to identify themes and modifiable factors that may have contributed to the death of a child. A key message that is consistently identified is unsafe sleeping arrangements with a child with the additional factors of alcohol and/or drug use. Although national research suggests campaigns highlighting safe sleeping do not reduce deaths, it remains high on the agenda for CDOP with the ongoing awareness to parents and carers via health agencies and children's social care.

History of mothers ante natal care has been highlighted as a need for additional information to enable the panel to identify issues, themes and gaps in service provision. The analysis form has been modified to include ante natal history and parent illness.

Teen suicide remains a concern and continues to be on the agenda for discussion. A working group has now been set up to look at what, if anything can be done to identify those young people that are not on the 'radar' of professionals.

Death caused by dangerous driving of those under the influence of drugs/alcohol has increased and national campaigns by the police have raised awareness of this.

CDOP has seen an increase in childhood death from Asthma and Epilepsy both locally and nationally. Reviews of such deaths have not identified modifiable factors that could have prevented the death but has acknowledged change is needed in procedures, especially in education settings. In September 2014, a new duty will be introduced for governing bodies to make arrangements to support pupils at school with medical conditions. In support of this, CDOP is ensuring that this information and new legislation is being prioritised and disseminated effectively to agencies.

A priority for CDOP in 2013/14 was to review historical outstanding deaths. Of the 76 outstanding deaths that occurred prior to 1st April 2013, CDOP has made significant progress and 47 of these have now been fully reviewed with the remaining 29 deaths outstanding expected to be reviewed by the end of the year.

Unfortunately, another priority for CDOP to recruit a Designated Doctor has not been successful. To date CDOP is working tirelessly with the Clinical Commissioning Groups (CCGs) and health colleagues to rectify this. In the interim, progress has been made to fulfil the statutory duty of CDOP having a consultant paediatrician on the panel and having access to discuss issues regarding the death of a child.

The priorities identified for this year for CDOP are to ensure that all deaths are reviewed in a timely manner; information sharing and lessons learned from any death to be cascaded to appropriate agencies, again in a timely manner. This will be facilitated via the CDOP newsletter and the newly updated website. Absent fathers are to be considered more effectively and the use of interpreters where English is not the first language within the family is to be considered at the earliest opportunity.

CHAPTER 4 WHAT HAPPENS WHEN A CHILD DIES OR IS SERIOUSLY INJURED ON THE ISLE OF WIGHT?

SERIOUS CASE REVIEWS

A serious case is one where:

- (a) Abuse or neglect of a child is known or suspected; and
- (b) Either – (i) the child has died; or (ii) the 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

LSCBs are required to consider undertaking a review of these serious cases. These reviews are called Serious Case Reviews (SCRs). The purpose of an SCR is to establish whether there are lessons to be learnt from the case about the way in which local professionals and organisations work together to safeguard and promote the welfare of children. The IOWSCB has also been committed to undertaking smaller scale multi-agency case reviews for instances where the case does not meet the criteria for a serious case review but it is considered that there are lessons for multi-agency working to be learnt. During 2013/14, 4 cases were brought to the attention of IOWSCB. Of these, 4 serious case reviews were commissioned. In addition, the IOWSCB completed 2 serious case reviews and one partnership review that commenced in 2012/13, The findings from each serious case review and the full report for the 2nd serious case review were published in November 2013.

WHAT HAS CHANGED?

IOWSCB implemented a number of improvements to policies, procedures and processes, including:

- Hearing the voice of the child
- New Threshold document
- Improved use of escalation procedures
- Implementation of an Early Help Strategy
- Review of child protection conference model
- Changes to a number of 4LSCB protocols

JADE - Jade aged 14 disclosed to the police that from the age of 3-4 to 11 she was sexually abused by her father. She was also systematically physically and emotionally abused until she was 13 when she started to retaliate and hit back in self-defence.

JADE'S STORY – *My dad was not born on the Isle of Wight. I was. When he met my mum and I was born there were meetings about my dad and what happened when he was with his first family. People visited my house. Mum got poorly and was in hospital often, she and dad argued a lot then people stopped visiting. Mum died before I was 4 then it was just me and dad. He used to shout a lot and hit me. We moved house because he couldn't pay the rent. When I was 6 I told someone dad used to hurt me. A policeman and social worker came to my house. I was scared. People came more after that, but they were always different and didn't know who had been before; dad always knew what to say. It would get better for a bit but then bad again. Nothing changed. Dad hit me really hard when I was 8, I couldn't sit at school. When the police and social worker came dad said he'd try harder. No one came after that and dad wouldn't let me see anyone on my own. One night, I rang the police and asked to be taken into care but then I pretended it was alright so nothing changed. I was then hit really badly, people could see the bruises and I was taken into care. Dad was told off but then I was sent home. I didn't want to go. I kept running away and being aggressive. Then I started getting in trouble. It wasn't fair that I got in trouble but dad didn't.*

OUTCOME – Jade's father was found guilty of 8 sexual offences against her and similar offences against her half-sister. He was sentenced to 18 years imprisonment.



CHALLENGES AHEAD AND FUTURE PRIORITIES

National Drivers

- Tackling child sexual exploitation
- Improving the effectiveness of 'early help' services
- The introduction of joint inspect inspection regimes and the review of LSCBs
- Ensuring that the potential risks to safeguarding practice and arrangements are kept under review in response to increasing demand for services and on-going reshaping of public services.

For the IOWSCB

- Embedding robust and rigorous quality assurance activity
- Maintaining the LSCB learning and improvement framework

For local multi-agency work

- Ensuring there is sufficient provision of early help and continuing to improve the effectiveness of early help services
- Progressing actions to tackle child sexual exploitation
- Safeguarding those Isle of Wight children who are living off the Island within residential, educational and secure settings.
- Ensuring the right children are on Child Protection Plans

KEY MESSAGES:

For Local Politicians

- You can be the eyes and ears of vulnerable children and families in your ward making sure their voices are heard by the IOWSCB. For 2012/13 Councillor Richard Priest was lead member for children and families, making sure their voices were heard by the IOWSCB. The lead member provides the route for individual councillors to make sure the voices of children and young people are heard by the IOWSCB and for councillors to be aware of local safeguarding children priorities.
- When you scrutinise any plans for the Isle of Wight, keep the protection of children at the front of your mind. Ask questions about how any plans will affect children and young people.

For the Isle of Wight Clinical Commissioning Group

- CCGs in the health service have a key role in scrutinising the governance and planning across a range of organisations
- You are required to discharge your safeguarding duties effectively and ensure that services are commissioned for the most vulnerable children.

For the Police and Crime Commissioner

- Ensure that the voices of all child victims are taken notice of within the criminal justice system, particularly in relation to listening to evidence where children disclose abuse.
- Monitor what police and probation staff does to share information regarding high risk Multi-Agency Public Protection Arrangements (MAPPA) and Multi-Agency Risk Assessment Conference (MARAC) cases and the risks that some adults present to children.

For the Local Media

- Communicating the message that safeguarding is everyone's responsibility is crucial to the IOWSCB and you are ideally positioned to help do this. The work of the IOWSCB will be of great interest to your readers and listeners.

For Chief Executives and Directors

- Ensure your workforce is able to contribute to the provision of the multi-agency safeguarding training and to attend training courses and learning events.
- Your agency's contribution to the work of the IOWSCB must be given the highest priority. Every agency must ensure that it takes into account the priorities within the IOWSCB Strategic Plan and their own contribution to the shared delivery of the IOWSCB work. This includes meeting the duties of Section 11 of the Children's Act 2004 and ensuring that agencies are able to contribute to the IOWSCB's work programme with appropriate resources and personnel
- The IOWSCB needs to understand the impact of any organisational restructures on your capacity to safeguard children and young people on the Isle of Wight .

For the Children's Workforce

- Ensure you are booked onto, and attend, all safeguarding courses and learning events required for your role.
- Be familiar with, and use the IOWSCB Threshold Document and Safeguarding procedures to ensure an appropriate response to safeguarding children and young people.
- Use your representative on the IOWSCB to make sure the voices of children and young people and front line practitioners are heard.

For the Community

- You are in the best place to look out for children and young people and to raise the alarm if something is going wrong for them.
- We all share responsibility for protecting children. If you are worried about a child, call Hants Direct on 0845 650 0097.

For Children and Young people

- Children and young people are at the heart of the child protection system. Your voices are the most important of all. The IOWSCB is developing better ways of hearing children and young people's views.

APPENDIX A

BOARD MEMBERSHIP AND ATTENDANCE 2013/14

Board Membership 2013-14

Name	Agency	Attendance (%) - to be added
Maggie Blyth (from October 2013)	Independent Chair, IOWSCB	
Sarah Beattie	Hampshire Probation Trust	
Alison Smailes	Hampshire Youth Offending Service	
Lorraine Smith	Isle of Wight NHS Clinical Commissioning Group	
Steve Crocker	Children's Services, Hampshire and IOW Council	
John Coughlan	Children's Services, Hampshire and IOW Council	
Carol Douch	Chair of Serious Case Review Subgroup (Independent Consultant)	
Rida Elkhier	Public Health, IOW Council	
Fleur Gardiner	Domestic Violence Forum	
Maggie Hampson	Isle of Wight NHS Trust	
Steve Handforth	Children's Services, IOW Council	
Gillian Heath	CAFCASS	
Mark Howell	Community Wellbeing and Social Care, IOW Council	
Dawn White	Isle of Wight Clinical Commissioning Group	
Nigel LeCointe	Hampshire Constabulary	
Maxine Leppard	Primary Heads Forum	
Christopher Magier	Isle of Wight Clinical Commissioning Group	
Janet Paine	Legal Services, Isle of Wight Council	
Nicky Priest	NHS England	
Councillor Richard Priest	IOW Council Lead Member	
William Reid	Chair of Child Sexual Exploitation Subgroup (Hampshire Constabulary)	
Alan Sheward	IOW NHS Trust	