

Tower Hamlets  
Safeguarding  
Children  
Board



Keeping children safe in  
Tower Hamlets



Tower Hamlets LSCB  
Annual Report 2017-18



Safeguarding is everyone's responsibility



INVESTORS  
IN PEOPLE | Silver



METROPOLITAN  
POLICE

TOTAL POLICING



Tower Hamlets  
Clinical Commissioning Group

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## Chair's Foreword



Thank you for taking the time to read this year's annual report from the Tower Hamlets Local Safeguarding Children Board (THLSCB).

Last year Tower Hamlets' Children's Services were graded as 'inadequate' by Ofsted; the government inspectorate. As a result, all of the agencies engaged in safeguarding children in Tower Hamlets have been working on an improvement plan.

Since the initial inspection there have been three further Ofsted monitoring visits; the latest report is on the LSCB website (May 2018). Ofsted have reported a steady but significant improvement in children's services over this period. Whilst there is still considerable work to be undertaken, the quality of safeguarding is now reaching an acceptable standard and the aim will be to be graded by Ofsted as 'good' by this time next year.

Of course, protecting our children and young people is not just the job of children's services. All of the partners who form the board have been working together to improve services.

A good example of this work involves the formation of a multi-agency Exploitation Team. This team is co-located and deals with all aspects of exploitation that our young people may be exposed to. It focusses on protecting our most vulnerable young people. In particular: those that go missing regularly; are at risk of becoming part of a gang; being subject to radicalisation; or being sexually exploited. This team has already been able to demonstrate considerable success in supporting those young people and dealing with offenders.

The continued rise in serious youth violence will be a priority for all partners over the next year. There has been significant work across a range of agencies but this has not been sufficient to see a reduction in the levels of violence. This is a problem for all of us from parents through to teachers, youth workers, health professionals and the police. The voluntary sector has been particularly important in providing support. The board will continue to work with all of those that can help in this area and push agencies to invest in resources that are proven to be effective.

This will be the last annual report produced by the LSCB. The Children and Social Work Act 2017 is changing the way in which partners

work together. By June next year the board will have gone and will be replaced by the 'Safeguarding Partners' who will be the Local Authority, Clinical Commissioning Group and the Police. They are required to publish 'Safeguarding Arrangements' which will lay out the way in which they will work together to safeguard our children. They will also be required to produce an annual report and there will be independent oversight of their work.

Lastly, I would like to thank all of those that are engaged in safeguarding our children. Professionals that I meet are passionate and committed to their work and this gives me considerable hope for the future. Without those that work in the voluntary sector those professionals would be unable to effectively protect our children so I would like to specifically thank them for all their work.

I am glad to be able to report this year that children's safeguarding services have improved this year and I am confident they will continue to do so.

**Stephen Ashley**

Independent Chair

Tower Hamlets Safeguarding Children Board

# KEEPING CHILDREN SAFE IN TOWER HAMLETS 2017-18

The Local Safeguarding Children Board is here to help keep children and young people free from abuse or neglect.



## POPULATION

**300,943**

Fastest growing local authority in the UK – first time it has exceeded **300,000** since World War II

**32%** Bangladeshi and **31%** White British make up our top two groups

**12.4%** of White Other (Eastern/Western Europeans) is the third largest and fastest growing ethnic minority group



**20%** of our population are under 16

**26.6%** of households have dependent children

**43%** children continue to live in poverty, the highest in London

## CHILDREN PROTECTED

**1,283** child protection investigations were carried out

**292** children were subject to a child protection plan at the end of March 2018 under the following categories:

**Sexual Abuse - 18**

**Emotional Abuse - 114**

**Neglect - 83**

**Physical Abuse - 70**

**Multiple Abuse - 7**



Children living with domestic abuse continue to be the most common reason why children become subject to child protection plans under the category of emotional abuse.

**5** children remained subject to child protection plans lasting 2 years due to neglect at home

## EDUCATION

**9 in 10** pupils attending school are from an ethnic minority group

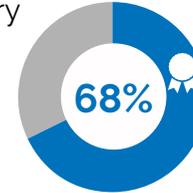


**35%** were eligible for free school meals making it the highest in the country

**68%** achieved a good level of development at age 5

**68%** achieve expected KS2 standard in reading, writing and maths at the end of primary school - above the national average of 62%

**47.2** is average attainment 8 score in 2017 – above national average of 46.4



## CHILDREN LOOKED AFTER

**290** children were looked after by the local authority

**39** were under 5

**42** were aged 5 to 9

**110** were aged 10 to 15

**99** were aged 16 to 17

**7** children live in private fostering



LAC average attainment 8 score was **22.1** above national average score of **19.3**

## VULNERABLE CHILDREN

Most children grow up safe, happy and well. However, a small number of children and young people face some serious challenges in their lives.



**37** young people were referred to multi-agency sexual exploitation panel

**420** incidents of children missing from care

**140** incidents of children missing from home

**21** potential victims of trafficking were identified

**21** child deaths reported this year of which the majority were expected (life limiting illness) and under the age of 1

# KEEPING CHILDREN SAFE IN TOWER HAMLETS 2017-18

The Local Safeguarding Children Board is here to help keep children and young people free from abuse or neglect.



## ACTIVITY OVER THE LAST YEAR

### EARLY HELP SUPPORT WITH PARENTS/CARERS

**187** parent/carers attended the Annual Parent Conference on 'keeping our children safe and well'



**557** parent/carers accessed advice/information to support their child's school transition

**128,342** unique visits to the Local Offer website

**27** Parent Ambassadors were trained and actively delivering healthy eating sessions in schools

**8,598** contacts made with the Family Information Service

**265** plus members on the Parent and Carer Council regularly contribute to help shape council services for families

## PRIORITIES FOR 2018-2019

It is critical that the future priorities for the LSCB focus on those areas that will directly impact on frontline practice and the support given to families and children.

### RATIONALE FOR CONTINUING PRIORITIES:

Targeted ambition for children and young people aims to address the areas for improvement which were identified during the Ofsted Inspection. We know we have gaps in our knowledge and strategic oversight for children receiving the right type of help at the right time.

### CONTINUING PRIORITIES:

#### Priority 1

Learning through an enhanced Performance and Quality Assurance Framework that identifies our safeguarding areas for improvement

#### Priority 2

Sustain Situational Awareness during LSCB transition to a new Multi-agency Safeguarding Partnership Arrangement

### NEW PRIORITIES:

#### Priority 3

An improved Early Help Service is available to children and young people and results in positive outcomes

#### Priority 4

Vulnerable Children who go missing or at risk of child sexual, criminal, ideological exploitation and serious youth violence are protected by effective multi-agency arrangements

## Section One

### Introduction

Legislation<sup>1</sup> requires LSCBs to ensure that local children are safe, and that agencies work together to promote children's welfare. The LSCB has a duty<sup>2</sup> to prepare an annual report on its findings of safeguarding arrangements in its area:

*“The chair of the LSBC must publish an annual report on the effectiveness of child safeguarding and promoting the welfare of children in the local area. The annual report should be published in relation to the preceding financial year*

*The report should be submitted to the Chief Executive, Leader of the Council, the local Police and Crime Commissioner, and the chair of the Health and Wellbeing Board who should note its findings and inform the Independent LSCB Chair of actions they intend to take in relation to the findings and priorities”*

The annual report is published on the LSCB Website.

The content of this report is structured as follows:

<b>Executive Summary</b>	Consolidates our borough profile and performance information to provide a snapshot summary of this report.
<b>Section 1</b>	Describes the legislative and local governance framework of Tower Hamlets LSCB.
<b>Section 2</b>	Provides local statistical and safeguarding information providing context for our work in the borough.
<b>Section 3</b>	Sets out the improvements and progress made by the LSCB and Children's Social Care in response to the Ofsted Inspection and Review.
<b>Section 4</b>	Signposts our direction of travel for the coming year. Priorities for 2018-19 continue to be linked to the improvement journey of Tower Hamlets Children's Social Care and the LSCB as it evolves.

<sup>1</sup> Children Act 2004 | <sup>2</sup> Working Together to Safeguard Children 2015

## Governance

### Legal Context

In April 2006, Tower Hamlets LSCB was established in response to statutory requirements under the Children Act 2004. It set out the core objectives as:

- 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.
- To ensure the effectiveness of what is done by each person or body for that purpose.

In April 2017, the Children and Social Work Act received Royal Assent, which abolished LSCBs and all sections of the Children Act 2004 that relate to it. This meant that relevant statutory guidance, policies and procedures have had to be revised to reflect the changes.

Following a period of consultation in October 2017, the DfE published the revised Working Together to Safeguard Children Guidance 2018, which sets out what organisations and agencies which have functions relating to children must and should do to safeguard and promote the welfare of all children and young people under the age of 18 in England.

In addition, further statutory guidance was made available to support the transitional arrangements for LSCBs, setting out the changes needed to support the new system of multi-agency safeguarding arrangements established by the Children and Social Work Act 2017.

LSCBs will be replaced by 'Safeguarding Partners' who are made up of the Local Authority, Clinical Commissioning Group (Health) and the Police.

By 29 June 2019, the Safeguarding Partners must agree and publish their local multi-agency safeguarding partnership arrangement that make clear how they will:

- Work together to co-ordinate their safeguarding services; act as a strategic leadership group in supporting and engaging others; and implement local and national learning including from serious child safeguarding incidents
- Work with any relevant agencies they consider appropriate should work with them to safeguard and promote the welfare of children in their area.
- Share joint responsibility for supporting the local safeguarding arrangements.

Following publication of their arrangements, safeguarding partners have up to three months to implement the arrangements. The implementation date should be made clear in the published arrangements. The DfE has made it explicit that all new local arrangements must be implemented by 29 September 2019 at which point the LSCB for the local area will cease to exist.

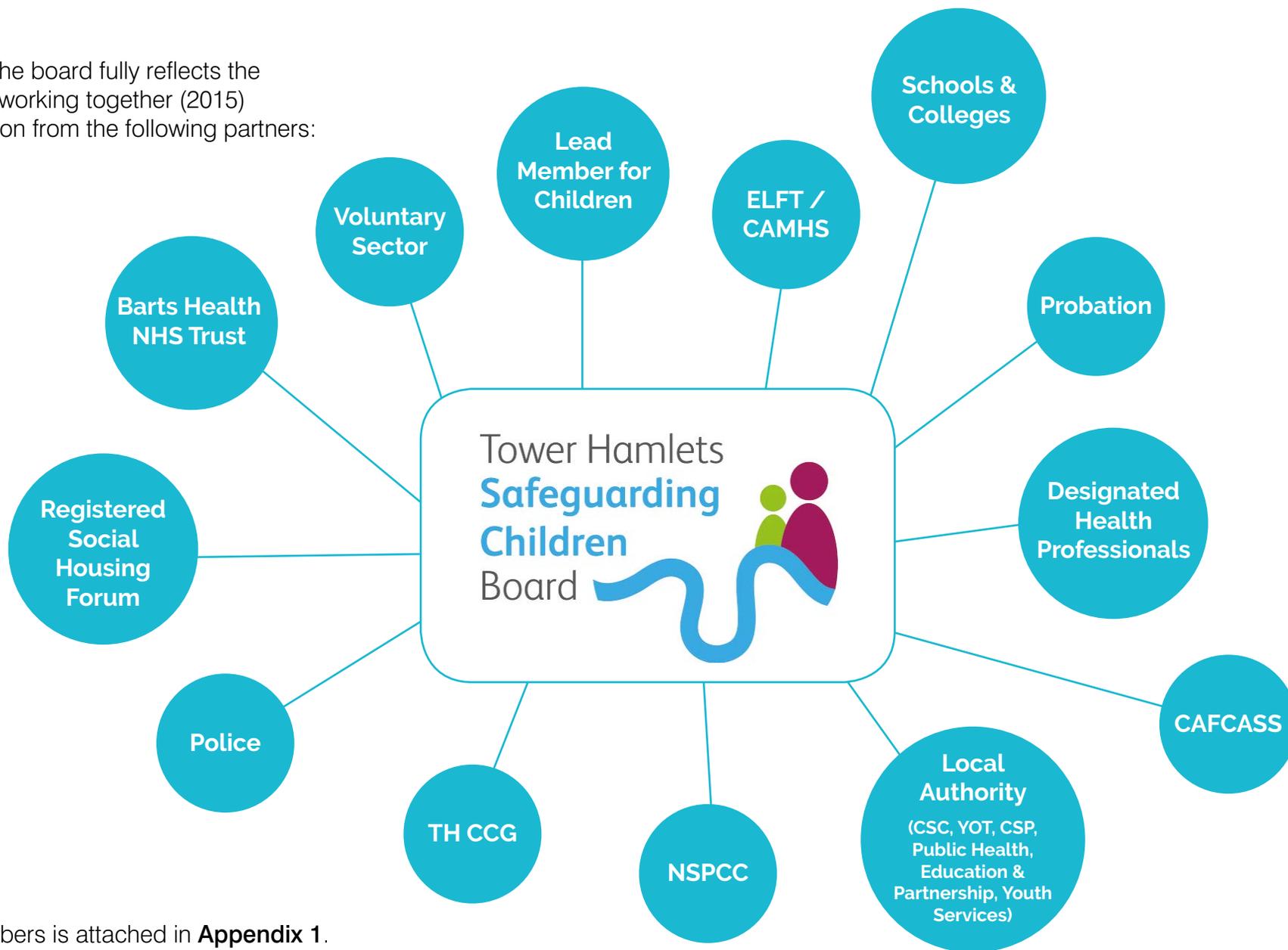
### Chairing and Support

The LSCB is chaired independently by Stephen Ashley who was appointed in November 2016 and reports directly to the Chief Executive of the Local Authority.

The LSCB Business Unit consists of full-time manager, board coordinator, performance analyst (temporary arrangement) and child death single point of contact officers. Barts Health NHS Trust funds the latter. Additional support is also provided by the strategy, policy and performance function in the council.

**Membership**

Membership of the board fully reflects the requirements of working together (2015) with representation from the following partners:



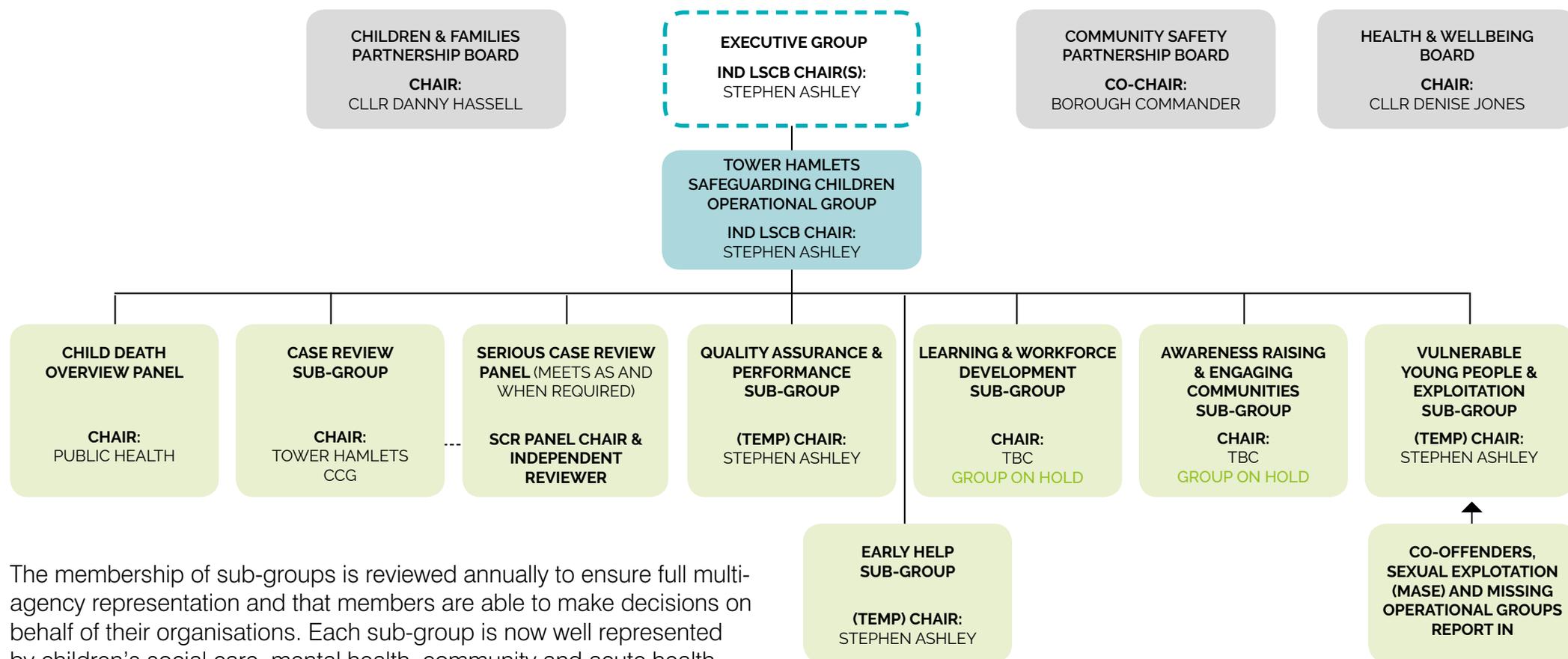
A full list of members is attached in **Appendix 1**.

### Structure

The Operational Group meets every two months. Attendance at the LSCB meetings has been less consistent compared to last year with a number of agency representatives being replaced. The LSCB no longer has lay members.

The Executive Board also meets bi-monthly.

The LSCB has seven subgroups delivering the key functions of the LSCB, two new subgroups were introduced part way through the year whilst a further two had ceased to operate. The new safeguarding partnership arrangement will redefine the future structure and subgroup areas.

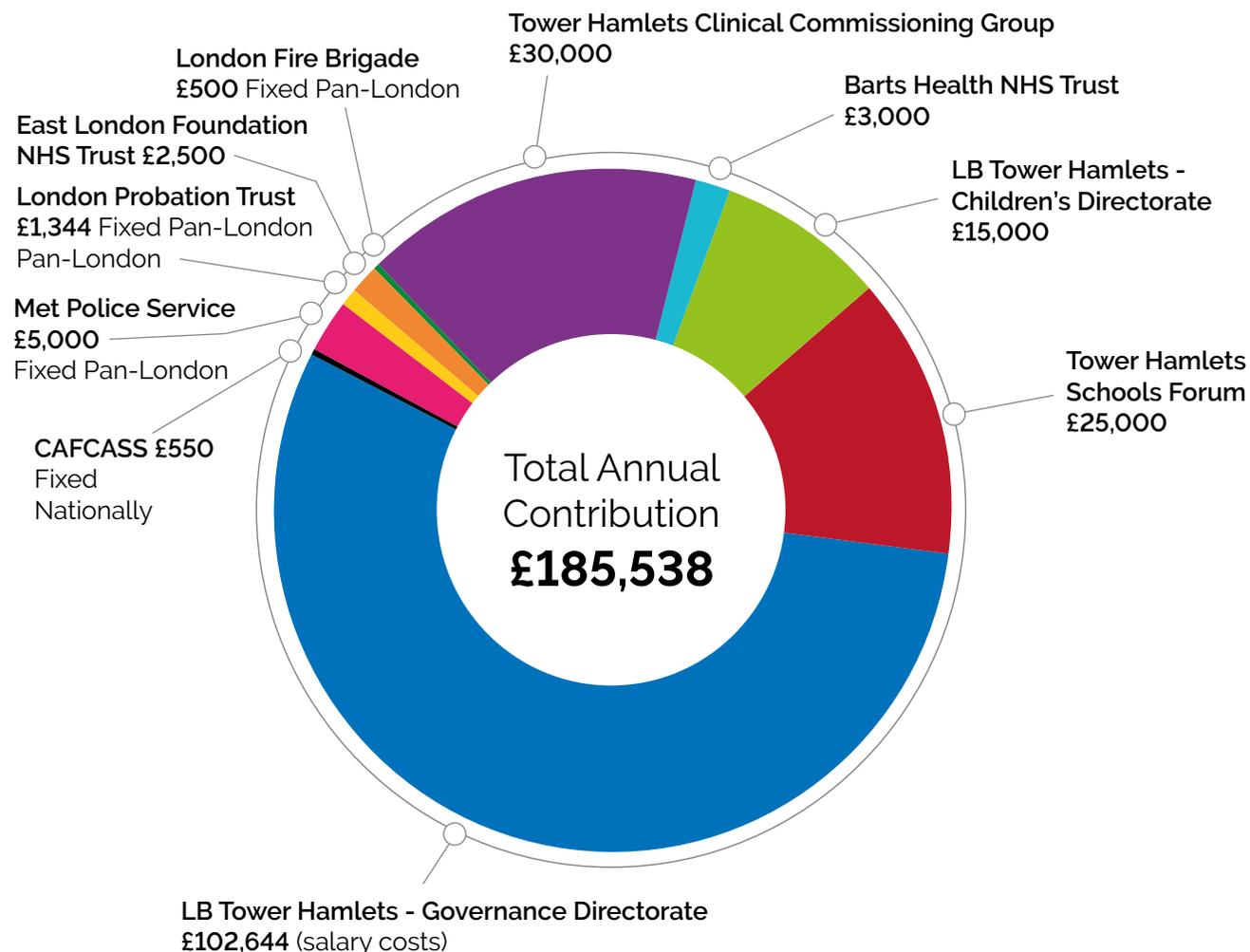


The membership of sub-groups is reviewed annually to ensure full multi-agency representation and that members are able to make decisions on behalf of their organisations. Each sub-group is now well represented by children’s social care, mental health, community and acute health services, police, education and the voluntary sector.

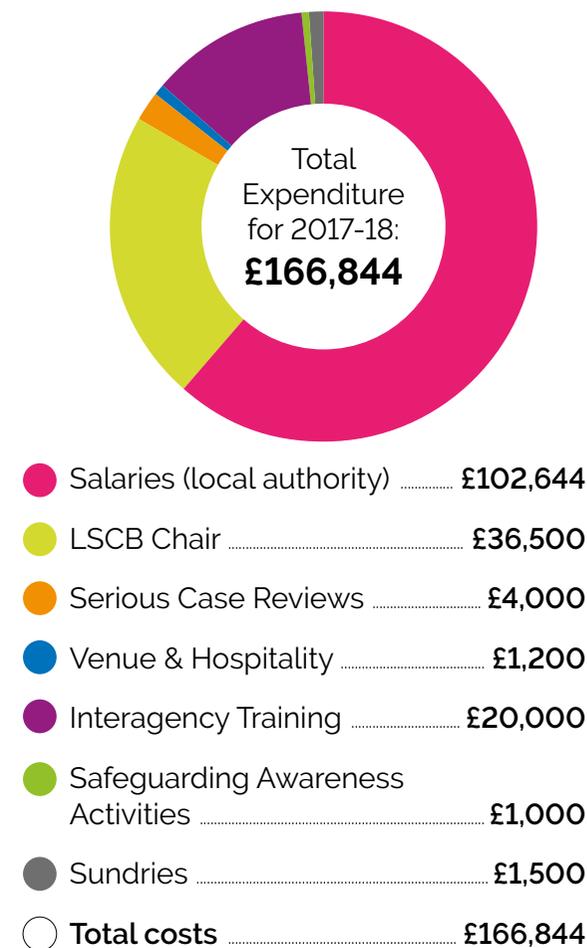
### Budget

The LSCB budget consists of contributions from a number of key statutory partners and is managed by the London Borough of Tower Hamlets (LBTH).

The following table shows contributions to the LSCB for 2017-18:



### Total Expenditure for 2017-18:



The largest financial contributor continues to be the Local Authority funding just over two-thirds of the overall LSCB budget.

Unforeseen overspend is largely dependent on the number of serious case and other independent reviews conducted in the year.

Safeguarding is everyone's responsibility

Section Two

Local background and safeguarding context in Tower Hamlets

Population

Based on revised mid-year population estimates published by the Office of National Statistics (ONS) in March 2018, Tower Hamlets borough's population:



Reached **300,943** in June 2016

This is the first time the area's population has exceeded **300,000** since World War II



Doubled in the past **30 years**, making it the **fastest growing Local Authority in the UK.**

Local population growth rate (**40%**) has doubled that of London (**16%**) and four times that of England (**8%**)

Between June 2015-2016, the borough gained **9,600** additional residents



Drivers for this are twofold: natural and migration changes. More birth than deaths and international immigration has increased our growth.



Gender of our residents comprises of **52.2% male** and **47.8% female**

Making it the fourth highest proportion of male residents in the UK, more than London as a whole (**49.8%**) and England (**49.4%**). There are 13,300 more males than females.



Has a relatively young population, placed fourth youngest in the UK with a median age range of **30.6**



**Our proportion of under-16s at 20%** is similar to that of London and England (**20%** and **19%** respectively)

Conversely, Tower Hamlets has proportionally one of the **fewest older residents** compared with other areas



**9%** are over **60** compared to London (**16%**) and England (**23%**)

## Diversity

The most recent Census in 2011 shows that Tower Hamlets has one of the most diverse populations in the country, home to many communities. Our ethno-demographic profile remains relatively unchanged since we last reported in 2016-17; the next census is due in 2021.

**Bangladeshi's remain the largest ethnic minority group at 32%**, the largest in the country, followed by **White British at 31%**; this group has decreased from 42.9% since the 2001 census.



The third largest ethnic group is other white (**12.4%**) consisting largely of eastern and western Europeans, Australians and Americans. This is the fastest growing ethnic group and has almost doubled between the 2001 and 2011 Census.

At least **90 different languages** being used in the borough



**66%** of our residents use English as their main language and **18%** use Bengali, making it the fourth most linguistically diverse area in England and Wales.

Households have grown by **28.9%** since 2001 with an extra **22,727**, the highest growth seen within London.



A breakdown of households comprises of single person (**34.6%**), married or civil partner couples (**23.7%**), cohabiting couples (**9.5%**), lone parents (**10.6%**), other households with more than one family residing together (**19.6%**) and households with full time students (**1.9%**).

There are **26,916 (26.6%)** households with dependent children.



This is lower than London (**30.9%**) and England (**29.1%**). Of this, half live with two parents (**49.1%**) and a quarter (**27.2%**) live within a lone parent household.

The 2011 Census found **9%** of our residents aged 16 plus, a total of **18,311** adults, had low levels of English proficiency in England.



It is substantially higher than the average across London (**4%**) and England (**2%**). Only Newham was placed higher than Tower Hamlets.

## Diversity - School Population

While two thirds of the borough's population are from an ethnic minority group (i.e. non-White British), nine in 10 pupils attending school in Tower Hamlets are from an ethnic minority group. The majority of pupils are from a Bangladeshi Background (63%).

In the Spring School Census 2018<sup>3</sup>, the Department for Education (DfE) now collects information on a pupil's country of birth. However, it should be cautioned that data was missing for a significant proportion of pupils. In 25% of all records the country of birth is missing. This can be in part due to voluntary information provided by parents in fear of how the information could be misused for other purposes i.e. enforcing immigration regulations.

<sup>3</sup> Source: Tower Hamlets School Census, spring 2018. Notes: Figures include pupils of all age groups: nursery, primary, secondary and post-16. Figures exclude dual registered pupils. Percentages are based on valid data only (excluding records with missing data).

### Tower Hamlets Pupil Population by country of birth – Spring 2018

	No of pupils	% of pupils
<b>Born in the UK</b>	<b>30,721</b>	<b>90.9</b>
<b>Not Born in the UK</b>	<b>3,074</b>	<b>9.1</b>
Africa	208	0.6
The Americas & the Caribbean	98	0.3
<b>Asia</b>	1,107	3.3
Bangladesh	900	2.7
Other Asian Countries	207	0.6
<b>Europe</b>	1,597	4.7
Italy	980	2.9
Spain	123	0.4
Other EU countries	418	1.2
Other non-EU countries	76	0.2
Middle East	49	0.1
Oceania/Australasia	15	0.0
<b>Missing Data</b>	<b>11,040</b>	<b>-</b>
Total	44,836	100

### People and Place

Healthy life expectancy is considerably lower than the London and national averages at 61.3 years for men and 55.6 years for women, a difference of 2.2 years for men and 8.8 years for women between the London average and Tower Hamlets. The life expectancy gap between Tower Hamlets and London as a whole is 1.7 years for men and 1.8 years for women. The population is young, ethnically diverse, and mobile. There is widespread deprivation, and many residents will be adversely affected by changes to the welfare system.



Air quality is poor across the borough, particularly around the main thoroughfares. There is a lack of open and green space. There is insufficient housing for the needs of the population.

### Pregnancy and Being Born in Tower Hamlets

More babies are born with low birth weight than the national average. One in 10 pregnancies is complicated by diabetes. There are relatively few teenage pregnancies. Infant mortality is significantly higher than the London average.



### Growing up in Tower Hamlets – Early Years

A greater number of children are growing up in low income families in Tower Hamlets than elsewhere in London, and Tower Hamlets has the second highest proportion of children living in poverty than anywhere else in London. Around a fifth of reception age children are overweight or obese. The percentage of children achieving a good level of development at the end of reception (age 4-5) is lower than the average for London or England. There are high levels of dental decay at 4-5 years old. The rate of hospital admissions of 0-4 year olds for unintentional and deliberate injuries in children is significantly lower (77/10,000) than London rates (94.8/10,000).

### Growing up in Tower Hamlets – Children and Young People

30.6% of young people under 20 are growing up in low income families in Tower Hamlets compared to 19.2% in London and 16.6% in England. Around two fifths of children are overweight or obese at the end of primary school.



The proportion of young people not in education, employment, or training locally is higher than in London but lower than in England. Tower Hamlets has amongst the highest rates of first time entry to the youth justice system in the country (653.2/100,000).

### Being an adult in Tower Hamlets

There are generally high mortality rates from cardiovascular disease, respiratory disease, and cancers and obesity, smoking, alcohol and drug use, and infectious diseases are all significant problems in the borough.



### Older People in Tower Hamlets

More older people have a long-term limiting illness than the national average. Half of all older people live in poverty, and more live alone than in the UK as a whole.

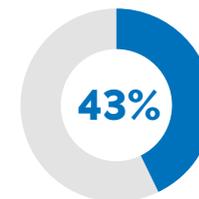
The relationship between the LSCB and health partners, both commissioning and providers, is critical if we are to have an impact on improving the lives of vulnerable children and young people.



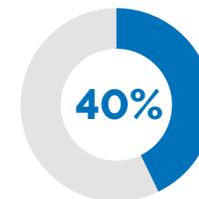
### Child Poverty

From the latest available population estimates, there were an estimated 73,675 children and young people aged 0 to 19 living in Tower Hamlets, representing approximately 25% of the total population. The young population in the borough is projected to rise in line with the general population growth.

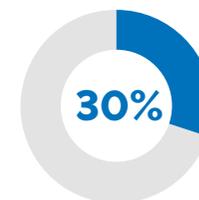
- The latest available child poverty data dated 2017<sup>4</sup> shows that 43% of children and young people in the borough live in poverty. This is the highest child poverty rate in London, despite recent falls in line with the rest of the capital. In the same year, 40% of pupils were eligible for free school meals in state-funded secondary schools, which is the highest level in the country. This level of disadvantage is likely to have lifelong negative effects on the health and wellbeing of children.
- Almost a third 30.6% of all children aged 0-19 live in households reliant on Child Tax Credit with income less than the median income; or are in receipt of out-of-work benefits.
- The rate of homelessness acceptances currently 3.6 per 1,000 households has been falling where the London average has been around the 5.0 per 1,000 households mark for the last four years. Similarly, the rate of people in temporary accommodation has been falling and is currently 17.0 per 1,000 households. This is higher than the London average at 15.1 per 1,000 households, and has been rising over the last four years.



43% of children and young people in the borough live in poverty



40% of pupils were eligible for free school meals in state-funded secondary schools



30.6% of all children aged 0-19 live in households reliant on Child Tax Credit with income less than the median income.



<sup>4</sup> 2017 London's Poverty Profile, <https://www.trustforlondon.org.uk/data/boroughs/tower-hamlets-poverty-and-inequality-indicators/>

## Education and Employment

In 2017, 68% of children achieved a good level of development at the age of five compared to a national average of 71%. Despite steady improvement over the last four years, this indicates that the issues highlighted above, in relation to child poverty, are continuing to impact on children in the early years.

Despite this disadvantage, at school, children do well. In 2017, 68% of children achieved the expected Key Stage 2 level in reading, writing & maths by the end of primary school. This figure was above the national average of 62%. In 2017 GCSE results revealed that the average Attainment 8 Score was 47.2 in Tower Hamlets which was above the average figure of 46.4 for state funded schools in England.

At the age of 16, the proportion of young people who are not in education, employment or training is relatively high, although this figure drops to below the London average for those aged 18.

Level 3 (A-Level or equivalent) results are below the London and national average, although the gap continues to reduce each year.

## Children in need of help and protection

To fulfil its statutory function under Regulation 5<sup>5</sup> an LSCB should use data and, as a minimum, assess the effectiveness of the help provided to children and families, including early help. Based on our local safeguarding data for 2017-18.

There were **5,176 total referrals to children's social care in 2017-18** of which **763** were repeat referrals. This has increased compared to the previous year **2,626** referrals of which **328** were repeats

**1,290 contacts were progressed to early help teams/hub** representing 9.7% which is an increase on only 2.5% in 2016-17.

**1,283 child protection investigations** (s47) were undertaken.

**169 allegations (88%) against adults working with children were resolved within the 30 day DfE target** in the period 1st September 2016 to 31st August 2017. Of these, **18** were subject to child protection plans for two years or more. The main reason was neglect.



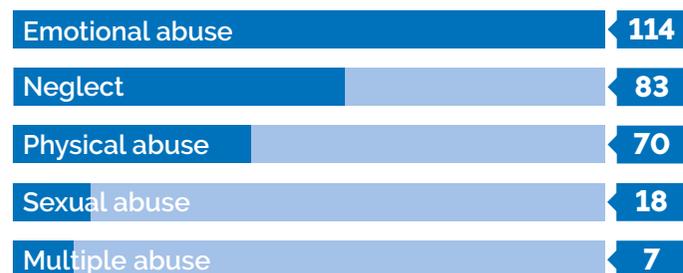
As of March 2018, **292 children were subject to a child protection plan.**

Of these, **30 were subject to child protection plans for two years or more.** The main reason was for neglect.

**27 Children were on a child protection plan** for a second or subsequent time, within 2 years of the previous plan.

<sup>5</sup> LSCB Regulation 2006

### Category of Abuse



Emotional abuse continues to be the most common reason for children becoming subject to a child protection plan. These are mainly children who have experienced living with domestic abuse at home.

### 290 children were looked after by the Local Authority at the end of March 2018

Children Looked After by age		
Age at 31 March	Boys	Girls
Under 1:	8	7
1 - 4:	9	15
5 - 9:	21	21
10 - 15:	57	53
16 - 17:	58	41
<b>TOTAL</b>	<b>153</b>	<b>137</b>
<b>Total of Children Looked After at the end of March 2018:</b>	<b>290</b>	

**113 children** were subject to a court application (including care and supervision orders)

**135 out of 212 children looked after** continuously for more than one year, received their annual health and dental check

**89 out of 219 young care leavers** are not in employment, education or training. This is based on the group of young people (aged 19-24) who were looked after at age 16

**7 children** live in private fostering arrangement

**37 young people** were referred to the multi-agency sexual exploitation panel and are mainly young girls at an average age of 14

**560 return home interviews** were undertaken children missing from home or care of which:

**Missing children from care 420**

Children from care return home interviews conducted **259**

Children from care return home interviews declined **161**

**Missing from home 140**

Missing from home return interviews conducted **105**

Missing from home return interviews declined **35**

Young people who are missing are sometimes trafficked internally for the purposes of criminal and sexual exploitation. The National Referral Mechanism (NRM) is a framework for identifying victims of human trafficking or modern slavery and ensuring they receive the appropriate support. The Modern Slavery Human Trafficking Unit (National Crime Agency) collates data nationally. This information contributes to building a clearer picture about the scope of human trafficking and modern slavery victims in the UK.

**21 “potential victims of trafficking”** were referred to the National Crime Agency

**28 child deaths** were reported in the year of which 10 were unexpected deaths

**The child death overview panel reviewed 21 child deaths** of which, 13 were recorded as expected deaths (life limiting illness) and **8 were unexpected deaths**. 19 of the 21 child deaths were under the age of 12 months. The number of neo-natal deaths and those under the age of 1, were the biggest group

**680 professionals received safeguarding training** provided by the LSCB in 2017/18 compared to 639 in 2016/17 which is a 6% increase

### Early Help Support with Parents/Carers

The Local Authority's Parental Engagement Service provide a range of support to parents in schools and other settings such as parenting programmes, awareness events, survey, information and advice.

**6449** families engaged in level 1 services  
**5804** families engaged in level 2 services  
**590** families engaged in level 3 services  
**69** families engaged in level 4 services

- Level 1 ▶ Needs met through Universal Services
- Level 2 ▶ Needs met through Early Help Targeted Services
- Level 3 ▶ Threshold met for Statutory Child in Need Intervention
- Level 4 ▶ Threshold met for Statutory Child Protection Intervention

**2279** families attended parenting courses in 2017/18 which was a 64% increase on 2016/17

**27.6%** of Supporting Stronger Families (SSF) who had an intervention were turned around, which is an increase compared to the 11.6% in the previous year

**187** parents/carers attended the Annual Parent Conference

**882** Early Help Assessments and 905 Early Help Reviews, a decline of 10.6% in the previous year

**94%** of parents responded that they were satisfied with Children Centre services (**1426** respondents to the Annual Children Centre Survey)

**557** parents/carers accessed information and advice sessions to support school transition

**128,342** unique visits to the Local Offer website

**8,598** calls/drop-ins made to the Family Information Service

**27** Healthy Families Parent Ambassadors are trained and active – delivering healthy eating sessions for parents in schools

Annual Parent Carer Survey indicated that a quarter (26%) report that their children have been bullied in the past year and nearly six in ten (58%) say they often worry about their children's health and well-being

There are more than **265** active members on the Parent & Carer Council who regularly contribute to the borough wide forum and help shape council services for families



### Section 11 (Children Act 2004)

Section 11 of the Children Act places a statutory requirement on key organisations to ensure arrangements are in place to discharge their duty to safeguard and promote the welfare of children. A biennial self-assessment is usually undertaken by the LSCB partners to assess the effectiveness of the local safeguarding arrangements at a strategic and operational level. The next section 11-audit exercise was due to take place at the end of 2017, however a decision was taken to put this on hold to allow the LSCB partners to focus on supporting the post inspection improvement work.

## Section Three

### Improvements made since Ofsted's Review of the LSCB

In February/March 2017, Ofsted undertook a **Review of the Effectiveness of the LSCB** in conjunction with the Children's Social Care Inspection of services for children in need of help and protection; children looked after and care leavers. Ofsted judged Tower Hamlets LSCB to be **'inadequate'** as it found that we were not effectively discharging all of our statutory functions. In addition, Ofsted also cited:

- The board was excessively large therefore limiting meaningful debate and effective decision-making
- The lead member had not exercised their responsibility as a participating observer, weakening scrutiny of the board
- The board had not ensured timely oversight of key practice areas
- Insufficient monitoring of the quality of front line practice meant the board was not aware of the failings of children's social care to protect children

Tower Hamlets LSCB accepted the judgement and recommendations made by Ofsted and has implemented changes in response to the five recommendations:

Ofsted Recommendation	Progress Update
<p>Urgently review monitoring and governance arrangements to ensure the board is fulfilling its statutory functions</p>	<p>The LSCB Chair undertook a review of the governance arrangement and strengthened the scrutiny and challenge function of the LSCB from practice through to strategic oversight.</p> <p>The new structure consists of an Executive Board that reflects the three Safeguarding Partners model. An Operational Group that:</p> <ul style="list-style-type: none"> <li>• Resolves multiagency performance and audit issues</li> <li>• Provides situational awareness of the safeguarding environment, sharing intelligence and resolving obstacles</li> <li>• Ensures safeguarding messages reach professionals and the public</li> <li>• Interfaces with other partnership forums to enhance safeguarding children's work across the wider spectrum</li> </ul>

## Improvements made since the Ofsted's Review of the LSCB

Tower Hamlets LSCB accepted the judgement and recommendations made by Ofsted and has implemented changes in response to the five recommendations:

Ofsted Recommendation	Progress Update
<p>Prioritise multi-agency monitoring of frontline practice to ensure that the board has effective awareness of the quality of practice and its impact on outcomes for vulnerable children</p>	<p>The LSCB was realigned with the Local Authority's Children's Services Improvement Board. This has allowed direct sight of frontline practice, monitoring outcomes from quality assurance activities. The LSCB was able to assure itself that improvements being reported for children were corroborated by partner agency experience and in turn the reliability of performance information.</p> <p>The LSCB has developed a new child-level performance dataset to provide a detailed understanding of frontline practice. However, the ability to triangulate the core safeguarding data provided by CSC has been inhibited by the lack of relevant partner information. The LSCB recognises it needs to identify a solution that goes beyond looking at quarterly performance data retrospectively. This approach does not provide a current assessment of safeguarding performance. Further work is being undertaken to ensure the LSCB is able to monitor and act on 'live' information.</p>
<p>Ensure the business management capacity of the board is sufficient to meet the need</p>	<p>This will be reviewed as part of the transition work from the LSCB to the new safeguarding partnership arrangement. Additional resource has been allocated around multi-agency performance development.</p>
<p>Ensure the board prioritises the response of the partnership to the issues of youth violence and gang activity and their relationship to child sexual exploitation, including the development of a comprehensive problem profile</p>	<p>The LSCB has established a strategic Vulnerable Young People and Exploitation subgroup that brings together information from frontline practice in the areas of child, criminal and ideological exploitation that also includes children who go missing and those involved in county lines. An exploitation analyst has been employed by the local authority who is working towards developing a local problem profile and systems to drill down to specific cohorts of children e.g. those involved in criminal exploitation or gangs and attending non-mainstream education settings.</p> <p>The establishment of a joint Exploitation Team between the local authority and the police has seen significant improvement in the identification of children at risk of exploitation and disruption activities. The work of the co-located team has also provided substantial intelligence to inform our local knowledge-bank.</p>
<p>Ensure the effectiveness of multi-agency training is monitored and evaluated, including training for staff in recognising and assessing risks to sexually exploited children</p>	<p>This area continues to remain a challenge for the LSCB. The responsibility for multi-agency training evaluation sits with the local authority's workforce development team and the quality of support to the LSCB partnership is dependent on their capacity and available resources.</p>

## What we have done over the past year

### Held the annual Safeguarding Month in November 2017 to raise awareness of:

- Child sexual exploitation including promoting a video developed by the Youth Council on 'Keeping Safe when using Social Media'
- Understanding the risks presented by vulnerable young people and how best to support them
- Support available for parents and carers through provision of information stalls at various locations around the borough
- Operation Makesafe, a police led initiative targeting taxi firms, hotel and other business premises to help staff to recognise child sexual exploitation and how to report concerns

**Relaunched revised Multi-agency Safeguarding Threshold Guidance** and trained approximately 650 frontline staff across the children's workforce.

**Set up an Early Help Strategic Subgroup** to ensure support is provided to children and young people as soon as need emerges. This group maintains an overview that the Threshold Guidance is embedded and used appropriately to access early help and statutory intervention at the right time.

**Set up a joint Exploitation Team** bringing together police and children services staff to respond to children who go missing or are at risk of exploitation. This team has already demonstrated positive outcomes for vulnerable young people through this shared approach to tackling concerns of exploitation:

- Arrests have been made for human trafficking, inciting sexual activity and grooming
- Located a number of high-risk missing children
- Issued several exploitation warnings to potential offenders preventing them from continuing contact with children
- Implemented Operation Care Watch which identifies hotels that allow room-bookings for young people and adults. This has led to a number of premises receiving education on child sexual exploitation and preventative action they can take.

**Undertaken two new serious case reviews** which will be published in autumn 2018 and participated in a SCR initiated by another borough on safeguarding children who are taken out of school during term time and removed from the UK.

**Promoted the Escalation Policy** in conjunction with an updated case review protocol. This has led to an increased number of children's cases being considered for a multiagency review. In total, the LSCB has agreed to undertake two local learning reviews in addition to the existing serious case reviews.

**Focused on improving attendance and contribution** from multi-agency professionals (health and police) at statutory meetings. This is paying dividends with improved systems in place and better engagement ensuring decisions about children is collaborative.

**Agency Recruitment Policies reviewed** indicating overall compliance with DBS (police-checks) although regularity of re-checks is disparate. Majority of agencies are checking their existing staff every three years as a minimum requirement. Good practice suggests this should be done on an annual basis.

## What we have done over the past year

**Reviewed our training offer** and introduced new courses, including a rolling programme of the Multi-agency Threshold Guidance to reach new staff to the borough.

**Undertaken an audit** to understand why there appears to be low referrals from health visiting service to CSC. The findings suggested further work is done to ensure the Early Help System is better understood and used to support children.

**Increased the number of trained** health safeguarding supervisors and improved supervision compliance.

**Launched the Joint Working Procedure** between Adult Mental Health and the local authority.

**Delivered 'Empowering Young Minds Project'** to improve health staff competency with families around the emotional health of young people.

**Anti-knife crime projects (Spectre)** rolled out by the borough police in particular during school holidays. Enforcement officers are more visible in the community.

**Merged the gangs and high-risk panels** to ensure the police, CSC, health and education consider and put in place a multi-agency response for the cohort of young people involved in criminal activity. Many are victims of serious youth violence who move on to become perpetrators. Our most challenging group is 16-17 year olds who are also in the transitional phase to adult services where there is limited support currently available to them. Further early intervention work is required to disrupt and break the cycle of violence in addition to statutory response including working with parents in the community.

**Undertaken a mapping exercise** to understand if there are links between serious youth violence and children and young people who attend pupil referral units. We found no correlation but further work will be undertaken to cross reference with data held across the partnership.

**Reviewed licensing requirements** and where safeguarding issues emerge actions are taken appropriately and effectively.

Increased the number of trained health safeguarding supervisors and improved supervision compliance.



## Children's Social Care's response to Ofsted Inspection Findings

The Ofsted inspection report was published on 7 April 2017. This report examined Children's Services and the effectiveness of the LSCB and rated both as **'inadequate'**. The inspection findings and recommendations were accepted in full, and as a result a number of changes have been made to improve outcomes for children and families in Tower Hamlets and ensure that they are safe and able to achieve to their full potential. This section covers the period April 2017 – July 2018 to ensure that the most up to date information is available.

A number of common themes emerged from the inspection. These included:

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### Compliance

There was a lack of compliance with both statutory and internal processes.

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### Drift and delay

Cases were often left open for long periods without significant change being achieved. Children were not seen as regularly as they should have been and it became increasingly difficult to effect change.

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### Unreliable data

The use of "workarounds" in different areas of the system meant that it was nearly impossible to accurately understand what the data was showing. The data would often indicate strong performance in areas where closer examination showed a very different picture.

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As a result of the inspection, an improvement plan was developed which is overseen by an independently chaired Improvement Board. This board, chaired by Sir Alan Wood CBE is attended by the senior corporate and political leadership including the Chair of the LSCB. The improvement plan was provided to Ofsted in advance of being submitted to the DfE, who considered that it addressed all of the recommendations contained within the inspection report.

The improvement plan covers all of the recommendations from the Ofsted inspection, and is based around four broad themes.

- leadership, management and governance
- a robust model of social work practice
- a sufficient and skilled workforce
- quality assurance and audit

## Children's Social Care's response to Ofsted Inspection Findings

### Leadership, management and governance – some key achievements

- Senior corporate and political leaders are much more engaged with the issues surrounding Children's Services and have prioritised and actively driven forward the improvement agenda.
- A new team of permanent service managers are in post taking over from a team of interim managers.
- Monthly reports are provided to the Corporate Leadership Team and Operational Group with quarterly reporting at Cabinet level.
- Increased use of child level performance data by operational managers including regular performance surgeries ensure any deterioration in performance is quickly identified and addressed. This use of performance data has assisted in driving forward practice, and ensuring improvements in the timeliness of interventions with families.
- All social work staff have completed a "Back to Basics" training course
- The workforce has begun to implement the new model of social work "Restorative Practice". Social workers are currently receiving training with plans to roll this out to the wider partnership.
- The recent appointment of a permanent divisional director, who will lead the council on phase two of the improvement journey.

### A robust model of social work practice – some key achievements

- Child Protection Chairs and Independent Reviewing Officers are providing more robust oversight in respect to vulnerable children. This includes raising alerts to team and service managers where appropriate.
- We regularly achieve 100% compliance of Initial Child Protection Conferences within 15 days of the initiation of a s.47 investigation.
- The Pre-Proceedings process is completed within 12 weeks in all but exceptional cases. This is a significant improvement on the situation at the time of the inspection where these cases would often drift for long periods of time.
- A new threshold document was launched with over 650 attendees from across the partnership attended training.
- The vast majority of contacts and MASH episodes are completed within 24 hours with clear rationale provided for those where this is not possible.
- Multi-agency attendance at strategy meetings has improved with the support of the LSCB Chair.
- Management oversight is clearly and consistently recorded on all cases at least every eight weeks and usually more frequently. Children's Social Care has consistently achieved over 90% performance in this area with a focus on any team that does not achieve this.
- Robust arrangements are in place for the most vulnerable children including those who regularly go missing, are victims of sexual or criminal exploitation or involved in gang activity. The new multi-agency Exploitation Team has been launched, initially staffed by police officers and children's social care staff but with plans for wider partnerships. LSCB partner agencies have commented that this joint, co-located approach has significantly assisted the quality of the responses to vulnerable young people.
- The response to children who go missing have significantly improved with Return Home Interviews taking place out of hours where necessary.

## Children's Social Care's response to Ofsted Inspection Findings

### A sufficient and skilled workforce

- Arrangements for children who are privately fostered have been reviewed and assurance sought that these are fully compliant with current legislation.
- The LSCB recognises and supports the work being undertaken by the council to develop a Social Work Academy. This initiative is innovative and ground breaking and represents a clear long term commitment to ensure practitioners working with vulnerable children have the appropriate skills and support to provide high quality work.

### Quality Assurance and audit

- New quality assurance framework is now embedded in practice.
- Practice weeks have taken place with senior political and corporate leadership involved in frontline practice.
- Audits of case files are now undertaken on a regular basis, and the themes from audits are routinely reviewed by senior managers. The audits are shared with Ofsted at the monitoring visits. This process of both internal and external critical challenge has been and will remain a key element of the continued improvement journey.

### Ofsted monitoring visits – what they said

When a Children's Service department is judged to be inadequate, Ofsted visit regularly to monitor progress and ensure that there remains a strong focus on the improvement journey. So far, Ofsted have visited on four occasions: August and December 2017, May 2018 and most recently in August 2018. The initial visit highlighted that there were early signs of progress, more so than would have been expected at such an early stage, however it was essential that these changes were embedded and sustained. Subsequent visits have confirmed that changes have been maintained although it is acknowledged that there is still work to be done.

There is no complacency and the expectation is that the second year of the improvement journey will be as difficult if not more so. The pace of change has been rapid and Ofsted have commented that they will need to be convinced that these changes are embedded and will be sustained over the long term.

The Department for Education appointed Lincolnshire County Council (LCC) as "Intervention Advisor". This support focused on distinct areas such as Early Help, Looked After Children and Legal process. Following the third positive monitoring visit, the DfE agreed with the joint recommendation by LBTH and LCC that this work should come to an end. However, both the Council and the LSCB recognise the value of maintaining improvement partnerships that continue to assist with the developing requirements of the improvement journey. Therefore the council in consultation with the DfE has recently agreed partnerships with Leeds and Islington Councils that will provide support for phase two of the improvement journey which will focus on development of front-line managers, the promotion and development of practice and support on the continued development of our "Restorative Practice" model.

## Section Four

### Priorities for 2018-2019

It is critical that the future priorities for the LSCB focuses on those areas that will directly impact on frontline practice and the support given to families and children. It will need to be easily adaptable to the new statutory arrangements as we move forward:

<p><b>Continuing PRIORITY 1</b></p> <p>Learning through an enhanced Performance and Quality Assurance Framework that identifies our safeguarding areas for improvement</p>	<p><b>Continuing PRIORITY 2</b></p> <p>Sustain Situational Awareness during LSCB transition to a new multi-agency Safeguarding Partnership Arrangement</p>	<p><b>PRIORITY 3</b></p> <p>An improved Early Help Service is available to children and young people and result in positive outcomes</p>	<p><b>PRIORITY 4</b></p> <p>Vulnerable children who go missing or are at risk of child sexual, criminal, ideological exploitation and serious youth violence are protected by effective multi-agency arrangements</p>
<p>We will develop a focused analysis of live child protection intelligence to identify emerging safeguarding issues</p>	<p>We will create systems leadership to drive safeguarding strategy and practice across the three Safeguarding Partners – Local Authority, Health and Police</p>	<p>We will monitor the implementation of the Early Help Strategy and its impact to ensure children are being safeguarded through the early help process using outcome based accountability framework</p>	<p>We will have strategic oversight of the issues affecting vulnerable young children and develop a multiagency response to emerging trends and problems.</p>
<p>We will promote a culture of constructive challenge so there is effective inter-agency scrutiny</p>	<p>We will improve our scrutiny role through improved governance to ensure risks and blockages are identified and resolved during the transitional phase</p>	<p>We will review how well the Threshold Guidance is embedded in practice across organisations through quality assurance and performance monitoring</p>	<p>We will monitor the impact the multiagency exploitation team has had on protecting at risk children through its specialist case work intervention</p>
<p>We will monitor the quality of front line practice through case audits and thematic deep-dive</p>	<p>We will review all multi-agency policies/protocols to reflect the changes in legislation</p>	<p>We will continue providing learning opportunities on the Threshold Guidance to ensure the multiagency workforce is equipped to recognise when there is a need for early intervention</p>	<p>We will know who our most concerning children at risk are and ensure a coordinated response is provided to safeguard and protect them from significant harm</p>
		<p>We will continue to promote and support the development of the Early Help Hub to ensure that all partners are able to contribute to early interventions and prevent escalation of concerns.</p>	<p>The LSCB will continue to monitor and support the multi-agency work being provided through the new Exploitation team.</p>

## Section Five

## Appendices

## Appendix 1 – Membership List

Name	Job title
Alex Nelson	Voluntary Sector Children & Youth Forum Coordinator
Alexandra Law	Nursery School Heads Forum Representative (Harry Roberts Nursery)
Alice Smith	CAFCASS Rep
Ann Corbet	Service Head - Safer Communities – LBTH
Christine McInnes	Divisional Director, Education and Partnerships - LBTH
Claire Belgard	Interim Service Head – Youth & Community Service – LBTH
Clare Hughes	Lead Named Nurse for Safeguarding Children - BHT
Debbie Jones	Corporate Director, Children's Services – LBTH
Rebecca Scott / Emma Tukmachi (Drs)	GP Representative Tower Hamlets CCG
Hanspeter Dorner	East London Foundation Trust, CAMHS
Jan Pearson	Associate Director for Safeguarding Children - ELFT
DI Jason Keen	Met Police – Child Abuse Investigation Team
Lynn Torpey	Designated Nurse for Safeguarding Children & LAC

Name	Job title
Julia Hale (Dr)	Designated Doctor, Barts Health NHS Trust
Layla Richards	Head of Children's Services Strategy and Policy - LBTH
Lucy Marks	Chief Executive, Compass Wellbeing CIC
Judy Cole	Primary School Heads Forum Rep
Nancy Meehan	Divisional Director – CSC, LBTH
Nick Steward	Director of Student Services Tower Hamlets College
Pauke Arrindell	Voluntary Sector Rep Home Start
Lucie Butler	Director of Midwifery & Nursing (RLH), Barts Health NHS Trust
Stuart Webber	Head of Safeguarding Hackney, City of London and Tower Hamlets - National Probation Service
DCI Ingrid Cruickshank	Met Police Tower Hamlets
Stephen Ashley	Independent LSCB Chair
Tom Strannix	Voluntary Sector Representative – Manager, Place2Be
Tracey Upex	Deputy Borough Director – Tower Hamlets, ELFT

## Appendix 2 – LSCB Performance Data 2017-18

The early 2017 inspection of children’s social care identified a number of issues with recording practice and compliance that undermined the accuracy of the data being used to inform decision-making. The data quality issues have been significantly improved so the underlying data is now more reliable. This ensures that social care managers and staff are able to access up to date, child level data in real time and are able to identify and address any deterioration quickly. In 2017/18, a revised child-centred performance management process has been put in place, which focuses on the needs of the child and demands a much higher level of compliance with all recording standards.

### Children in Need

There was a higher rate of referrals into children’s social care services per 10,000 of the children & young people population than the national and statistical neighbour group averages. Extensive work has gone into the threshold document which has increased the referrals into the “front door” and necessary training of staff and partners has taken place to help ensure the right cases are being referred. This is similarly reflected in higher rates of assessments completed compared to statistical neighbours.

Source	Description	2013/ 2014	2014/ 2015	2015/ 2016	2016/ 2017	2017/ 2018	England Average	Statistical Neighbours
LOCAL1	Referral rate per 10,000 of the children & young people (C&YP) population	431.7	443.8	512.8	309.9	770.4	548.2	621.5
APA SS6	Percentage of Referrals that were repeat referrals	10.6%	10.0%	8.8%	13.7%	14.7%	21.9%	16.6%
N07	Rate of assessments per 10,000 of the C&YP population	410.8	331.8	336.0	326.3	738.4	515	573
N14	Assessments completed within 45 days or less from point of referral (CIN Census methodology)	75.8%	85.1%	87.1%	75.6%	74.1%	82.9%	78.1%

## Child Protection

There were high rates of activity in relation to formal child protection enquiries (section 47s) and initial child protection case conferences but rates of children subject to a child protection plan were in line with national and statistical neighbour averages. The proportion of child protection plans lasting over two years has been stable over the last three years and there is a comparatively lower proportion of 'repeat' child protection plans (where children become subject to child protection plans for a second or subsequent time) when compared to national and statistical neighbour averages.

Performance in relation to timeliness of Initial Child Protection Conferences has improved since the previous year and is below national average but above statistical neighbour average. The proportion of children visited in line with the timescales set out in their plan has vastly improved, and the proportion of children receiving a timely review of their child protection plan increased and is now in line with statistical neighbour average and well above national average.

Source	Description	2013/ 2014	2014/ 2015	2015/ 2016	2016/ 2017	2017/ 2018	England Average	Statistical Neighbours
	Rate of Children Subject of a Child Protection Plan per 10,000 at 31 March	55.6	50.9	45.9	56.7	43.5	43.3	42.9
N08	Section 47 (child protection) enquiries rate per 10,000 C&YP population	167.0	162.1	191.7	161.9	191.0	157.4	184.3
N13	Initial Child Protection Case Conferences – rate per 10,000 C&YP population	57.4	62.4	56.9	66.8	75	65.3	70.9
N15	Initial Child Protection Case Conferences convened within 15 days from point Child Protection Strategy meeting held	52.2%	58.2%	69.5%	63.0%	69.0%	77.3%	66.2%
N17 (Formerly NI 64)	Percentage of Child Protection Plans lasting two years or more at 31 March and for child protection plans which have ended during the year.	7.1%	11.4%	7.0%	5.6%	6.0%	3.4%	4.6%
N18	Percentage of children becoming the subject of Child Protection Plan for a second or subsequent time	17.9%	15.2%	19.3%	12.2%	6.5%	18.7%	15.5%
N20 (6 months Rolling Year)	Percentage of cases where the lead social worker has seen the child in accordance with timescales specified in the CPP.	65.4%	54.5%	51.0%	69.9%	94.9%	N/A	N/A
NI 67	Percentage of Child Protection Reviews carried out within statutory timescale	97.6%	95.3%	99.5%	91.2%	96.3%	92.2%	96.0%
APA SS13	Percentage of children with CP plans who are not allocated to a Social Worker	0.3%	0.0%	1.0%	0.0%	0.0%	N/A	N/A
LOCAL2	Percentage of LADO cases resolved in 30 days or less	69.6%	69.0%	67.0%	64.9%	88.0%	N/A	N/A

## Looked After Children

The number of looked after children per 10,000 of children & young people population, at 42.5, was below the England and statistical neighbour averages. Long term placement stability, an important factor in maintaining good levels of wellbeing, is below comparator group performance and has decreased over the last five years. Short term placement stability was worse than comparator groups and is at a higher level than over the previous four years.

An improved focus and better recording of children missing from care data has driven the increase in the percentage of children who went missing from care at some point during the year. This is reflected nationally and in the statistical neighbour group averages. There was increased participation, and the timeliness of Children Looked After reviews is better than the previous year. There were variable outcomes for Children Looked After regarding immunisations, health and dental checks when compared to the previous year and were below comparator group averages.

Source	Description	2013/ 2014	2014/ 2015	2015/ 2016	2016/ 2017	2017/ 2018	England Average	Statistical Neighbours
	Rate of Looked After Children per 10,000 as at 31st March	53.0	44.0	47.0	50.0	42.5	60.0	62.9
LACP01 (Formerly NI 62)	Percentage of CLA with three or more placements	11.0%	12.0%	8%	13%	13%	10%	11.4%
LACP02 (Formerly NI 63)	CLA under 16, looked after for 2.5 years or more and in the same placement for 2 years	79.0%	78%	75%	73%	62%	70%	69.9%
LACP04	The percentage of children looked after who went missing from care during the year as a percentage of all children looked after during the year (new definition)	-	5.1%	15%	15%	17%	10%	10.8%
PAF C63	CLA who participated in their review	88.6%	92.4%	89.4%	86%	93%	N/A	N/A
NI 66	CLA cases which were reviewed within required timescales	89.9%	85.5%	65.0%	54.1%	81.1%	N/A	N/A
APA SS(LAC)5	Percentage of CLA with a named Social Worker	98.2%	99.3%	98.3%	99.1%	100%	N/A	N/A
PAF C19	Percentage of health assessments completed for Children who have been looked after continuously for at least 12 months as at 31st March	-	-	85%	86%	83%	89%	95%
PAF C19	Percentage of dental assessments completed for Children who have been looked after continuously for at least 12 months as at 31st March	-	-	80%	66%	81%	83%	91%
PAF C19	Percentage of CLA > 12 months who had an annual Health and Dental check	91.5%	89.8%	83%	59%	82%	86.4%	90.7%
PAF C19	Percentage of CLA > 12 months whose Immunisations were up to date	78.5%	88.2%	77%	70%	60%	84%	93%

## Care Proceedings

Timeliness of care proceedings has declined over the last year with the latest average of 35 weeks. This is above the England and statistical neighbour averages; and short of the 26 week national target.

Source	Description	2013/ 2014	2014/ 2015	2015/ 2016	2016/ 2017	2017/ 2018	England Average	Statistical Neighbours
A08	Average length of care proceedings locally (weeks)	42	35	29	29	35	31	30.7

## Leaving Care

Outcomes for children leaving care remain positive compared to England and statistical neighbour group, with more care leavers entering employment, education or training, and living in suitable accommodation.

Source	Description	2013/ 2014	2014/ 2015	2015/ 2016	2016/ 2017	2017/ 2018	England Average	Statistical Neighbours
LACLC02 (Formerly NI 148)	The proportion of care leavers in education, employment or training (aged 19-21)	-	-	61%	58%	59%	50%	51.3%
LACLC03 (Formerly NI 147)	The proportion of care leavers in suitable accommodation (aged 19-21)	-	-	83%	82%	84%	84%	79.3%

**Appendix 3 – LSCB Operational Board – Agency Representative Attendances for 2017-18**

Agency represented	Date of meeting			
	21.06.17	13.09.17	22.11.17	26.02.18
LSCB – Independent Chair				
LSCB Lead – Governance Manager				
LSCB Performance Analyst	/	/		
LSCB Co-Ordinator (minute taker)				
Children's Social Care - LBTH	A		A	
Public Health - LBTH		A		
Youth & Community Services - LBTH		A		
Youth Justice and Family Interventions - LBTH		A		A
Youth and Commissioning - LBTH	/	/		
Education & Partnership - LBTH		D	D	D
Community Safety - LBTH		A		D
Strategy Policy & Performance - LBTH	A			
Primary School Head Forum				
CAFCASS		A		A
Barts Health Trust				
Lay Member		/	/	/
ELFT		A		
ELFT - CAMHS				A
ELFT – Specialist Services			D	
Tower Hamlets CCG				
Tower Hamlets Housing Forum				A

Agency represented	Date of meeting			
	21.06.17	13.09.17	22.11.17	26.02.18
NSPCC		A	/	/
Compass Wellbeing				D
National Probation Service			A	
Voluntary Sector Rep	A			
MET Police	A			
MET Police - CAIT	A			
Tower Hamlets College/New City College	A			

Key	
Attended	
Deputy attended	D
Apologies given	A
Did not attend – no apologies	
Not a member of the Board at date of meeting	/

## Appendix 4 - Glossary

BHT	Barts Health Trust
CA04	Children Act 2004
CAF	Common Assessment Framework
CAG	Clinical Academic Group
CAIT	Child Abuse Investigation Team
CAMHS	Child and Adolescent Mental Health Service
CCG	Clinical Commissioning Group
C&F ACT 2014	Children & Families Act 2014
CHAMP	Child & Adolescent Mental Health Project
CLA	Children Looked After
CME	Children Missing from Education
CPS	Crown Prosecution Service
CSC	Children's Social Care
CSE	Child Sexual Exploitation
CSP	Community Safety Partnership
CQC	Care Quality Commission
DCOS	Disabled Children Outreach Service
DHR	Domestic Homicide Review
DV&HCT	Domestic Violence and Hate Crime Team
ED	Emergency Department (A&E)

ELFT	East London Foundation NHS Trust
FGM	Female Genital Mutilation
FNP	Family Nurse Partnership
IPST	Integrated Pathways & Support Team
LAC	Looked After Child
LADO	Local Authority Designated Officer
LCS	Leaving Care Services
LSCB	Local Safeguarding Children Board
MARAC	Multi-Agency Risk Assessment Conference
MASE	Multi-Agency Sexual Exploitation (Panel)
MASH	Multi-Agency Safeguarding Hub
MPS	Metropolitan Police Service
NICE	National Institute for health and Care Excellence
NSPCC	National Society for the Prevention of Cruelty to Children
NTDA	National Trust Development Agency
PFSS	Parent and Family Support Service
PVE	Preventing Violent Extremism
RLH	Royal London Hospital

SAB	Safeguarding Adults Board
SCR	Serious Case Review
SEND	Special Education Needs and Disabilities
SI	Serious Incident
SIP	Social Inclusion Panel
SoS	Signs of Safety
TH	Tower Hamlets
THSCB	Tower Hamlets Safeguarding Children Board
VAWG	Violence Against Women and Girls
WT15	Working Together 2015

## LSCB contact details

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