

Keeping children safe in Tower Hamlets



Tower Hamlets LSCB

Annual Report 2018/19

Safeguarding is everyone's responsibility















Contents

Section One Section Four

Section Two

Section Three

Chair's Foreword



Welcome to the annual report of the Tower Hamlets Local Safeguarding Children Board (LSCB). This will be the final report from the LSCB which will be dissolved at the end of August.

The Children and Social Work Act 2017 has replaced LSCBs with new partnership arrangements. Those arrangements have been published on the Tower Hamlets council website.

At the beginning of 2017 Tower Hamlets children's services were judged as inadequate by Ofsted. Over the last two years there has been an incredible amount of work carried out by partners to turn this position around. The Corporate Director of Children and Culture has worked tirelessly with her team to improve performance and this has been supported with additional funding from the local authority.

The result is that in June this year Ofsted re-inspected services and found them to be

judged as "good" across all areas. Of course to achieve this remarkable turnaround front line staff have had to show enormous commitment and I am delighted that all of the hard work has paid off. In fact, what really matters is that Ofsted found that of all the cases they examined there were no children who had been left at risk. I have delayed the publication of this year's report to be able to report this important news.

Whilst there has been a focus on improving the standard of child protection there has also been considerable work undertaken to deal with the Board's other priorities.

Neglect remains a concern but there are new training packages for professionals and the Children and Families Partnership Board has focussed on this area. To tackle neglect effectively there needs to be a strong Early Help offer. A pilot project in the North East of the borough is proving successful and the new Early Help hub will improve the support that families receive to avoid their circumstances deteriorating.

After two and a half years I am moving on and a new 'independent scrutineer' has been

appointed. It has been an absolute privilege to work with the partners and people of Tower Hamlets and it is an experience I will never forget. Thank you to all of those who have supported me both personally and professionally. My biggest thanks must go to those professionals across the partnership who work so hard to keep our children safe. Thank you.

Mr. E. Tow

Stephen Ashley Independent Chair Tower Hamlets Safeguarding Children Board

KEEPING CHILDREN SAFE IN TOWER HAMLETS 2018-19

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



POPULATION

304,900

Borough population expected to reach 365,200 by 2027

32% Bangladeshi and 31% White British make up the two largest groups

20% of our population are under 16



26.6% of households have dependent children

30.3% children continue to live in poverty, the second highest in London

EDUCATION

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



32.6% were eligible for free school meals making it the highest in the country

69.4% achieved a good level of development at age 5

72% achieve expected KS2 standard in reading, writing and maths at the end of primary school - above the national average of 64%

46.8 is average attainment 8 score in 2018 – above national average of 44.5

VULNERABLE CHILDREN

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



44 young people were referred to multi-agency sexual exploitation panel

1327 incidents of children missing from care

24 incidents of children missing from home

28 child deaths were reported in the year 2018-19 of which 9 were unexpected deaths

CHILDREN PROTECTED

1,390 child protection investigations were carried out

282 children were subject to a child protection plan at the end of March 2019 under the following categories:

Sexual Abuse - 12

Emotional Abuse - 80

Neglect - 172

Physical Abuse - 18



CHILDREN LOOKED AFTER

290 children were looked after by the local authority

47 were under 5

48 were aged 5 to 9

120 were aged 10 to 15

114 were aged 16 to 17

7 children live in private fostering



69.4%

LAC average attainment 8 score was 21.5 above national average score of 18.9

KEEPING CHILDREN SAFE IN TOWER HAMLETS 2018-19

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



The Children and
Social Work Act
2017 introduced
significant changes
to the safeguarding
landscape in
England including
the replacement of Local
Safeguarding Children Boards
with new local safeguarding
partnerships led by three
safeguarding partners – the Local
Authority, Clinical Commissioning
Group and Police.

The development of the Tower Hamlets Safeguarding Children's Partnership (THSCP) is being led by an executive group consisting of the key partners including Schools, colleges and the Voluntary Sector The vision of the THSCP is that the statutory partners, wider relevant agencies, community and voluntary sector and residents work together to ensure that everyone does everything they can to ensure that all Tower Hamlets children and young people are safe, supported and successful.

The diagram below sets out the key milestones and timescales for the transition process.

TRANSITIONAL PROCESS TO NEW ARRANGEMENTS:

By June 2019

Local responses to new system to be published

By September 2019

New partnerships and child death review systems to be operational

By March 2020

Migration from the current arrangements and full implementation

The New Safeguarding System

Theme	What the new system looks like
Voice of the Child	It will be a mandatory requirement to support the inclusion of meaningful 'Voice of the Child' input and develop the new system in partnership with children, young people, families and the wider community.
Local area Children's Safeguarding Business	This will now be delivered by Safeguarding Partnerships, instead of LSCB's.
Local Leadership	The role of the LSCB Chair will be replaced by the three statutory partners and the Independent Scrutineer.
Local Safeguarding accountability	There are three statutory leads acting for the Local Authority (LA), Clinical Commissioning Group (CCG) and Policing in the partnership area. Key accountability was previously via the Independent Chair and usually the Director of Children's Services.
Local Multi-Agency Partnership Working	This will be delivered through the relevant agencies which will include schools and colleges, housing organisations, youth justice and Probation, the Department for Work and Pensions and voluntary sector organisations.
Review of cases	Alongside local case reviews a National Safeguarding Practice panel will be able to request a serious case review for cases of potential national importance. The focus will be on agility and timeliness in taking action as well as planning and system intervention.
Structure, outputs and standards	 The new structure to be driven mostly by the arrangements between the LA, CCG and Police. Each area to innovate and find appropriate solutions to local issues. Light touch requirements from 'Working Together to Safeguard Children' guidance 2018. Impact to be captured by local Section 11 audits and Joint Targeted Area inspections. Outputs include local case review, larger scaled reviews when requested by national panel, annual reports and ongoing assurance or themed works.
Child Death Review	A new CDR system will be formed which will cover a larger area than before with two statutory partners (CCG and Local Authority) and will also be shared with City and Hackney, Newham and Waltham Forest to meet the statutory requirements.

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 prompting 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. The DfE published the revised Working Together to Safeguard Children Guidance in July 2018, which sets out what organisations and agencies which have functions relating to children must 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 published to support LSCB's, the new safeguarding and child death review partners, and the new Child Safeguarding Practice Review Panel in the transition from LSCBs and serious case reviews (SCRs) to a new system of multi-agency arrangements and local and national child safeguarding practice reviews. The guidance aims to help those involved understand the requirements and to plan and manage their work in the transitional period.

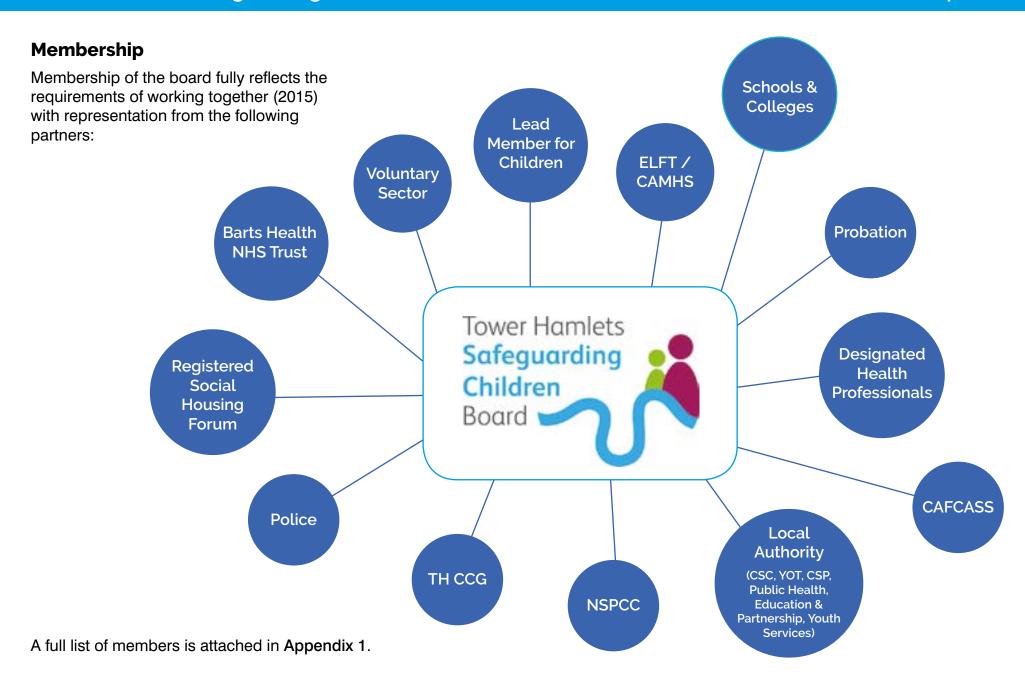
Safeguarding partners have up to 12 months, from 29 June 2018, to agree their local arrangements and which relevant agencies they consider appropriate should work with them to safeguard and promote the welfare of children in their area.

Safeguarding partners must publish their <u>local arrangements</u> by 29th June 2019 and then have up to three months to implement them.

DfE transitional guidance makes it clear that all new local arrangements must have been implemented by 29 September 2019 and that once the arrangements have been published and implemented, the LSCB for the local area will cease to exist.

Chairing and Support

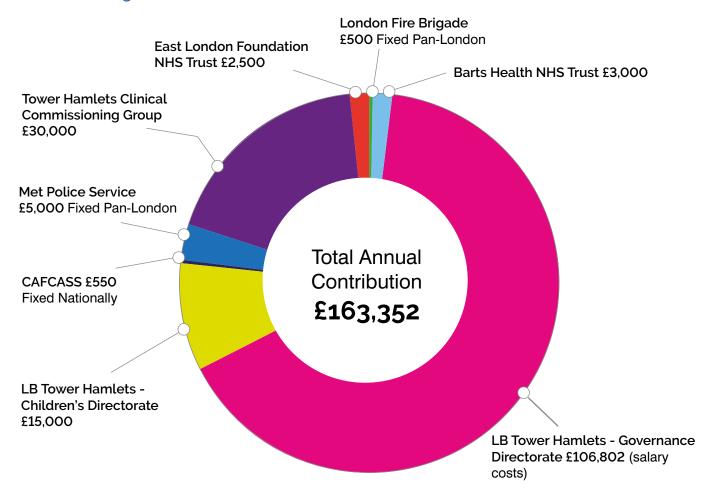
During the financial year 2018-19, support to the LSCB and independent chair, Steve Ashley, was provided by the strategy, policy and performance function of the council. Going forward, support to the new safeguarding children partnership will remain unchanged.



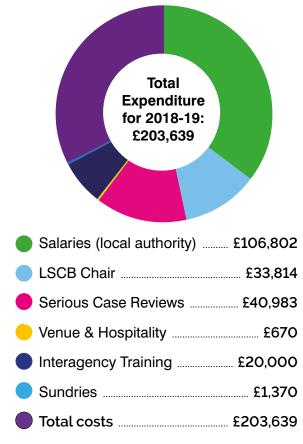
Budget

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 2018-19:



Total Expenditure for 2018-19:



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.

Section Two

Local background and safeguarding context in Tower Hamlets

Population

Between 1987 and 2017 the population of Tower Hamlets more than doubled – making Tower Hamlets the fastest growing local authority in the UK.



The borough's population is projected to increase from 308,000 in 2017 to **365,200** in 2027. This is equivalent to 15 additional residents every day over ten years.



Tower Hamlets is the **second** most densely populated local authority in the UK, next to Islington.



There were 101,247 households living in Tower Hamlets at the time of the 2011 Census. This is expected to increase from 132,100 in 2018 to 160,100 in 2028.



26.6% of households with dependent children (2011).

%

Our proportion of under-16s in the borough is 20.3% - this is similar to London and England (20.5% and 19.1% respectively, mid-2017).

Diversity

The borough is ranked as the **16th most** ethnically diverse local authority in England in terms of the mix of different ethnic group populations (2011).



Bangladeshi's remain the largest ethnic minority group at 32%, the largest in the country, followed by White British at 31% (2011).



The third largest ethnic group is Other White (12%) consisting largely of eastern and western Europeans, Australians and Americans (2011).



More than four in ten residents (43%) were born outside of the UK (2011).



At least **123 different languages** are being used in the borough.



Poverty

Tower Hamlets is the tenth most deprived local authority in England (IMD 2015).



32.5% of children and young people in the borough live in poverty – this is the highest child poverty rate in London.



The proportion of workless households is estimated to have increased – **20.9% of households are workless** which is more than the national average of 14.5% (2017).



Housing

There are now **120,020 homes** in the borough (2018).



36% of households live in social housing (2018), which is the 4th highest in London after Southwark, Hackney and Islington.



In 2017 there were **18,726 households on the housing waiting list**, the second highest among London boroughs and eighth highest nationally. Around 37 percent of households on the housing waiting list are living in overcrowded accommodation.



33% of households live in private rented accommodation and 27% are owner occupiers (2011 Census).



In 18/19, there were **74 cases of homelessness** due to end of an assured short term tenancy.



Pregnancy and birth

4.3% babies are born with low birth weight – this is higher than the London average of 3.0% (2017).



The levels of breastfeeding are better than the London average. At 6-8 weeks the prevalence of breastfeeding in Tower Hamlets is 81% (exclusive breastfeeding is 45% compared to 30% for England).



Infant mortality rate is higher at 4.7 deaths of under 1 year olds per 1,000 live births than the London average of 3.3 (2015-17).



The under 18 conception rate at 15.2 per 1,000 females aged 15-17 was lower than the London rate of 17.8.



Early Years

Around a fifth of reception age children are overweight or obese (2017/18).



The percentage of children achieving a good level of development at the end of reception (age 4-5) is 69.4% - this is lower than the average for London or England 73.8% and 71.5% respectively).



The rate of hospital admissions of 0-4 year olds for unintentional and deliberate injuries in children is significantly lower (106.5 per 10,000) than national rates (121.2 per 10,000 (2017/18).



31.1% of children have one or more decayed or missing teeth significantly higher than the national average of 23.3% (2016/17).



Children and Young people

Around two fifths of children are overweight or obese at the end of primary school (2017/18).



In Spring 2019 the School Census recorded 8,000 pupils at schools in Tower Hamlets with special educational needs and/or disabilities (SEND) – this is 17.6% of the school population.



It is estimated that in 2019 there will be approximately 4,438 children and young people aged between 5 and 17 with a diagnosable mental health condition - this prevalence is projected to increase by around 3% every year.



Education

9 in 10 pupils attending school in Tower Hamlets are from an ethnic minority group. The majority of pupils are from a Bangladeshi Background (62.5%) (Spring 2019).



72% of children achieved the expected Key Stage 2 level in reading, writing & maths by the end of primary school – this was above the national average of 64% (2017/18).



In 2018 GCSE results revealed that the average Attainment 8 Score was 46.8 in Tower Hamlets.



The average points score (APS) for Level 3 (A-Level or equivalent) was 30.38 in Tower Hamlets in 2018.



The proportion of young people not in education, employment or training in Tower Hamlets is 3.04%, - compared to 1.81% in London and 2.71% in England (2017).





Children in need of help and protection

To fulfil its statutory function under regulation⁵ an LSCB should use data and, as a minimum, assess the effectiveness of the help provided to children and families, including early help.

Local safeguarding data for 2018-19 shows:

There were **5,342 total referrals to children's social care in 2018-19** of
which **20.3%** were repeat referrals. This has
increased compared to the previous year's **5,251** referrals of which **14.7%** were repeats.

2,379 contacts were progressed to early help teams/hub representing 16.0% which is an increase on 9.7% in 2017-18.

1,390 child protection investigations (s47) were undertaken.

105 allegations (54%) against adults working with children were resolved within the 30 day DfE target in the period 1st November 2018 to 31st March 2019. Of these, 18 were subject to child protection plans for two years or more. The main reason was neglect.

As of March 2019, **282 children were subject to a child protection plan**. Of these none were subject to child protection plans for two years or more

13.2% children were on a child protection plan for a second or subsequent time, within 2 years of the previous plan.



Category of abuse

Neglect	172
Emotional abuse	80
Physical abuse	18
Sexual abuse	12
Multiple abuse	0

Neglect is now the most common reason for children becoming subject to a child protection plan, this is the result of an increased focus on neglect within Children's Social Care.

Children looked after

329 children were looked after by the Local Authority at the end of March 2019

Children Looked After by age							
Age at 31 March	Boys	Girls					
Under 1:	8	7					
1 - 4:	17	15					
5 - 9:	30	18					
10 - 15:	67	53					
16 - 17:	68	46					
TOTAL	190	139					
Total of Children Looked After at the end of March 2019	329						

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

148 out of 182 children looked after continuously for more than one year, received their annual health and dental check

65 out of 214 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

44 young people were referred to the multiagency sexual exploitation panel

Return home interviews

636 return home interviews were undertaken with children missing from home or care of which:

Missing children from care

Children from care return home interviews conducted	636
Children from care return home interviews declined	361
Missing from home	176
Missing from home return interviews conducted	200
Missing from home return interviews declined	45

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.

The child death overview panel reviewed 14 child deaths.

8 were recorded as expected deaths due to life limiting illness. 6 were unexpected deaths.

16 of the 28 reported deaths were under the age of 12 months. This is lower than deaths reported in the previous year.

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.

2742 families attended parenting courses in 2018/19

There are more than 300 active members on the Parent and Carer Council who regularly contribute to the borough wide forum and help shape council services for families

50,273 unique visits to the Local Offer website

92% of of parents/carers who attended a Parental Engagement course/session report services have helped them to understand their child's development and improve their relationship

94% of parents responded that they were satisfied attending the 'Emotional First Aid' course and felt more optimistic about their future and that confidence in their ability to manage stress in their daily lives increased by the end of the course

1720 families received SEND advice and support

22 SEND Ambassadors trained and active - delivering information sessions raising awareness of SEND support available to families (Centre Survey)

144 young people with SEND (48% with a disability) received advice, information and support independent of their parents

1,356 children attended 5,901 places at the Local Authority Holiday Childcare scheme

170 parents / carers attended the Annual Parent Conference

573 parents/carers and 731 pupils accessed information and advice sessions to support school transition

39 parents/carers attended a Parental engagement E-Safety session in a school setting or Idea Store

School Ready/Neglect programme saw an average 7% increase in school attendance of the children targeted



Annual Parent Carer Survey indicated that a quarter (24%) of parents/carers consulted report that their children have been bullied in the past year and nearly two thirds (64%) say they often worry about their children's health and well being

15 Healthy Families Parent Ambassadors trained and active - delivering healthy eating sessions for parents in schools

8,991 contacts made with the Family Information Service

99% of parents/carers who attended a Parental Engagement course/session report they have increased confidence and awareness which has supported their own learning

41 parents/carers completed accredited Volunteering in Your Childs School programme, 36 became active school based volunteers, 6 parents / carers moved into employment

What we have done over the past year

Launch of the Early Help Hub in July 2018 providing help to children and vulnerable families as soon as their needs emerge and at any point in a child's life, from prenatal stages and up to the age of 25 years, for those with learning difficulties and or disabilities.

The Early Help Strategy 2018-2021 was published in October 2018 setting out the vision that every family should get the right support at the right time to ensure that needs are addressed quickly, preventing further escalation or crisis and ensuring that resources are put to the best possible use.

Pilot project launched within the Early Help Service to provide an "Integrated Offer" for families at risk of neglect. This work aims to link dedicated Social Workers, Children's Centres and schools together to address neglect concerns at an early stage of identification. The pilot will commence with a cluster of schools in the North-East of the Borough and then be rolled out into other areas.

Integration of the 0-19 Service and introduction of safeguarding related 'Standard Operating Procedures'

Integration of the 0-19 Service has facilitated a more robust level of communication between services at key areas of transition -such as starting school and movement within the borough. These changes also ensure that vulnerable children are identified and work continues seamlessly across their life.

Exploration of an integrated approach to safeguarding training for all partners in the Tower Hamlets Together (THT) system. Currently all partner organisations organise their own training offers and no shared standards or portability of training offer exists across the THT partnership.

Work has started on identifying where there is potential to provide a shared safeguarding training model. This will lead to the creation of a vision, narrative and action plan for the development of a whole system approach to training.

Potential benefits include reduced costs and additional support for local safeguarding agendas through enhanced multiagency training and working.

Roll out of the Maternal Early Childhood Sustained Home-visiting (MESCH) programme within the Health Visiting Service. This programme is part of the early help offer for families at risk of poorer maternal and child health outcomes. It utilises an evidence based approach and aims to improve outcomes for families through preventative measures and early intervention.

Planning and development of new Child Death Review system which has led to the development of an initial model for the Waltham Forest, East London and the City (WELC) Child Death Review system arrangements. This provides a local response to the new statutory requirements which will facilitate standardised procedures for reviews and enable effective thematic learning which could help to prevent future deaths.

'Escalation Standard Operating Procedure' put in place by Barts Health as part of their revised Safeguarding Children Policy which was ratified in March 2019 – so that staff understand how to escalate concerns effectively where there are potential barriers.

What we have done over the past year

Structured collaboration has been facilitated between professionals at community baby clinics to ensure there is direct communication about complex cases and or concerns.

Health Visiting Service audits were undertaken around safeguarding subjects, including thresholds for service involvement, which confirmed that the health visiting service were managing cases at the correct level and were taking action to escalate where needed

'A Space for Talk?' training was held for voluntary sector organisations and partners which focused on how organisations can encourage children and young people to express their feelings and talk about what is happening in their lives.

Audits of safeguarding policies and procedures were undertaken for six voluntary sector organisations. The Voluntary Sector Children and Youth Forum Coordinator supported this process which ensured documentation is up-to-date and suitable for the activities the organisations provide.

Rolling programme of workshops

delivered for the voluntary sector included sessions on 'e-safety' and the new thresholds. Safeguarding is kept high on the agenda of voluntary sector organisations by ongoing dissemination of resources about a wide variety of topics such as preventing serious youth violence, adverse childhood experiences and keeping children and young people safe against extremism and radicalisation.

Adam Serious Case Review

This is a retrospective serious case review (SCR) aiming to understand how bruising in pre-mobile babies is understood and responded to by professionals working with children. Baby Adam was approximately six weeks old when he came to the attention of medical professionals for unexplained bruising in February 2015. It took a further six to eight weeks before deliberate harm was first considered as a possible cause and protective action taken. The serious case review findings make 20 Recommendations to the LSCB and partner agencies.

Elias Serious Case Review

Baby Elias was approx. three and a half months old when he died as a result of physical abuse in July 2016. Elias was known to universal health professionals at the time of his death and the family's previous interaction with health and social care was some years earlier. The serious case review concluded those interactions could not predict the tragic outcome. The serious case review findings make 8 recommendations to the LSCB and partner agencies.



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

This section provides an update on progress over the last year in delivering improvements to Children's Services. This is in response to the report published by Ofsted in April 2017 which rated our services 'inadequate'.

The third and final stage of the improvement journey began in April 2018 with the aim of achieving at least a 'good' rating by the time of the next inspection.

The inspection took place in June 2019 and the result was that Children's Services in Tower Hamlets are now rated as GOOD. This outcome represents an improvement of two grades in the space of just over two years.

Leadership, management and governance - some key achievements

- Activities to ensure political leadership and knowledge of children's social care are firmly embedded and have included seminars for all members and training around children's safeguarding in partnership with the Local Children's Safeguarding Board for Overview and Scrutiny Committee members.
- A 'deep dive' exercise to review and refresh the improvement plan took place in June 2018 with the Local Safeguarding Children Board to focus on key priorities relating to the final stage of the improvement journey.

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

A robust model of social work practice - some key achievements

- Implementation and embedding of the new social work model 'Restorative Practice' has continued. The 'Big Restorative Practice Discussion', event was delivered with 300 staff from Children's Services attending as well as identified partners through the LSCB. Training has continued throughout 2018 and the scope has widened with the focus shifting to staff in early help services.
- The Edge of Care Service provides intervention to families where there are safeguarding concerns to help reduce the risk of children and young people coming into care. This service has been reviewed and it is proposed that the service will be extended to offer more support to children in care where the plan is for them to return home to their families.
- As part of Phase 2 of the redesign of Early Help multi-disciplinary professionals have been bought together in locality based teams and a 'single front door' has been implemented to ensure that the right families receive the right support in a timely way and that resources are properly targeted to areas of need. Alongside the development of Early Help pathways continue for schools, health services and youth justice.
- Following the implementation of a new Thresholds model there has been an increased proportion of children receiving assessment and services due to a referral by other agencies, demonstrating the improved understanding by agencies of the thresholds.
- The Through Care Service was launched facilitating closer links between this team, Children Looked After Teams and the Virtual School, the benefits of which can be seen in many ways including the development of Personal Education Plans. The Service supports young people in care from age 14 as they transition to adulthood and was launched following consultation with young people who felt that the transfer to the Leaving Care Service at aged 17 was not right for them.

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

A sufficient and skilled workforce - some key achievements

- A Social Work Academy was created in partnership with local universities to help establish stability within
 the workforce and reduce staff turnover. The academy was launched at an event in December 2018 with
 a vision to make Tower Hamlets an attractive place for professionals to seek and remain in employment.
- The implementation of the Sufficiency Strategy has been driving change and addressing the availability of suitable residential and foster care placements for looked after children.

Quality assurance and audit - some key achievements

- Auditing is now firmly embedded within overall management activity and continues to be used systematically to inform improvement work. This approach to audit activity helps to ensure that the progress made through the improvement journey becomes part of 'business as usual' for children's services.
- Practice weeks have continued where senior leaders spend time with frontline social workers reviewing
 their cases and shadowing their work with children and families in order to better understand their day to
 day experience.

Section Four Appendices

Appendix 1 – Membership List

Name	Job title
Alex Nelson Coordinator	Voluntary Sector Children & Youth Forum
Alexandra Law (Harry Roberts Nursery)	Nusery School Heads Forum Representative
Alice Smith	CAFCASS Representative (until Sept 2018)
Ann Corbett	Divisional Director, Community Safety - LBTH
Christine McInnes LBTH	Divisional Director, Education & Partnership -
Clare Hughes BHT	Lead Named Nurse for Safeguarding Children -
DCI Ingrid Cruickshank	Met Police Tower Hamlets
Debbie Jones	Corporate Director, Children's Services - LBTH
DI Jason Keen	MET Police - Child Abuse Team (until July 2018)
DI Jonathan Kent	MET Police - Child Abuse Team (from Aug 2018)
Emma Tuckmachi (Dr)	GP Representative Tower Hamlets CCG
Fiona Humphrey	Tower Hamlets Housing Forum
Frances O'Flynn	CAFCASS Representative (from Sept 2018)
Hanspeter Dorner	East London Foundation Trust, CAHMS

Name	Job title
Helen Jones (Dr)	GP Representative Tower Hamlets CCG (from Aug 2018)
Judy Coles	Primary School Heads Forum Representative
Julia Hale (Dr)	Designated Doctor, Barts Health NHS Trust (until Jan 2019)
Katie Cole	Public Health - LBTH
Layla Richards LBTH	Head of Children's Services Strategy and Policy -
Layla Alnakib (Dr)	Designated Doctor, Barts Health NHS Trust (from Jan 2019 onwards)
Lucie Butler	Director of Midwifery & Nursing (RLH), Barts Health NHS Trust
Lucy Marks	Chief Executive, Compass Wellbeing CIC (until Sept 2018)
Lynn Torpey	Designated Nurse for Safeguarding & LAC
Marion Reilly	Deputy Borough Director, Tower Hamlets - ELFT (from Sept 2018)
Nick Steward	Director of Student Services, Tower Hamlets College
Pauke Arrindell	Voluntary Sector Representative Home Start (until Sept 2018)

Appendix 1 – Membership List

Name	Job title
Rebecca Scott (Dr)	GP Representative Tower Hamlets CCG (until Aug 2018)
Richard Baldwin	Divisional Director, Children's Services - LBTH
Ronke Martins-Taylor	Divisional Director, Youth and Commissioning - LBTH
Ruth Walter	Director of Quality and Assurance - GP Care Group (from Sept 2018)
Sandjea Green	Head of Youth and Community Services - LBTH
Steven Ashley	Independent LSCB Chair
Stuart Webber	Head of Safeguarding Hackney, City of London & Tower Hamlets, National Probation Service
Tracey Upex	Deputy Borough Director, Tower Hamlets - ELFT (Until August 2018)

Appendix 2 – LSCB Performance Dataset 2018 – 19

A revised child-centred performance management process was implemented in 2017/18, which focused on the needs of the child and demands a much higher level of compliance with all recording standards. 2018/19 saw even more improvements that have made the data more robust.

Children in Need

The level of referrals into children's social care services per 10,000 of the children & young people population was maintained this year but at a higher level 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	2014/ 2015	2015/ 2016	2016/ 2017	2017/ 2018	2018/ 2019	England Average	Statistical Neighbours
LOCAL1	Referral rate per 10,000 of the children & young people (C&YP) population	443.2	514.4	394.5	767.7	776	552.5	624.7
APA SS6	Percentage of Referrals that were repeat referrals	10.7%	8.9%	13.7%	14.0%	20.3%	21.9%	16.7%
N07	Rate of assessments per 10,000 of the C&YP population	331.8	303.3	329.2	684.1	785.2	531.8	582.8
N14	Assessments completed within 45 days or less from point of referral (CIN Census methodology)	85.1%	87.1%	75.6%	74.1%	91.2%	82.7%	82.1%

Child Protection

There were high rates of activity in relation to formal child protection enquiries, with a high rate of formal enquiries (section 47s) but initial child protection case conferences and the rates of children subject to a child protection plan were in line with national averages. The proportion of child protection plans lasting over two years is showing a decline over the last five years and the proportion of 'repeat' child protection plans (where children become subject to child protection plans for a second or subsequent time) stabilised over the last three years and is lower 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 above both national and statistical neighbour averages. The proportion of children receiving a timely review of their child protection plan increased above the statistical neighbour average and well above national average

Source	Description	2014/ 2015	2015/ 2016	2016/ 2017	2017/ 2018	2018/ 2019	England Average	Statistical Neighbours
	Rate of Children Subject of a Child Protection Plan per 10,000 at 31 March	50.9	46.0	57.2	42.4	41.2	45.3	45.2
N08	Section 47 (child protection) enquiries rate per 10,000 C&YP population	162.9	192.4	163.6	193.4	195.6	166.9	188.5
N13	Initial Child Protection Case Conferences – rate per 10,000 C&YP population	62.3	57.1	67.4	73.5	71.8	67.0	64.4
N15	Initial Child Protection Case Conferences convened within 15 days from point Child Protection Strategy meeting held	57.9%	69.5%	63.0%	68.4%	94.3%	76.9%	69.8%
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.	11.4%	7.0%	5.6%	5.4%	3.1%	3.4%	4.0%
N18	Percentage of children becoming the subject of Child Protection Plan for a second or subsequent time	15.2%	19.3%	12.2%	11.9%	13.2%	20.2%	18.1%
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.	54.5%	51.0%	69.9%	94.9%	88.7%	N/A	N/A
NI 67	Percentage of Child Protection Reviews carried out within statutory timescale	95.3%	99.1%	91.2%	91.1%	99.4%	90.5%	95.3%
APA SS13	Percentage of children with CP plans who are not allocated to a Social Worker	0.0%	1.0%	0.0%	0.0%	0.0%	N/A	N/A

Looked After Children

The number of looked after children per 10,000 of children & young people population, at 48.1, was below the England and statistical neighbour average. Long term placement stability, an important factor in maintaining good levels of wellbeing, is above comparator group performance. Short term placement stability was worse than comparator groups and is at a higher level than over previous four years.

Local improved attention to, and recording of, children missing from care data has driven the significant increase in the percentage of children who went missing from care at some point during the year, and this increase is above national and statistical neighbour averages. There was increased participation in, and the timeliness of, Children Looked After reviews than the previous year. Health checks are in line with national averages whilst dental checks are significantly above national and above statistical neighbour averages.

Source	Description	2014/ 2015	2015/ 2016	2016/ 2017	2017/ 2018	2018/ 2019	England Average	Statistical Neighbours
	Rate of Children Looked After, per 10,000 as at 31st March	44.0	47.0	50.0	42.0	48.1	64.0	64.7
LACP01 (Formerly NI 62)	Percentage of CLA with three or more placements	12.0%	8%	13%	13%	15%	10%	11%
LACP02 (Formerly NI 63)	CLA under 16, looked after for 2.5 years or more and in the same placement for 2 years	78%	75%	73%	67%	71%	70%	67.1%
LACP04	The percentage of CLA who went missing from care during the year as a percentage of all children looked after during the year (new definition)	5%	15%	15%	15%	19%	10%	11.9%
PAF C63	CLA who participated in their review	92.4%	89.4%	86%	93%	97%	N/A	N/A
NI 66	CLA cases which were reviewed within required timescales	85.5%	65.0%	54.1%	81.1%	95.5%	N/A	N/A
APA SS(LAC)5	Percentage of CLA with a named Social Worker	99.3%	98.3%	99.1%	100%	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%	88%	88%	91%
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%	93%	84%	90%
PAF C19	Percentage of CLA >12 months who had an annual Health and Dental check	89.8%	83%	59%	82%	81%	n/a	n/a
PAF C19	Percentage of CLA>12 months whose Immunisations were up to date	88.2%	77%	70%	60%	69%	85%	87%

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	2014/ 2015	2015/ 2016	2016/ 2017	2017/ 2018	2018/ 2019	England Average	Statistical Neighbours
A08	Average length of care proceedings locally (weeks)	35	29	29	35	38	31	n/a

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	2014/ 2015	2015/ 2016	2016/ 2017	2017/ 2018	2018/ 2019	England Average	Statistical Neighbours
LACLC02 (Formerly NI 148)	The proportion of care leavers in education, employment or training (aged 19-21)	56%	58%	58%	59%	70%	51%	55%
LACLC03 (Formerly NI 147)	The proportion of care leavers in suitable accommodation (aged 19-21)	92%	94%	91%	91%	94%	84%	79.7%

Appendix 3 - LSCB Operational Board - Agency Representative Attendances for 2018 -19

Agency represented	Date of meeting			
	18.06.18	25.09.18	27.11.18	26.02.19
LSCB – Independent Chair				
LSCB Lead - Governance Manager				
LSCB Performance Analyst			/	/
LSCB Co-Ordinator (minute taker)				
Children's Social Care - LBTH				
Public Health - LBTH	Α			
Youth & Community Services - LBTH	Α		А	D
Youth and Commissioning - LBTH			А	Α
Education & Partnership - LBTH	А	А	D	Α
Community Safety - LBTH	D	D	Α	Α
Strategy Policy & Performance - LBTH		Α		
Primary School Head Forum				
CAFCASS	А	А	Α	А
Barts Health Trust	Α	D		Α
ELFT	D			D
ELFT - CAMHS	D	А		А
Tower Hamlets CCG			Α	
Tower Hamlets Housing Forum		А	Α	
Compass Wellbeing		А	/	/
National Probation Service	Α	А		Α

Agency represented	Date of meeting			
	18.06.18	25.09.18	27.11.18	26.02.19
Voluntary Sector Rep				
MET Police				
Tower Hamlets College/New City College	Α			

Кеу	
Attended	
Deputy attended	D
Apologies given	А
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

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