

# Tower Hamlets Safeguarding Children's Partnership

Annual Report 2019-2020



# Contents

Introduction .....	3
About Tower Hamlets .....	4
Data regarding Children and Young People.....	6
About the Partnership and Working Together to Safeguard Children .....	9
Implementing the Guidance within Tower Hamlets.....	10
Key differences between the LSCB and the THSCP .....	11
So .... What does that Actually Mean and Look Like? .....	12
Governance and Membership .....	12
Resources and Funding.....	14
Transition Period.....	16
Key Achievements .....	17
The Impact of the New Working Together Arrangements on Partners .....	18
How Partners Ensure the Voice of the Child or Young Person is at the Centre of their Work.....	19
Training and Development.....	22
Safeguarding Month November 2019 .....	23
How Partners have Assured Multi-Agency Working through Learning and Development .....	24
The Local Authority Designated Officer .....	26
Serious Case Reviews/ Local Learning Reviews .....	27
Child Death Overview Panel (CDOP) – Child Death Review (CDR) .....	29
Next Phase and Key Focus.....	30

## Introduction from the Independent Scrutineer,



I am pleased to introduce the Annual Report for the Children’s Safeguarding Partnership, which covers the period April 2019 to March 2020. This has been a time of change for the partnership, with the former Tower Hamlets Local Safeguarding Children’s Board (THSCB) being replaced by the new Children’s Safeguarding Partnership (THSCP). The report explains why and how this change has been made – this is in response to a new Act of Parliament which has the core aim of strengthening the partnership between the three Statutory partners – the Council, the Health economy locally and the Metropolitan Police. You will see from the report that the Borough has decided to extend this core Statutory partnership to include Public Health and the local education and schools’ sector. The partnership is much wider than that, though, with a range of other, very

important, partners which includes the voluntary and independent providers. The most important partners, however, in this new safeguarding configuration are the children and the young people in the Borough, their families and their communities.

My role is a new and very different one from anything that has gone before. I am tasked by the partners to act as a critical friend, to ensure that all the various voices in the Borough are heard, that decisions are made fairly and inclusively and that the needs of the children and young people in the Borough are at the front of all our thinking and planning. I am overseeing the collection and the use of information and data through my chairing of the Quality Assurance and Performance Group. We are all learning how this new system will work in practice. The partners are fully committed to the task and will be seeking to make Tower Hamlets a Borough where children and young people are valued, have great opportunities and are safe.

The new structure and reporting arrangements for the partnership are deliberately slim – the partners are committed to responding quickly to changes and to avoiding any unnecessary bureaucracy. This report covers the period when the Covid-19 crisis first started, with the country going into “lockdown” just at the end of the time covered. Partners have had to learn to act very swiftly indeed in order to keep children and young people safe in potentially very unsafe times. They have responded brilliantly to this threat, with the safeguarding partnership offering one of the mechanisms for partners to rapidly identify, analyse and respond to the new challenges posed by the pandemic. There are valuable lessons from this, which will help to shape and inform how services are arranged and monitored in the future.

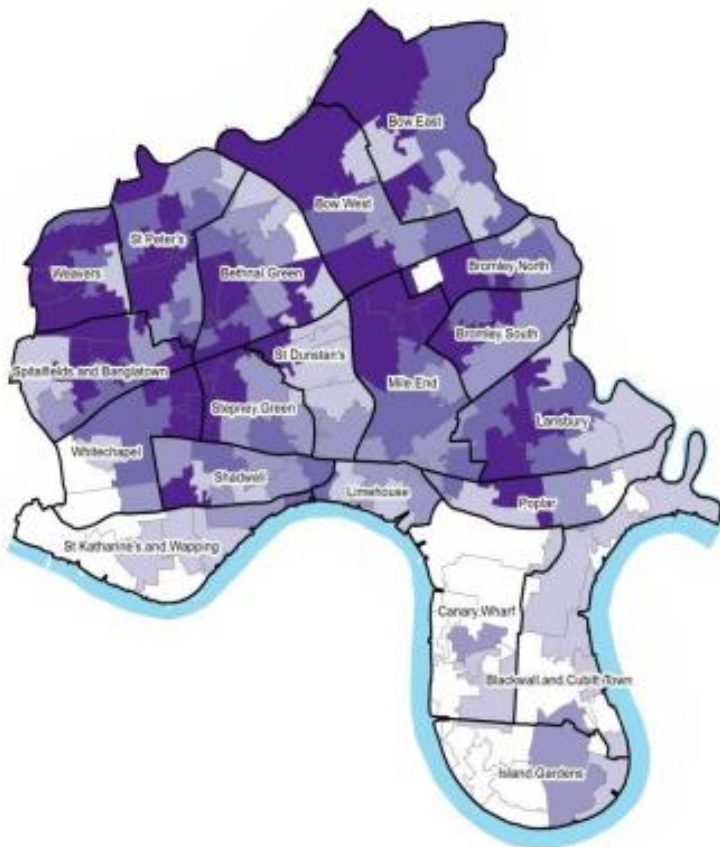
Tower Hamlets is a great Borough, full of energy and with a real commitment to making it a great place for children and young people to live and to thrive and to achieve their dreams. I look forward to working with you all, right across this complex and varied landscape of safeguarding.

A handwritten signature in blue ink that reads "Keith Makin". The signature is stylized and includes a long horizontal flourish at the end.

Keith Makin,

Independent Scrutineer – Tower Hamlet’s Safeguarding Children’s Partnership

## About Tower Hamlets



### Housing

- The council has the 7th highest waiting list nationally. There are 18,808 households on the council's housing waiting list.
- BME households account for 78% of all households on the housing register.
- In March 2019, there were 2,529 households in temporary accommodation, of which half are placed in accommodation outside of the borough.
- In 2018/19 375 people were seen rough sleeping in the borough. People seen rough sleeping are predominately male (88%) and are UK nationals (66%)
- Estimation that 39% of housing in Tower Hamlets is now privately rented.

### Education

- There are an estimated 78,000 children and young people aged 0- 19 in Tower Hamlets, a quarter of all residents.
- There are 45,000 pupils in primary and secondary schools in the borough.
- There are 163 languages spoken by pupils in our schools. 70 per cent of pupils do not speak English as a first language. Predominantly these students are Bengali speakers, reflecting the 61per cent of all students who are of Bangladeshi ethnicity.
- Children and young people whose first language is not English have higher attainment than pupils whose first language is English at all stages.
- Children and young people who are entitled to and receiving Free School Meals have lower attainment at all stages than children who do not.
- The most common career aspiration amongst school pupils is a professional career (47%).

### Poverty

- Tower Hamlets became significantly less deprived between the 2015 and the 2019 Indices of Multiple Deprivation, moving from 10th to 50th on the rank nationally but 60% of the borough still within the 30% most deprived parts of England.
- Deprivation among children and older people is much higher than deprivation as a whole.
- Other data, such as children in low income families continues to show a very high extent of poverty in the local population.



## Environment

- The borough has a rich and historical environment, with more than 200 parks and open spaces.
- The borough's high level of economic output contributes to it producing the 3rd highest level of CO2 emissions in London. CO2 emissions have fallen but not sufficiently quickly, so Tower Hamlets declared a climate emergency in March 2019
- Tower Hamlets residents have a high level of concern about environmental issues with dirt, air pollution, traffic congestion and lack of parks among those concerns.

## Economy

- In 2017 Tower Hamlets economic output was £29.7bn
  - Nearly 300,000 jobs in the borough
  - Greater than the working age population and continuing to rise.
  - Finance and Insurance makes up 22% of all jobs, but this figure has fallen by 4% (or 6,000 jobs) since 2015.
- Most jobs (86%) are filled by non-residents.

## Crime

- Between December 2015 and December 2019 there was a 39% rise in sexual offences
- Crime in Tower Hamlets has risen in recent years but less rapidly than in London as a whole. In December 2019 there were 35,118 notifiable offences, a 4.2% increase since 2016, compared to the 16% increase in the London as a whole.
- 86% of residents say they feel safe in the area during the day and 58% feel safe at night.
- Tower Hamlets has the 5th highest rate of domestic violence offences in London.

Within youth crime there has been improvements:

- Reoffending Rate: 34%
- First-time entrants rate per 100,00 of the local youth population: 404
- Custody rate per 1,000 of the local youth population: 0.32

## Employment

- During 2016-19, 67% of Tower Hamlets working age population were in employment.
- 86% of residents with a higher-level qualification are in employment compared to just one third of those with no qualifications in the borough.
- Those with no qualifications have a lower employment rate in Tower Hamlets compared to London and Great Britain.
- Residents in the borough working full time earn higher than those in London. Over half of the jobs based in Tower Hamlets are in the financial, professional and technical sectors, while just one third of resident are employed in these sectors (34%).

The number of Claimant count (out of work benefits) is higher in Tower Hamlets than London or Great Britain

## Health

- In 2016-18, life expectancy for men in Tower Hamlets was the same as in the UK, while for women it was slightly higher than the UK average. However, healthy life expectancy was below the national average, with a particularly large gap for

## Population

women.

- Babies in Tower Hamlets were more likely to be born with a low birth weight than in England or London, but mothers were less likely to be smokers.
- The infant mortality rate was higher than the national or regional average.
- MMR vaccination coverage was good by London standards but below average for England.
- Children in Tower Hamlets were more likely to be overweight or obese at year 6 than in London or England.
- Prevalence of TB has reduced but remains more than twice the England average.

- ONS estimated the borough's population in 2019 as 324 745 Tower Hamlets has experienced the fastest growing population nationally.
- Tower Hamlets is the UK It is the second most densely populated local authority area.
- 2018 there were around 4 504 live births in Tower Hamlets.
- Over the last five years there has been an increase in the number of deaths in the borough

## Data regarding Children and Young People

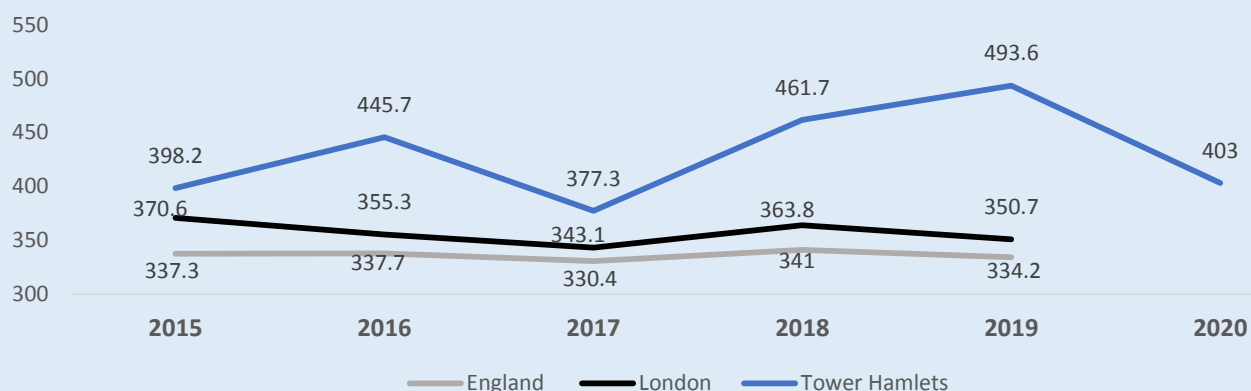
Tower Hamlets has a high proportion of children in need when compared with England and London. The number of children identified as being in need has risen considerably since 2017.

Neglect is the most common form of abuse for children in receipt of a child protection plan.

The proportion of children who are being looked after by the local authority is below the national and regional average, but the number of children has risen in recent years. The main reasons for children entering care in the year 2020 are abuse or neglect (51%) and absent parenting (25%). The majority of children in care (70 per cent) are in foster care but a significant proportion (14 per cent) are placed in the community, while 9 per cent are in children's homes, secure units or hostels

### Children in Need 2015-2020

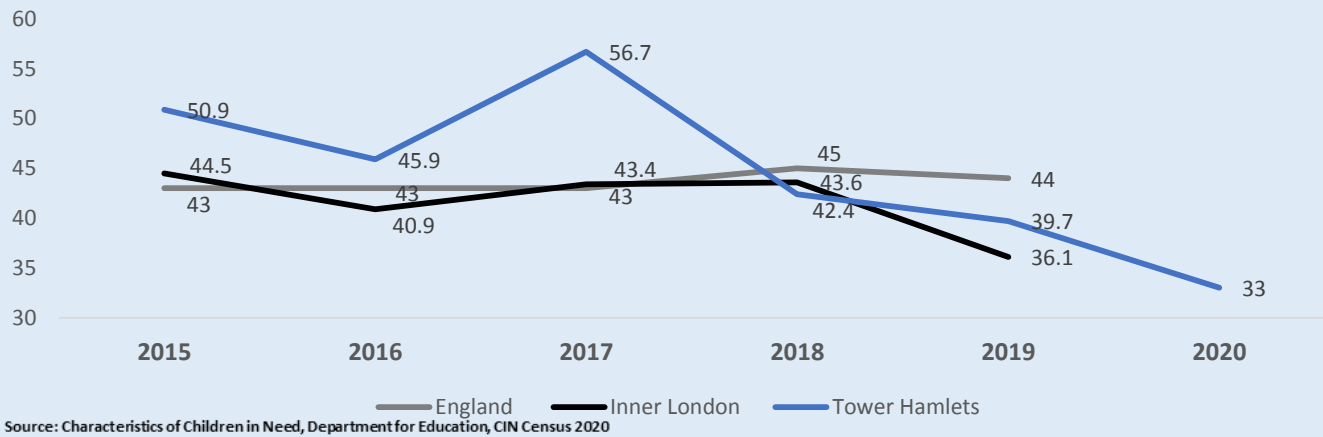
Rate of children in need per 10,000 children as at 31st March each year, 2015-2020



In March 2020 there were 2,860 children in need in Tower Hamlets, a decrease of 643 in a year or a rate of 403 per 10,000 children which is above both the 2019 national and London rate. In 2019, Tower Hamlets had the 3rd highest rate in London (after Islington and Hammersmith and Fulham).

### Child Protection Plans 2015-2020

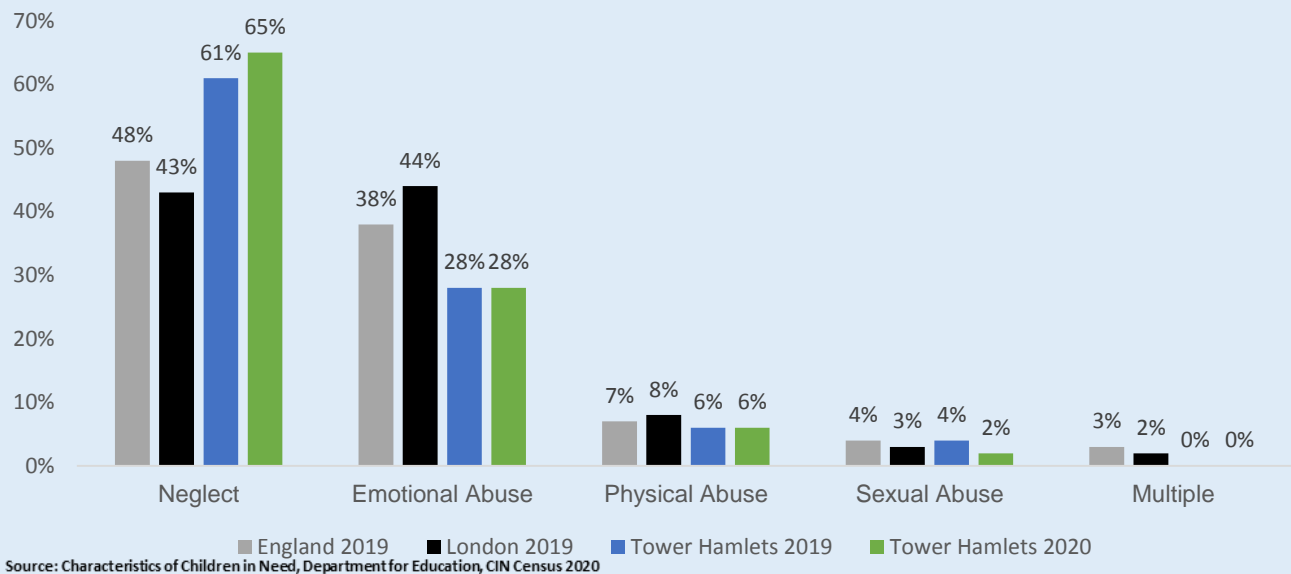
### Rate of children subject to a child protection plan per 10,000 children as at 31 March each year



In March 2020, there were 235 children with child protection plans in the borough, a fall of 47(17 per cent) between 2019 and 2020. This is a rate of 33 children subject to a plan per 10,000 children. Tower Hamlets had the 9th highest rate in London in the year 2019.

### Child Protection Plans (2)

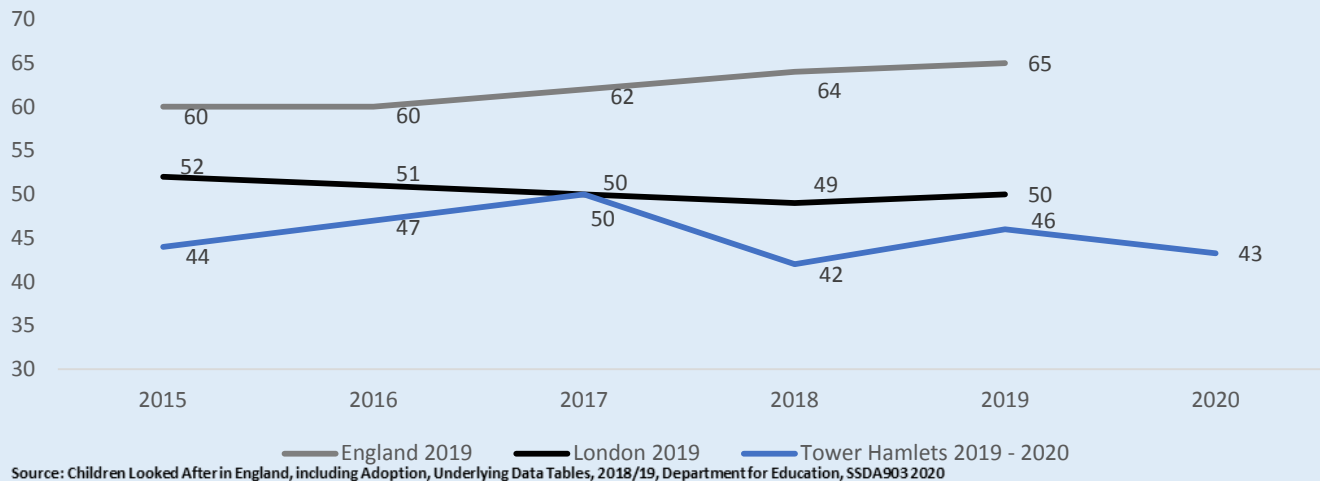
#### Proportion of children subject to a child protection plan as at 31 March, by category of abuse



Most common reason for being subject to a child protection plan in Tower Hamlets in 2020 was neglect (65 per cent). Higher proportion of children are subject to child protection as a result of neglect than in London or England, while a lower proportion are subject to a child protection plan as a result of emotional abuse. Just under a quarter of plans (20 per cent) were second or subsequent plans.

### Looked After Children

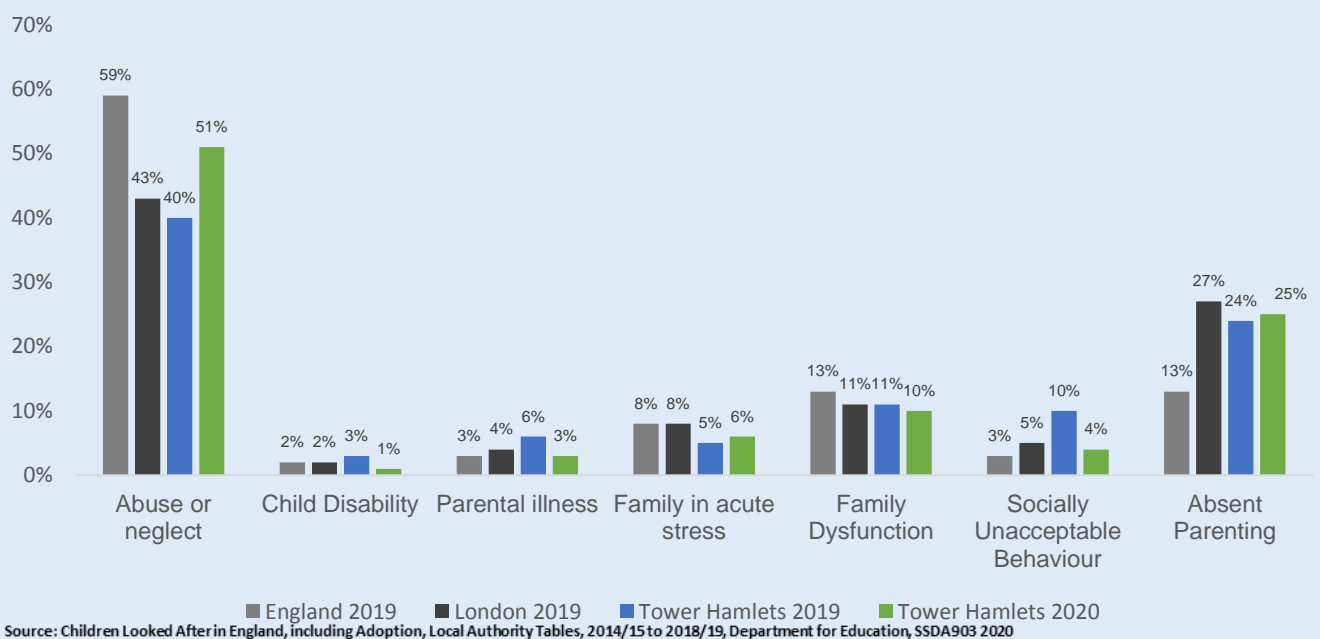
### Rate of Looked After Children per 10,000 Children as at March 31st each year, 2015 to 2020



In March 2020 there were 307 children being looked after by Tower Hamlets. This was a rate of 43 per 10,000 children. This was below the 2019 London average of 50 per 10,000 children and well below the 2019 England average of 65 per 10,000 children. The number of looked after children in 2020 for Tower Hamlets was about 7 per cent lower than in 2019 (22 children less).

### Children Looked after by Category of Need

#### Children Looked After By Category of Need

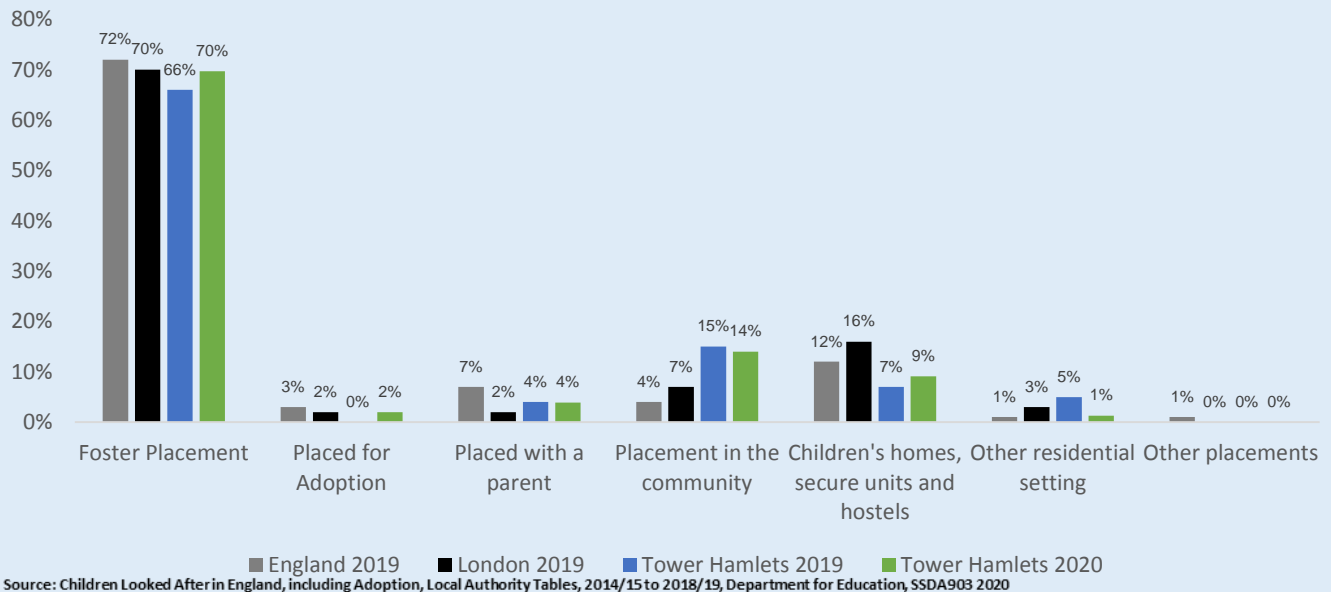


By far the most common reason for children entering care in 2020 was abuse or neglect (51 percent), although this was below the 2019 national average. Children in Tower Hamlets were more likely to enter care as a result of absent parenting compared with the 2019 national average of 13 per cent.

### Looked After Children

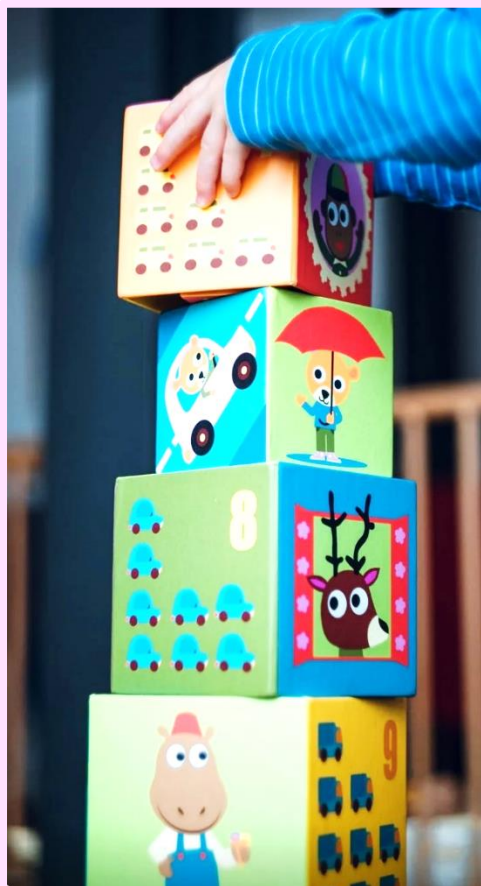


## Looked After Children as at 31 March, by Placement



70 per cent of children in 2020 were in foster placements, but this is just below the 2019 average for England. Tower Hamlets has a significantly higher proportion of children placed within community settings and fewer children placed in children's homes, secure units and hostels than London or England.

## About the Partnership and Working Together to Safeguard Children



In April 2006, Tower Hamlets Local Safeguarding Children's Board (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.

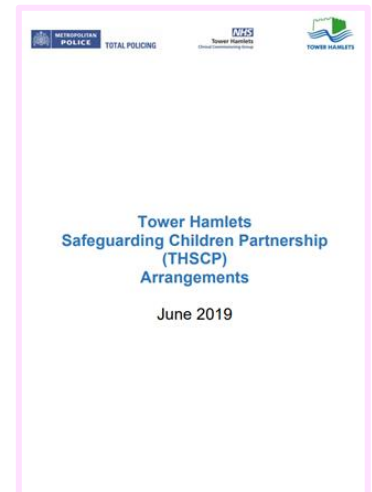
In April 2017, the Children and Social Work Act received Royal Assent, which abolished LSCBs and all sections of the Children Act 2004 that relate to it. The Department of Education published the revised Working Together to Safeguard Children Guidance in July 2018, which sets out what organisations and agencies, who 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 had up to 12 months, from 29 June 2018, to agree their local arrangements and to decide which relevant agencies they consider appropriate to work with them to safeguard and promote the welfare of children in their area.

The Tower Hamlets Safeguarding Children Partnership (THSCP) has been developed by the statutory partners in collaboration with 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.

Tower Hamlets LSCB was required to:

- June 2019 – Publish its proposed new safeguarding arrangements;
- Sept 2019 – New arrangement and child death review systems to be operational;
- March 2020 – Transition period ended, and new safeguarding arrangement fully implemented.



Click on image to view the full Arrangements

## Implementing the Guidance within Tower Hamlets

As the LSCB ceased to exist, the Tower Hamlets Safeguarding Partnership (THSCP) set out a new vision. Building on an established track record of partnership working, the vision is that the THSCP will be characterised as follows:

- There will be a focus on the voice, experiences and intrinsic and extrinsic needs, contexts and requirements of children, young people, their families and wider communities;
- There will be a focus on tangible, positive outcomes for children and their families;
- Decisive strategic leadership, challenge accountability and transparency from the Statutory Partners;
- The THSCP will be supported by a responsive partnership of Relevant agencies with the whole system supported and challenged by the Independent Scrutineer and informed by the Voice of the Child
- The Statutory Partners, Relevant Agencies and other local partners will be committed to the vision outlined above and to the wider safeguarding needs of children and young people promoting their welfare. This commitment will be evident in their contribution to the work of the partnership and outputs including learning and recommendations.

This will result in:

- Effective and consistent engagement by senior strategic leaders, who can influence safeguarding in their individual agencies.

- Effective and collaborative working relationships supported by shared approaches to driving quality and improvement
- Effective collaboration of partners and Relevant Agencies at both strategic and operational levels with timely self-assessment and audits against Section 11 compliance, learning events and action planning
- Substantial and impactful participation by the voluntary sector and lay/co-opted members to help the THSCP deliver its functions within a vibrant and ever-changing local multicultural context.
- A strong culture of accountability and challenge driven by the Independent Scrutineer and Statutory Partners that results in increased understanding across the partnership and measurable improvements in the quality of practice.

Click on the images below to view: 1. The full Working Together to Safeguard Children – Statutory Framework, 2. Young Person’s Guide to Working Together to Safeguard Children. 3. Younger Person’s Guide to Keeping Children Safe. 4. Working Together Transitional Guidance.



## Key differences between the LSCB and the THSCP

Within the legislation there are many changes but two major differences are:

Police, CCG and Local Authority are now equally responsible for the partnership and its outcomes;

No requirement for board meetings or for an Independent Chair, instead THSCP have chosen to appoint an Independent Scrutineer who is involved in many aspects of the work, to ensure the partnership is working in the best way to deliver better outcomes for children and young people.

## So .... What does that Actually Mean and Look Like?



A fluid structure – therefore more flexible and agile, responding quickly to issues.



Changes in the Coordinator and Manager Job Descriptions to provide better support to the partnership;



Previous good working relationships enhanced through the partnership;



**LESS MEETINGS AND MORE OUTCOMES!**

## What we will still do but in a slightly different way...



Scrutinise the policy and practice and give the best outcomes



Set priorities for the partnership improvements in those areas



Continue to review any cases when needed;



Provide multi agency training



Be a platform for partnerships



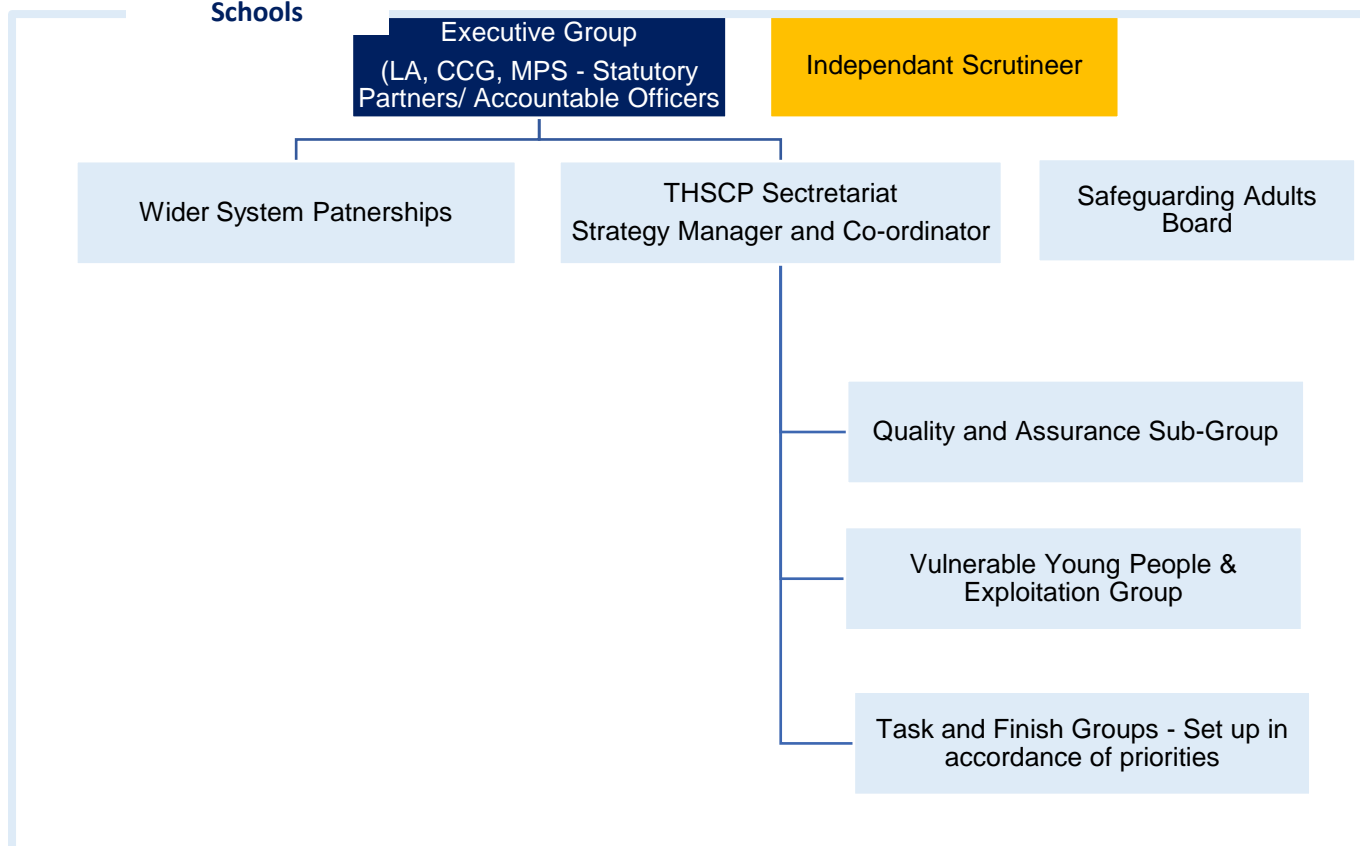
## Governance and Membership

Within the new arrangements the statutory partners are responsible for the safeguarding partnership and its activities.

In the previous set up the partnership held quarterly board meetings with most partners in attendance, now

the system is a small Executive Group where items are escalated and authorised.

Multiple sub-groups and task and finish groups are set up where systemic changes are made quickly and efficiently. The membership of these groups' changes dependant on the work and topic of the work so partners spent less time in unrelated meetings. Each partner contributes to the outcomes and takes a lead on various workstreams. Below is the chart of the current structure of the partr  
**TH Nursery**  
**Schools** der the new arrangements.



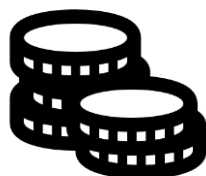
The full list of the THSCP membership:

Key		RA	Relevant Agency Partner
A	Advisor	S	THSCP Secretariat
C	Co-opted (lay members)	SP	Statutory Partner
PO	Participant Observer	V	Voting
Full Membership			
A V	Independent Scrutineer		
SP V	Statutory Member – LBTH		
SP V	Statutory Member – TH CCG		
SP V	Statutory Member – MPS BCU		
RA V	Barts Health NHS Trust – Board level Safeguarding Lead		
RA V	East London Foundation Trust – Board Level Safeguarding Lead		
RA V	THEP		
RA V	Relevant Agencies		
	<ul style="list-style-type: none"> <li>• Schools, colleges and other educational providers</li> <li>• Housing – a representative from Registered Social Landlords and Housing Associations and Tower Hamlets Housing</li> <li>• Youth Justice/ Probation (including National Probation and CRC Probation)</li> </ul>		



	<ul style="list-style-type: none"> <li>• Voluntary Sector Organisations represented by the Tower Hamlets Voluntary and Community Sector</li> <li>• GP CARE Group</li> </ul>
<b>A V</b>	Voice of the Child Representative (potentially facilitated via third sector)
<b>RA V</b>	Divisional Director of Children’s Social Care
<b>RA V</b>	Divisional Director of Education
<b>RA V</b>	Director of Public Health Tower Hamlets
<b>RA V</b>	Safeguarding Adults Manager
<b>RA V</b>	LBTH Housing Manager
<b>RA V</b>	Head Teacher Primary School Rep of Governing Body of a Maintained School
<b>RA V</b>	Special Schools representative
<b>RA V</b>	Maintained secondary school forum representative
<b>RA V</b>	Maintained Primary School forum representative
<b>RA V</b>	Representative of the proprietor of a city technology college, a city college for technology or the arts, or an academy
<b>RA V</b>	Independent Sector School
<b>RA V</b>	Registered Social Landlord
<b>RA</b>	Tower Hamlets Council Lead Member Children, Schools and Young People – Non-voting
<b>RA</b>	Designated Doctor for Child Protection, Tower Hamlets CCG – Non-voting
<b>RA</b>	Designated Nurse Safeguarding, Tower Hamlets Clinical Commissioning Group – Non-voting
<b>RA</b>	Principal Social Worker – Non-voting
<b>RA</b>	Consultant Child and Adolescent Psychiatrist, ELFT
<b>A</b>	LBTH Head of Strategy and Policy – Non-voting
<b>S</b>	THSCP Strategy Manager – Non-voting
<b>S</b>	THSCP Co-Ordinator – Non-voting
<b>C</b>	Lay representatives in addition to core membership

## Resources and Funding



During this period the partnership was undergoing many changes of not just legislation but governance and staffing. The spend during this period is reflective of the transition and the costs that are attached to this. The main contributors to the partnership remain the LBTH Directorate and the Clinical Commissioning Group. The main costs to the partnership are multi-agency training, and commissioned reviews.

Contributions		Spend	
Clinical Commissioning Group	£30,000	Salaries and on costs	£107,000
TH Council	£122,000	LSCB Independent Chair (Apr-June)	£8,618
Metropolitan Police	£5000	THSCP Transitions Commissioner	£8,700
BARTS Health NHS	£3000	Total Recruitment Costs	£4365

East London Foundation	£2500	Venue and Hospitality	£460
CAFCASS	£550	External Comms Support	£4000
London Fire Brigade	£500	Thematic Review	£30,000
National Probation Services	£1000	Inter-Agency Training	£30,000
		Serous Case Reviews (continued work from previous year)	£5,307
		Software purchase	£83
<b>Sub-Total</b>	£164,550	<b>Total Spend</b>	<b>£198,533</b>
		<b>Overspend</b>	<b>£33,983</b>

## Transition Period

**Quarter 1:** The vision for the new Tower Hamlets Safeguarding Children Partnership (THSCP) was that the three Statutory Partners (Local Authority, NHS CCG and Metropolitan Police Base Command Unit), the wider Relevant Agencies in the local system, community and voluntary sector and community, worked 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 new statutory partners facilitated operational groups where there was a wider engagement plan with all the partners to bring in the new arrangements and implement them. The consultation process continued throughout the year.

**Quarter 2:** The recruitment of the Independent Scrutineer took place in June 2019, and it was agreed that the role was different to that of the Chair and was to support, challenge and mentor the new partnership. The new proposals for the partnership were agreed and began to be tested with partners.

The arrangements for the new Tower Hamlets Safeguarding Children Partnership were finalised and published in June 2019, alongside new processes for the Child Death Overview Panel and an Independent Scrutineer was been appointed.

**Quarter 3:** The THSCP was officially launched in September 2019. The partnership established an Executive Leadership group comprising of three senior lead representatives; the Corporate Director for Children's Social Care, Director of Equality at the CCG and the Borough Commander to ensure that the safeguarding system is working appropriately.

The Independent Scrutineer continued in his work with a focus on the 'voice of the child' and with plans of meeting with services in exploring better effective mechanisms for hearing and feeding back the voice of the child. Discussions were held to explore how partners can work together across agencies to best address key issues; Domestic Violence and Abuse (DVA) was identified as a priority area.

**Quarter 4:** The Tower Hamlets Safeguarding Children Partnership completed its transition from the LSCB. The structure and terms of reference for the groups were agreed, including the Executive Leadership Group, Quality Assurance and Performance Monitoring Subgroup and Vulnerable Young People Sub-Group. This ensured that there is quality governance and that the subgroups, which consist of a wide variety of agencies and partners, can carry out the work to improve multi-agency practice. During this period, partnerships groups were held to finalise the actions required for two Serious Case Reviews (SCRs). SCRs take place after a child dies or is seriously injured and abuse or neglect is thought to be involved. It looks at lessons that can help prevent similar incidents from happening in the future.

A recruitment process was held for the new Partnership and Strategy Manager and the post was appointed to in February. Towards the end of March, a risk management group was established

between the partners to ensure they are responding quickly to any risks regarding the pandemic of Covid 19.

## Key Achievements

In addition to the transition, work continued across the council to support our vulnerable children and young people.

### Improving the Education Offer

The Virtual School and Education Safeguarding Service were reorganised to create an engaging Virtual School offer for all ages. Following the reorganisation of the Virtual School, the partners



continued to embed a focus on improving outcomes for all vulnerable children through the facilitation and delivery of bespoke safeguarding training to schools and education settings at request and where the need is identified. Additionally, termly Designated Safeguarding Leads for Schools and Education Settings Forum meetings organised and facilitated. A new education worker was engaged who is supporting our work with young offenders.

### Domestic Violence and Abuse Training

A Domestic Violence and Abuse training summit was held with key and have additionally ensured that regular Domestic Violence and Abuse training is offered as part of our commitment to learning and development.

### Thematic Review

A thematic review named 'Troubled Lives, Tragic Consequences' took place in 2014-2015 which reviewed older children who had committed serious offences or were victims of serious harm. The aim was to understand common themes in the lives of these older children, relating to system practice and academic research. Within Quarter 4 the reviewer was re-commissioned to audit and review new cases. The reviewer has additionally been tasked with discussing the lessons learnt from the previous cases and how this has been embedded into practice with frontline practitioners. Work began on this during 2019 and expects to be published in 2020.

### Independent Inquiry into Child Sexual Abuse

The Home Secretary established the Independent Inquiry into Child Sexual Abuse to consider whether public bodies and other non-state institutions have taken seriously their duty of care to protect children from sexual abuse. The Safeguarding Partnership was instructed to provide a statement outlining many areas of work connected to child sexual abuse within Tower Hamlets. The local authority, clinical commissioning group and the police work together with their retrospective legal teams to produce the statement over the course of January.



## The Impact of the New Working Together Arrangements on Partners

*“Rapid reviews are in place and opportunity to implement learning quickly into system. Plan in place for overarching Child Death Overview Panel across Waltham Forest, Newham, Tower Hamlets, City & Hackney and opportunity to draw more learning which can help with Multi-Agency responses. Health and police are equally responsible with Local Authority for safeguarding arrangements” – **Clinical Commissioning Group***

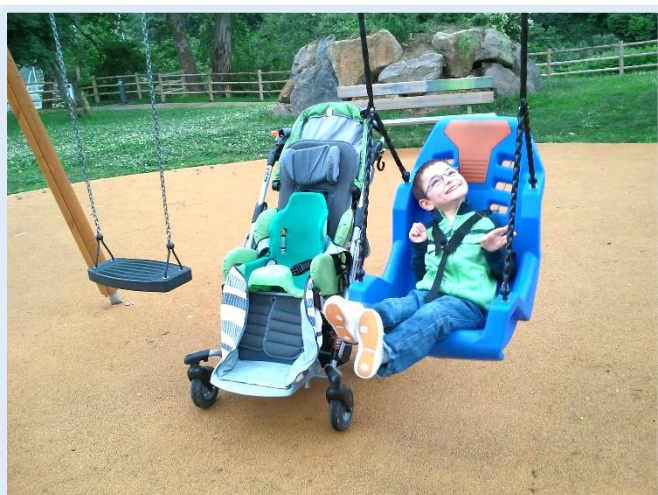
*“The Community Safety Team covers a wide range of services, the new arrangements have influenced many areas including but not limited to, Violence Against Women and Girls, (VAWG), where the team is now embedded within the Children and Families Plan. The VAWG Team also has a Domestic Violence Caseworker co-located within the Multi-Agency Safeguarding Hub Team to improve partnership working to ensure victims needs are delivered. The team have implemented Young People’s Question Time provides accountability to young people and looks to use their views to influence strategic decisions on safeguarding and feelings of safety in Tower Hamlets. There have been changes with trauma informed approaches, a dedicated ‘hidden harm’ worker and neighbourhood operations with day-to-day contact with young people resulted in a front-facing service that not only enforces but also safeguards.” – **Community Safety***

*“For Child Protection conferences we now*

*refer to them as Restorative Child Protection Conferences with a significant focus on the Child Protection Chair meeting with the child and parents in advance of the conference to ensure they understand the purpose and the process. Within Child Protection Plans there is a focus on what the impact of neglect / abuse on the child and what needs to happen in order to reduce the harm to the child. The CP plan is an specific focus on what needs to be done to impact positively upon the child; child centred, outcome based plans with a set timeframe and a name person responsible. – **Children’s Social Care***

*“Within the new arrangements in place our priority for Reset Recovery Support Service and Treatment services would be to further improve the relationship between substance misuse services and the various safeguarding services. This would give us the opportunity to offer a more balanced wrap around care package to all our service users and to ensure that we can do so in the safest way possible. This will allow for information sharing to be more transparent and to gain a better understanding on the cases that have multiple agencies working together in achieving the same goal.” – **Drug and Alcohol Services Commissioning Team***

*“The impact has been very positive, and this has been recognised by students and parents who feel safe coming into college. The college continue to review Safeguarding policies and procedures annually. Risks assessments are completed annually for new students with additional needs. The college continue to work closely with the partners in the Borough of Tower Hamlets, parents, Ofsted and other government organisation to maintain high standards and ensure students are safe.” – **New City Collage***





*“The new arrangements are difficult to assess within the current COVID environment. There are less meetings which is beneficial however it has been hard to track what the priorities are and what we are working towards as a partnership.” – Metropolitan Police*

*The Youth Justice Service is multi-agency by nature and has Police and health as statutory partners. As such, the new Working Together arrangements including Police and Health rather than just the Local Authority will be more holistic and the combined three core agencies will have more of a joint understanding of the nature of the Youth Justice Service. - Youth Justice*

*The main impact the new arrangements has had on the service is staff being aware of the guidance around those in position of trust, being familiar and keeping up to date with policies and procedures. Within March 2020 lockdown was announced, it has meant that services have had to adapt delivery from a predominantly front facing service to an on-line service. Local guidance has been produced to assist and support staff in this new era of youth work delivery. There have been more discussions and queries between practitioners and managers on safeguarding topics. As for future impact there is a shift towards having a team around a family approach that encourages safeguarding for the whole family as opposed to just the child. – Youth Services*

## How Partners Ensure the Voice of the Child or Young Person is at the Centre of their Work

Central to the development of the new system is the need to ensure that the Voice of the Child is at the centre of the structures and informs both the planning and delivery of all of the service functions needed to deliver a comprehensive approach to child protection and the wider safeguarding agenda. Tower Hamlets is well served with a rich



range of youth engagement structures. These include the Youth Parliament and Young Mayor, the Youth Engagement Squad at Barts Health, the Healthwatch Young Influencers, the Children in Care Council and service level user experience groups across the Born Well, Growing Well life course. Going forward there are many developments in place to ensure that the voice of the young person/ child is at the core of all our activity. Partners are asked to ensure this is continuously reflected in their practice.

*“The Clinical Commissioning Group ensures this through a competent trained workforce and a supervision model, which focuses on the child’s voice, and think family approach using a restorative practice framework. We ensure that the voice of the child is captured at all stages of the commissioning cycle, so that the views and opinions of children and young people inform service reviews, planning, development, delivery and evaluation, as well as listening to the their own individual circumstances via direct service experience feedback. We meet with Children and Young People at the children in care council and corporate parenting boards, receive and respond to CYP feedback from our multiagency partners. Child and Adolescent Mental Health Services (CAMHS) do a lot of work with young people and parents through well-established participation groups. The CCG and CAMHS also did bespoke co-production projects with the Healthwatch young influencers to shape the offer of the mental health in schools service, also considering safeguarding with regards to self-referrals and parental involvement.” –*

**Clinical Commissioning Group**

*“The Community Safety Team covers a wide range of multi-agency Services including but not limited to Prevent, Violence Against Women and Girls and Neighbourhood Operations. Within all strands the teams are dedicated to the child and young people’s voices are at the core. This demonstrated through a dedicated youth engagement officer whose role is to capture the views of young people to influence Prevent delivery and the VAWG Delivery Plan and Strategy. This includes work to further support children, such as projects on Adverse Childhood Experiences, Reducing Parental Conflict, Positive Change Programme which works directly with parents and children affected by Domestic Abuse. The Neighbourhood Management Pilot has a very strong focus on safeguarding young people through the work*

*conducted in schools, raising awareness of criminal gangs, grooming younger people into crime and how they can seek support. It allows for the service to take on the views of young people on how best to engage and support our local young people.” –*

**Community Safety**

*“During Child Protection Conferences and Children Looked After Reviews – the voice of the child is ESSENTIAL in all the meetings and recordings of meeting for Child Protection and Children Looked After. Each Child Protection Chair and Independent Reviewing Officer ensure that any record of a meeting held has to have the voice of the child recorded, there has to be a sense of the child in the work they do and there has to be evidence that each child has been contacted in advance of their meeting in order to plan for how they would like their meeting to look like, who they want to attend etc. Children and Young People can access the use of advocates and the take up of this is increasing in child protection conferences. The Independent Reviewing Officer takes a vital role of arranging meetings with Children who are Looked After”. -*

**Children’s Social Care**

*“The police work closely with other agencies regarding ensuring the best outcome for vulnerable children. Within the police we have Domestic Abuse Champions on all response teams that are aware of the importance of capturing the Voice of the Child. In addition, there is structure follow up in secondary supervision to ensure that the voice of the child is captured. This practice is reflected in missing children, exploitation and the indecent image team. The officers are on a journey with capturing this information”. –*

**Metropolitan Police**

*“We offer family support by working with parents, children and families of those who are struggling with substance misuse issues. Specifically, to children, we offer a*

programme; *Moving Parents and Children Together* which focuses on the relationships between children and parents who misuse substances. This programme has been successfully rolled out within our service multiple times and has always received great feedback and excellent attendance from the participants. This offers an opportunity to engage with families and their children to improve their relationships, increase their quality of lives as well as safeguard and offer the support needed to encourage honest and transparent relationships. An advantage to this course is creating a safe space to discuss the impact of addiction openly and appropriately and how this affects the children's' lives. The relationship built with families allows us to signpost and refer to other services that may be able to offer additional support for these children. – **Drug and Alcohol Commissioning Team**

“Our role is to support schools to get the best outcomes for children. In this sense the needs of children are at the heart of our work with schools. Our main priority is educational outcomes but our risk assessment, as part of our monitoring role, includes a focus on their wellbeing through monitoring safeguarding concerns, complaints, attendance and exclusions.” – **The Education Partnership**

At New City College, Tower Hamlets campus, we have a named experienced Designated Safeguarding Lead and a team of 11 Safeguarding Officers who have expertise in safeguarding young people. The team is experienced in supporting young people with SEND, 14-16 learners and 16-18 learners from a variety of socio-economic backgrounds. The team works closely with Children's Services, individual social workers, Children and Adolescents Mental Health Services in order to support young people and share good practice in Safeguarding young people and vulnerable adults. The team has led on Mental Health Awareness

events across the College and has a wide range of PREVENT resources and activities which cover both radicalisation and British Values. During the COVID 19 Lockdown the Safeguarding team is working hard to ensure learners stays safe online and that they have access to Safeguarding Officers and advice, support and guidance. – **New City College**

“The assessment tool used by the Youth Justice Service, “Asset plus”, has a self-assessment questionnaire to be completed by the child/young person so that their views are recorded. The child/young person is encouraged to complete their intervention plan with their YJS practitioner and set their own realistic, smart goals. In initial assessment reports (Referral Order and/or Pre-Sentence), the child/young person is asked to give their own account of their offence and their views are recorded.” – **Youth Justice Service**

The youth service has a weekly youth council meeting that comprises of a young mayor, 5 deputies with specific remits to work with services across the council and council members. Further to this, we hold a weekly Children in Care Council meeting. The primary role of these meetings is to ensure young people's thoughts, ideas and voices are heard that influence and shape the work of the youth service and other services across the council. More locally in youth hubs, a broad cross section of young people take part in local youth boards where they are encouraged to exercise choice and to take ownership of the Youth Service by raising queries, discussing and being consulted on service delivery and budget management, scrutinising and contributing to the design and implementation of the youth hub curriculum – taking part in delivery where possible under the guidance of youth workers, alongside holding youth workers, the council and service providers to account. – **Youth Services**





### **Example of How the Voice of Children and Young People Shape the Work of the Partners**

*Following the death of a young person with asthma locally, an engagement session was set up to understand what could be improved. A 5-year-old boy revealed, through his drawing, that having a bad asthma day felt like a horrible green monster. This set the name and the ambition to initiate an integrated CYP wheeze asthma programme called “Stopping the Monster days”. The several engagement events with families, young people and professionals across the system (health, education and care) informed the changes that needed to happen. This included shift in care from secondary health care into primary health care and schools, as well as a co-production approach on how to educate families on the importance of air quality. It also included integrated training (for clinical and non-clinical staff across Tower Hamlets). To date the programme has resulted in excellent feedback from all families, children and young people, professionals across the system as well as increasing the proportion of children with a asthma care plans from 40% to 75%, reduction in hospital care for wheeze and asthma by 22%, with a reduction in acute care cost of £142,000 in a year not including interventions in schools.*

## **Training and Development**

The partnership has worked alongside Children’s Social Care to provide multi-agency training. Within 2019-20 the training sessions included

### **Local Safeguarding Children’s Partnership Training**

Domestic Abuse

Responding to Child and Adolescent Neglect

Multi-Agency Working to Safeguarding Children in Tower Training

Child Protection and Safeguarding Children in Tower Hamlets-Advanced

Exploitation

Cultural Competence

Introduction to African Families

Anti-racist Training

Online safety

Threshold Training

## **Safeguarding Month November 2019**

In Tower Hamlets, safeguarding a child or adult from abuse is everyone's business. The joint children and vulnerable adults Safeguarding Month was held for the sixth consecutive year. Within Safeguarding Month, the LSCB Partners and the Safeguarding Adults Board held a host of sessions throughout the month including drop-in sessions, roadshows and workshops for parent/carers, young people, service users and professionals. The aims were to:

- Showcase the range and depth of safeguarding activity that exists in Tower Hamlets
- Raise awareness of safeguarding issues and highlight what support is available and how it can be accessed
- Disseminate learning to increase professional knowledge

Some of the sessions included but were not limited to:

- Child Exploitation Drop-In Clinic: which were open sessions for children's services practitioners wanting expert subject case advice and guidance on exploitation issues including Gangs, Missing, Sexual and Criminal Exploitation;
- Voluntary Sector Children & Youth Forum: A Space for Talk? Which was a workshop for professionals interested in developing the virement and activities in their organisation to encourage children young people and families to express what is going on for them.
- Somali Parent and Carer's Network – Tackling Poverty. The Network provides a regular space for Somali families to meet and share experiences of parenting and services for families in the borough.
- Lunch and Learn – Combatting Modern Day Slavery. A lunch and learn session hosted by the local authority and Metropolitan Police.
- "Prevent" Safeguarding from radicalisation session which was a session for NHS staff to raise awareness of 'Prevent' issues and the role 'Prevent' play in tackling extremism and radicalisation.



## How Partners have Assured Multi-Agency Working through Learning



### and Development

The Clinical Commissioning Group contributed to the following but not limited to :

- IICSA partnership response. The learning from the CCG action plan highlighted the need to share the learning from the Barts Health Trust Do You Feel Safe questions into primary care;
- Supporting the implementation of the revised Safeguarding Partnership Arrangements including review of the rapid review processes. We are key members of partnership meetings.
- Designated Professionals have contributed to partnership audits, review of children subject to child protection plans and case conference appeals, inputting into thematic or case reviews.
- Co-chairing of the Health and Social Care Leads meeting, which acts to share best practice, resolve any

emerging systems blocks and aid positive working relationships.

- Supporting the MOPAC roll out of IRIS programme to support primary care teams with domestic abuse identification.

Staff training is a blended approach using eLearning and face to face programmes.” – **Clinical Commissioning Group**

The Community Safety Team are multi-agency by default and ensure this is embedded through practice including not limited to:

- Attendance at various conferences with regards to the management of risk of radicalisation in children (hosted by Redbridge).
- Conference with partners and Department of Education on the management of returning minors from Syria and input into the development of national guidance in this area.

- The VAWG Team regularly receive updated Safeguarding training.
- The Community Safety Partnership have had 11 domestic homicides in Tower Hamlets, 7 of which have been published. Many findings and recommendations from these have resulted in lessons learnt to improve safeguarding young people who are exposed to Domestic Abuse.
- Training has been delivered to all members of staff to ensure they are equipped to identify safeguarding concerns to make appropriate referrals and signposting to appropriate services. -**Community Safety**

“The child protection appeals has been reviewed and updated to include a stage 2 process which has partner agencies (education, health and police) contributing to these appeals. The child protection quarterly panel (panel which considers cases subject to Child Protection plans for 15 + months) is a multi-agency panel (health, education and police) attend this panel; this panel is consequently involved in the oversight of the process of the child protection plan and contributes to the reduction in the length of time a child is subject to the plan. Local Authority Designated Officer (LADO) manages allegations against professionals LADO –the management oversight processes have been reviewed and updated. Safeguarding handbooks for churches and mosques have been reviewed and updated. Work has started to ensure case consultations in relation to the Safeguarding Muslim Coordinators work is recorded in each child’s record – **Children Social Care**

We work alongside multiple agencies to ensure safeguarding of our service users. We work with the hidden harm worker, MASH, MARAC and social services to signpost appropriately and to offer the correct support for the individual involved. Our frontline workers are confident in their ability to make appropriate referrals to safeguarding agencies and will often follow up with the

social worker allocated to that case. We have conducted joint meetings between the various services. This is something that we feel needs to continue and to involve other agencies such as social services so that we can have a complete multidisciplinary team discussing these cases. This will allow us to keep up to date with pathways, referral systems as well as give us more of an insight into the resources that can be accessed for the community of Tower Hamlets. – **Drug and Alcohol Commissioning Team**

“Our team is up to date Up to date with safeguarding training and safer recruitment training. We have a designated Safeguarding lead. Our Executive Director sits on various boards and committees as part of our multi agency work.”- **Education Partnership**

“Every year the college organise a Safeguarding training for the Safeguarding officers. The training is provided by John Guest, a register Social Worker and approved trainer Southwark Children’s & Adults Services.

- All new members of the staff at the college complete an online safeguarding induction;
- All college staff have a safeguarding training every 3 years;
- The college work closely with the London MET Police.” – **New City Collage**

“The organisation has structured professional development days which occur every quarter. All officers on the Basic Command Unit attend these training days and there is always safeguarding training within the content. At we are currently reviewing the training needs of the teams and are trying to build more relevant training. This is an ongoing piece of work. All officers within safeguarding should and can attend formal police safeguarding training, this is a 2-week initial safeguarding course and covers an introduction to safeguarding teams. There will also be slots available for trainee constable’s and newly

*promoted sergeants to be attached to the partnership teams.” – **Metropolitan Police***

*“Youth Justice Service staff have access to all courses available on the LBTH Learning Hub as well as courses available specifically targeted at youth justice staff through the Youth Justice Board annual training programme. All Youth Justice Service staff have a mandatory training programme they are expected to complete whilst employed in the service, and this is updated annually. Safeguarding is included as one of the mandatory training courses.” – **Youth Justice Service***

*Staff have attended on-line Safeguarding and Child Protection & Safeguarding Children in Tower Hamlets (Advanced). The training*

*carried out is renewed before expiry to ensure information and procedures are current and up to date. The priority when providing a service is to promote the welfare of young people.*

*The learning from staff attending new and refresher training has allowed staff to be kept up to date with safeguarding policies and procedures, enhanced knowledge, confidence, skills and the ability to work together on the processes for safeguarding and promoting the welfare of children and young people in complex and challenging situations. This has created a better understanding on developing good multi-agency working practices and incorporates the Pan London Continuum of help and support – **Youth Services***

## **The Local Authority Designated Officer**

The Local Authority Designated Officer (LADO) procedures have been updated in the previous year.

Arrangements to Manage Allegations against paid/unpaid Staff process is the responsibility of the Local Authority Designated Officer (LADO) who is responsible for:

- Managing individual cases
- Providing advice and guidance
- Liaising with police and other agencies
- Monitoring progress of cases for timeliness, thoroughness and fairness.

Click [here](#) for the full procedure and [here](#) for the process flowchart.



## Serious Case Reviews/ Local Learning Reviews



### New Arrangements

Under the previous partnership arrangements, a Serious Case Review (SCR) were established under the Children Act (2004) to review cases where a child has died, and abuse or neglect is known or suspected. SCRs could additionally be carried out where a child has not died but has come to serious harm as a result of abuse or neglect. Safeguarding Partnerships were advised to continue with any on going Case Reviews. From the previous LSCB there are two SCRs that have been worked on throughout the year, these will be published in the year 2020. The latest date for completion and publication of an SCR under the old arrangements is 29 September 2020.

A key feature of the new system is the move away from Serious Case Reviews (SCR) in favour of local review. There are a number of guiding principles underpinning the resourcing of local reviews. The overall aims of local review:

- To improve the safeguarding of children and young people where possible within Tower Hamlets through review of local processes, procedures and cases
- To support the delivery of high-quality services through identification of areas for improvement.
- To strengthen through proportionate candour and constructive challenge the safeguarding partnership to deliver an integrated and comprehensive offer for children and young people.
- All reviews should have an outline of estimated costs and that this is monitored on an ongoing basis to ensure overall grip on resources and timelines.
- All local reviews will emphasise rapid delivery of initial learning points and have clear concise recommendations.
- In response action plans will be requested from partners and these will be orientated to deliver positive mitigating actions to minimise harms encountered by those affected and inform local practice updates as a priority.



- The THSCPs sole focus is on meeting the safeguarding needs of children and young people. Individuals and agencies do not fulfil a gate-keeping function with regards to resourcing of local reviews and will not make decisions informed by budgets.

## Governance and Funding of the Local Learning Reviews.

Independent Scrutineer and the Rapid Review Group will consult with each other on the best model to fit the case and present this to the Statutory Partners as a formal recommendation to enable resourcing to flow to the review. The cost of the majority of local child safeguarding case or practice reviews will be borne by additional subscription from the Statutory Partners who have been involved in the case (mainly the Statutory Partners as the lead service commissioners). There may however be circumstances where in order to proceed a different resourcing model will be required. Joint funding decisions and disputes on local case review should not delay the delivery of a local review once it has been agreed that such a review is warranted. The decision to proceed with a local case review will be the remit of the Recommendations. There are a few options of costing of the Local Learning Reviews but within in all cases the cost will be shared among the statutory agencies, either health, police or the local authority can lead on the review, compared to the previous set up of the Local Authority taking the main lead. For more information on the options for apportioning Local Reviews please click [here](#).

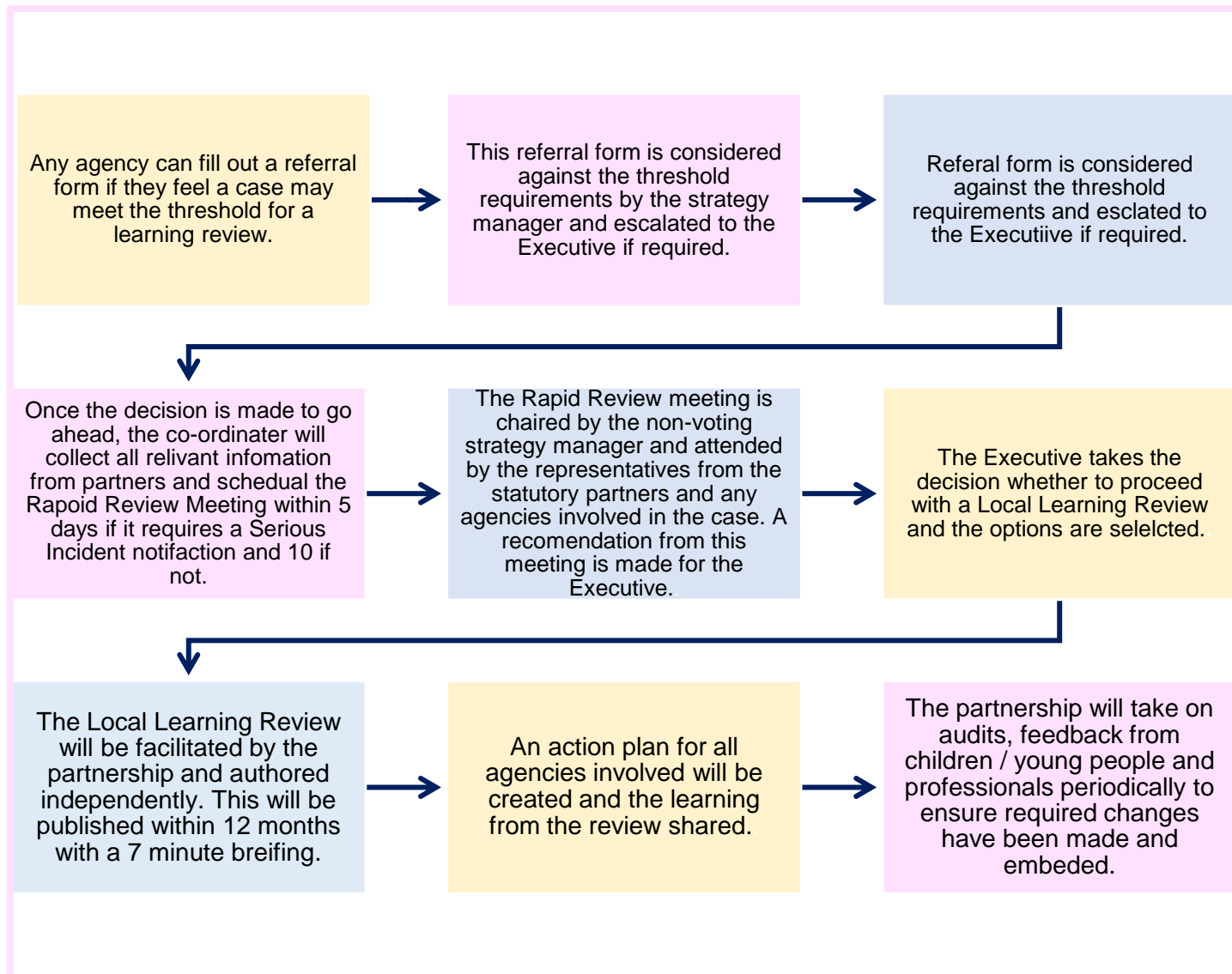


### What does this mean for the Safeguarding Children's Partnership?

The partnership can be more flexible and creative with the approach to the local learning review and have further emphasis on the journey of the child, the voice of the family/carers and the systemic learnings. The system will prevent delays and ensure the learning is disseminated at a rapid pace. Costing and the governance of the reviews will be shared across the statutory partners.







## What does this look like for Tower Hamlets?

A rigorous process has been put in place for decision making and commissioning of any statutory reviews. The executive will have final sign off on any decision for a review and how this will be facilitated and by which partner. A procedure will be in place for cases that do not meet the threshold but there is some key learning, and this will sit with the Rapid Review Team to implement.



## Child Death Overview Panel (CDOP) – Child Death Review (CDR)

Under the new legislation formal collaboration between responsible partners for child death reviews will be undertaken at greater scale, with a footprint determined by a minimum of 60 cases reviewed each year enabling the formation of Child Death Review systems covering larger area than the previous local arrangements. There are several significant changes to the Child Death Review system.

Changes		Implication
	Shift of lead responsibility from Department for Education to Department of Health and Social Care	The new system creates Child Death Partnerships with local authority and Clinical Commissioning Groups
	Larger 'footprint' of the local CDR systems with a minimum 60 caseload	CDOPs will need to amalgamate in London; each Integrated Care System or area would have 1 or 2 rather than the current 5 to 7 CDOPs
	Development of a new 'key worker' to act as a single point of contact with the bereaved.	This has been generally welcomed but there is no new resource to deliver this function. Specifics of how it should be implemented are currently unclear
	Establishment of Child Death Review Meetings (CDRM)	This requires significant development of acute and community mortality and morbidity review meetings.
	Themed review meetings for high volume or high complexity deaths	Cases of high volume or complexity considered together to enhance expert review
	Revision of additional requirements to address a number of 'complex' circumstances	Includes deaths of UK-resident children overseas, with learning disabilities, in adult healthcare settings, suicides, inpatient mental health settings, deaths in custody.

## What does this mean for the Safeguarding Children's Partnership?

To meet the requirements two CDR systems are being developed in North East London. The first based around the Barking, Havering and Redbridge systems and a second based around City and Hackney, Waltham Forest Newham and Tower Hamlets. This allows for the wider area working required by the new guidance and the continuance of local assurance and review of child deaths in each area. The THSCP will develop close operational links with both CDR systems and wider London safeguarding partnership structures to ensure cross border collaboration and is facilitated.

## Next Phase and Key Focus

The next year will focus on embedding the changes to the partnership and setting new priorities to focus on. Consultations with partners, front-line practitioners and children and young people will begin in October 2020.

**Phase 1:** Embed the new safeguarding arrangements: Leadership from the three statutory partners, effective independent scrutiny and engagement with all relevant agencies

## Communications Strategy:

- Logo to be created by children and young people
- New brandings and templates
- Website changes and updates

## Live Audits:

- Partners to have table top discussion and workshops to audit rather than lengthy written reports;
- At least two will take place per year.

## Local Learning Reviews (Statutory Reviews):

- Ensure a robust and transparent system in place for decision making;
- A procedure in places for cases that do not meet the threshold but there is some key learning;
- 7 minute briefings published alongside the review and 12 month post published partnership update.

## Phase 2: Facilitate a culture shift within the partnership

### Multi Agency Data Dashboard

- Creation of a multi-agency quarterly dashboard to monitor trends and impact of activity;

### Learning Events

- THSCP to facilitate events led and driven by the partnership
- Monthly topical bulletins' sent out to the THSCP

### Live Data and Emerging Risks

- Partners table data and emerging risks through the partnership so this can be mitigated

### Priority Setting

- Partners to lead the decision of priorities and lead the work throughout.
- Shared priority with the Safeguarding Adults Board.

## Phase 3: Ensure that children and young people are engaged throughout.

- Priority setting will include consultations with young people and children to understand what concerns they currently have;





- Young people and children will design the logo and branding;
- Bulletins to go out to schools specifically aimed at young people and raising awareness on specific topics with signposting;
- When reviewing priorities and impact of work young people and children to be asked for feedback and case studies to be included in all reports;
- Linking will a wide variety of young people including, Special Education Needs , Youth Council, Pupil Referral Unit, Schools, Youth Offending Team, Looked After Children, and very young children and their care providers.

The partnership will continue to strengthen its relationships and ensure that children and young people are at the centre of all work.