



# City & Hackney Safeguarding Children Board

**Annual Report 2008 - 2009**

## Contents

|            |  |    |
|------------|--|----|
|            | List of Abbreviations                              | 3  |
|            | Introduction from the Independent Chair            | 4  |
| Part 1     | City & Hackney Safeguarding Children Board         | 6  |
|            | 1.1 Structure Diagram                              |    |
|            | 1.2 Safeguarding Arrangements                      |    |
|            | 1.3 Membership and Attendance                      |    |
|            | 1.4 Board Unit Diagram                             |    |
| Part 2     | The Sub-Committees                                 | 10 |
|            | 2.1 Child Death Overview Panel                     |    |
|            | 2.2 City of London                                 |    |
|            | 2.3 Finance  |    |
|            | 2.4 Quality Assurance                              |    |
|            | 2.5 Serious Case Review                            |    |
|            | 2.6 Training & Development                         |    |
| Part 3     | Finance and Performance                            | 21 |
|            | 3.1 Budgets and Finance                            |    |
|            | 3.2 Business Plan 2009-2010                        |    |
| Part 4     | How we are 'Working Together'                      | 24 |
|            | 4.1 Change for Children Network                    |    |
|            | 4.2 Mobile Gang Intervention Team                  |    |
|            | 4.3 Triage Unit                                    |    |
| Part 5     | Other Key Developments and Updates                 | 27 |
|            | 5.1 Community Engagement                           |    |
|            | 5.2 Learning the Lessons from Serious Case Reviews |    |
|            | 5.3 Rapid Response                                 |    |
|            | 5.4 Safer Recruitment and Managing Allegations     |    |
| Appendices | a. Child Protection Statistics                     | 34 |
|            | b. Children in Care Council                        |    |
|            | c. Hackney Youth Parliament                        |    |
|            | References   | 37 |
|            | Useful Contacts                                    | 39 |

## List of Abbreviations

|                |   |
|----------------|---|
| <b>A&amp;E</b> | Accident and Emergency  |
| <b>CDOP</b>    | Child Death Overview Panel  |
| <b>CHSCB</b>   | City & Hackney Safeguarding Children Board                        |
| <b>CHYPS</b>   | City & Hackney Young People's Service                             |
| <b>CIcC</b>    | Children in Care Council  |
| <b>CIN</b>     | Children in Need  |
| <b>CPA</b>     | Community Partnership Advisor                                     |
| <b>CPP</b>     | Child Protection Plan   |
| <b>CRB</b>     | Criminal Records Bureau   |
| <b>CSC</b>     | Children's Social Care – Hackney Council                          |
| <b>CYPS</b>    | Children & Young People's Services – Hackney Council              |
| <b>DCFS</b>    | Department for Children, Schools and Families                     |
| <b>DCS</b>     | Director of Children's Services                                   |
| <b>FGM</b>     | Female Genital Mutilation   |
| <b>HUH</b>     | Homerton University Hospital                                      |
| <b>HCVS</b>    | Hackney Community and Voluntary Service                           |
| <b>HYP</b>     | Hackney Youth Parliament  |
| <b>ICD</b>     | Internal Classification of Diseases                               |
| <b>ISA</b>     | Independent Safeguarding Authority                                |
| <b>JAR</b>     | Joint Area Review   |
| <b>LAC</b>     | Looked After Children   |
| <b>LADO</b>    | Local Authority Designated Officer                                |
| <b>LCPP</b>    | London Child Protection Procedures                                |
| <b>LGBT</b>    | Lesbian Gay Bisexual & Transgender Youth Forum                    |
| <b>LSCB</b>    | London Safeguarding Children Board                                |
| <b>MIT</b>     | Mobile Intervention Team  |
| <b>MPM</b>     | Management Planning Meeting                                       |
| <b>NCSL</b>    | National College of School Leadership                             |
| <b>OFSTED</b>  | Office for Standards in Education, Children's Services and Skills |
| <b>QA</b>      | Quality Assurance   |
| <b>RR</b>      | Rapid Response  |
| <b>S11</b>     | Section 11 of Children Act 2004                                   |
| <b>S47</b>     | Section 47 investigation under Children Act 1989                  |
| <b>SCR</b>     | Serious Case Review   |
| <b>SUDI</b>    | Sudden Unexpected Death in Infancy                                |
| <b>TLT</b>     | The Learning Trust  |
| <b>VBS</b>     | Vetting and Barring Scheme  |
| <b>YOT</b>     | Youth Offending Team  |

## Introduction from the Independent Chair

The last twelve months feel like a time of considerable progress for the City & Hackney Safeguarding Children Board. I hope this Annual Report gives you a sense of the amount of work that goes on locally to support all the staff who work in different organisations. I also hope that it gives you a sense of the leadership that I feel the Board increasingly gives around training, learning from Serious Case Reviews, quality and standards, and in gathering and learning from data about the children, young people and their families across the two Local Authorities.

In April 2008, the Board members agreed that it would be timely to review how effectively we were working - and we arranged for some external advisers to come in and take a look at how we operated. Their recommendations were ones that all Board members felt able to sign up to: increasing the resources available to the Board; making sure that the various committees and task groups of the Board were well-led and more effective; reviewing our membership to make sure we had colleagues with the authority to commit their organisation's staff and resources when needed; and deciding whether we wanted to continue with our very clear focus on safeguarding children, or whether to broaden our approach to include some of the wider safety issues that affect children and young people in Hackney and the City.

Once the Board had agreed these actions, they happened rapidly. Partner agencies developed a formula for their contributions to a significantly increased budget for the Board, and by the end of 2008, the Board had a small but dedicated team of staff to support it. Senior managers from a range of partner organisations also agreed to lead the different workstreams of the Board - and their leadership has had an immediate and very positive effect, which has been reflected in attendance levels at meetings and the volume of work that has been done. One of my tasks as Chair is to review the membership of the Board - and I have worked with the Directors of Children's Services for both local authorities and with all our partner organisations, to make some changes to the Board which hopefully make the best use of everyone's time and enthusiasm.

The role of Independent Chair of a Safeguarding Board is still a fairly new one. A crucial relationship is that of the Chair to the Directors of Children's Services (DCS) for Hackney and the City of London. We used our review of how the Board operated in City and Hackney as an opportunity to think through, and test out, ways to measure my performance as Chair, and to clarify my accountabilities to the two DCS. This resulted in a formal agreement, which we will be putting into practice and reviewing during 2009/2010. There have also been changes to wider governance arrangements for children and our Board has done considerable work to think through how we can influence those arrangements without losing our focus on the tasks we need to do. Our Business Plan for 2009/2010 reflects all these intentions.

National developments in the safeguarding arena were never far from the minds of Board members. We carried out two Serious Case Reviews during the year. Each organisation that contributed to these reviews was determined to learn from the process. I saw a level of openness and reflection during both reviews that was striking - all the more so, given the levels of media and government interest in all matters relating to safeguarding towards the end of 2008. In December, our Board was chosen for a visit by government officers, working with Lord Laming, as part of his review of the protection of children in England. Colleagues from all the partner organisations contributed to that visit and spoke highly of the way agencies work together, but left the Laming team in no doubt about the challenges that we face.

Another imperative for every Safeguarding Board in the country was to set up a Child Death Overview Panel and introduce Rapid Response procedures. This huge task was accomplished on time, and this Annual Report contains much more information - not only about the work that NHS colleagues have led - but also on the data that is emerging - and which we intend to make the best use of.

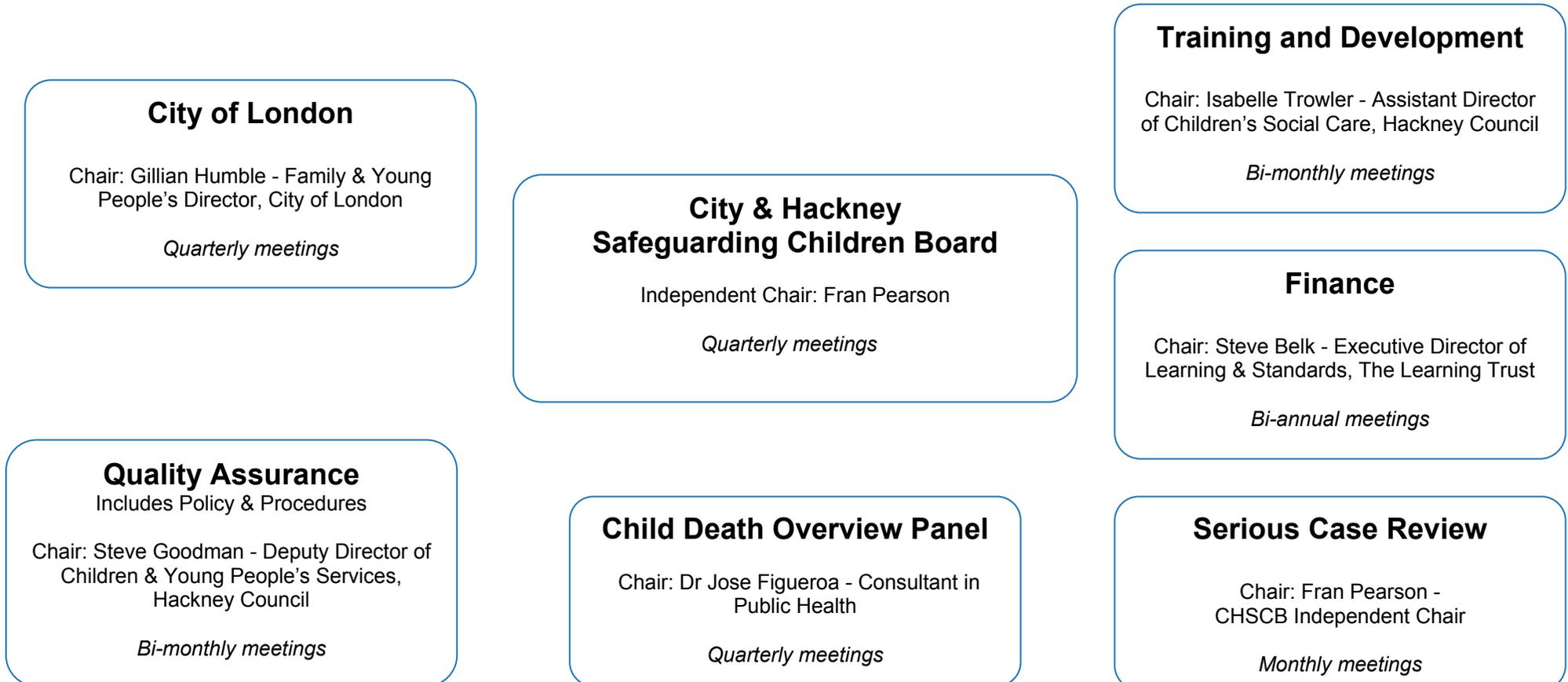
I would like to thank everyone who contributes to the work of the Board - it feels like a very great responsibility to carry out my role as Chair, but it is also inspiring to work with the range of colleagues we have in the City and Hackney.

Please do follow up the contacts at the end of this report, or visit our website, if you would like to find out more.

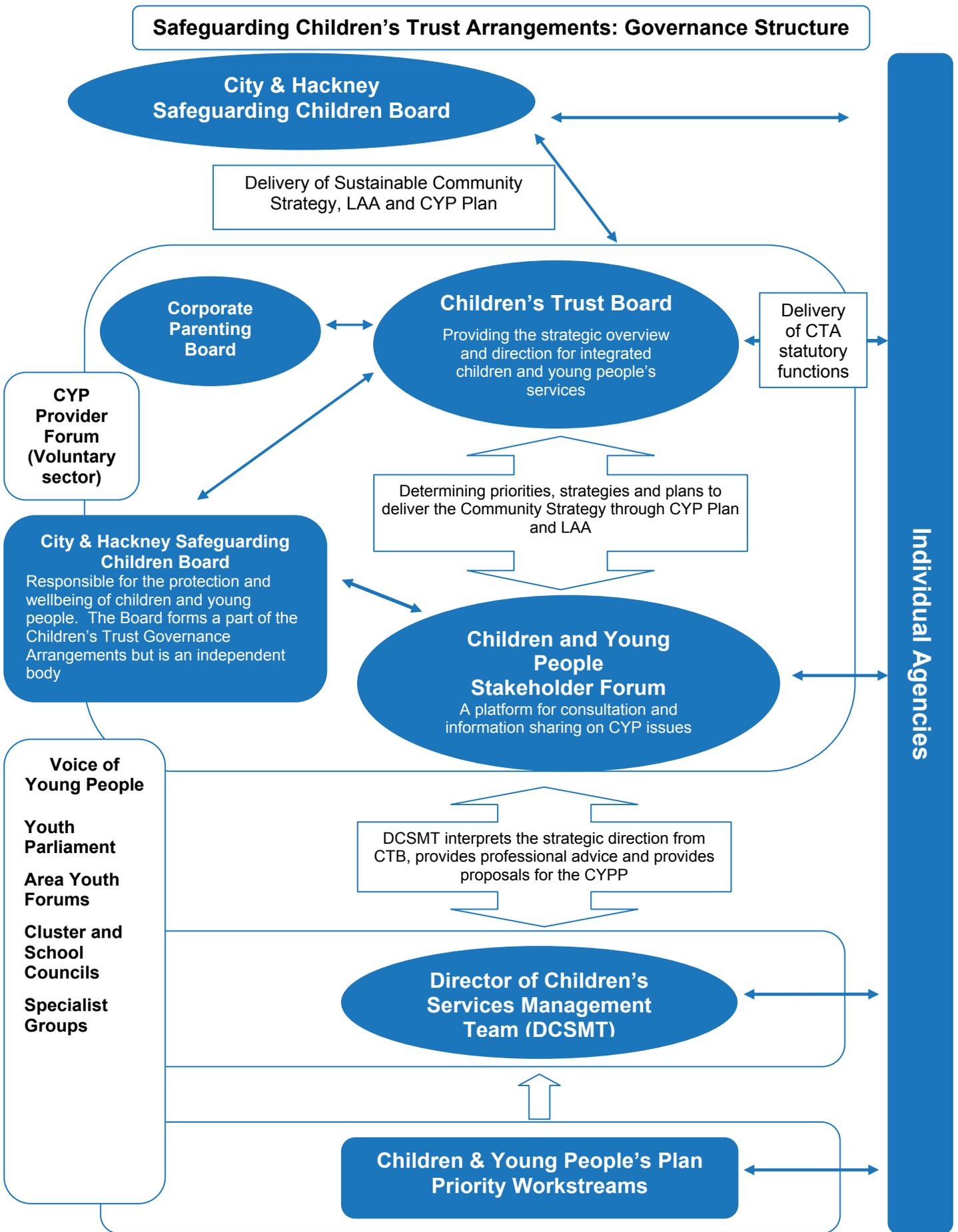
Fran Pearson  
CHSCB Independent Chair

## Part 1 – City & Hackney Safeguarding Children Board

### 1.1 Structure Diagram - as at April 2009



## 1.2 Safeguarding Arrangements - as at April 2009



### 1.3 Membership and Attendance – from April 2008 to April 2009

| Organisation   | Number of seats | % of meetings attended* |
|--|-----------------|-------------------------|
| <b>Independent Chair</b>   | 1               | 100%                    |
| <b>Professional Advisor to the Board</b>   | 1               | 100%                    |
| <b>Child Abuse Investigation Team - Metropolitan Police Service</b>  | 1               | 100%                    |
| <ul style="list-style-type: none"> <li>Detective Inspector</li> </ul>  |                 |                         |
| <b>Children’s Social Care – Hackney Council</b>  | 2               | 100%                    |
| <ul style="list-style-type: none"> <li>Assistant Director, Children’s Social Care</li> <li>Deputy Director, Children &amp; Young People’s Services</li> </ul>                                    |                 | 100%                    |
| <b>City &amp; Hackney Primary Care Trust</b>   | 2               | 100%                    |
| <ul style="list-style-type: none"> <li>Director, Community Health Services</li> <li>Consultant Paediatrician</li> </ul>  |                 | 83%                     |
| <b>City of London</b>  | 2               | 17%                     |
| <ul style="list-style-type: none"> <li>Director, Community &amp; Children’s Services</li> <li>Director, Family &amp; Young People Services</li> </ul>  |                 | 100%                    |
| <b>East London NHS Foundation Trust</b>  | 3               | 100%                    |
| <ul style="list-style-type: none"> <li>Deputy Chief Executive Officer</li> <li>Consultant Psychiatrist</li> <li>Clinical Director</li> </ul>   |                 | 75%                     |
| <b>Education – The Learning Trust</b>  | 2               | 100%                    |
| <ul style="list-style-type: none"> <li>Deputy Chief Executive</li> <li>Head of Attendance &amp; Behaviour</li> </ul>   |                 | 67%                     |
| <b>Hackney Borough Police - Metropolitan Police Service</b>  | 1               | 83%                     |
| <ul style="list-style-type: none"> <li>Borough Commander</li> </ul>  |                 |                         |
| <b>Homerton University Hospital – NHS Trust</b>  | 2               | 67%                     |
| <ul style="list-style-type: none"> <li>Chief Nurse &amp; Director of Governance</li> <li>Consultant Paediatrician</li> </ul>   |                 | 25%                     |
| <b>Chairs of the Boards Sub-Committees:</b>  |                 |                         |
| <ul style="list-style-type: none"> <li>Child Death Overview Panel</li> <li>City of London</li> <li>Quality Assurance</li> <li>Serious Case Review</li> <li>Training &amp; Development</li> </ul> | N/A             | N/A                     |
|  | 1               | 100%                    |
|  | 1               | 100%                    |
|  | 1               | 100%                    |
|  | 1               | 100%                    |

\*Please be aware that there have been a number of changes during the year as the Board Membership was under revision and therefore this might be reflected in some of the low figures.

## 1.4 Board Unit Diagram - as at April 2009

**Independent Chair**  
Fran Pearson

**Head of Safeguarding &  
Professional Advisor to the CHSCB**  
Sophie Humphreys

**Safeguarding Group Manager &  
Local Authority Designated Officer**  
Philomena Evans

**Safeguarding Project Manager**  
To be recruited

**Community Partnership Advisor  
(Children in Need Service)**  
Leethen Bartholomew

**Multi-agency Training Co-ordinator**  
Alice Tomlinson

**Board & Sub-Committees Co-ordinator**  
Irene Hicks

**Child Death Overview Panel &  
Rapid Response Co-ordinator**  
Pernilla White

## Part 2 – The CHSCB Sub-Committees

### 2.1 Child Death Overview Panel

#### Background

The Child Death Overview Panel (CDOP) is a multi-disciplinary group established on 1<sup>st</sup> April 2008 to review all deaths of children (aged under 18 years) in the City of London and the London Borough of Hackney. The CDOP, chaired by the Deputy Director of Public Health; NHS City and Hackney, has representatives from neonatology, acute and community paediatrics and mental health services; paediatric pathology; Hackney and City police; nursing; education; children’s social care; and CHSCB.

The CDOP plays a key role in improving the health, safety and wellbeing of all children who are resident in Hackney and the City of London. It does this by: reviewing all deaths in children, identifying trends, risks and predisposing factors such as service anomalies, epidemiological, environmental, social or cultural factors that could be associated with child deaths locally; and, by making recommendations to reduce risk factors and to improve the quality of frontline services for children and young people preventing future deaths from occurring.

#### Activities and Achievements

The CDOP meets quarterly, since its inception in April 2008 it has met five times (including a training session). The table below displays a break-down of agencies’ attendance at the CDOP meetings from July 2008 to April 2009 - during this period, there were 5 meetings.

| Organisation  | % of meetings attended |
|---|------------------------|
| <b>Chair of the Child Death Overview Panel</b>                      | 80%                    |
| <b>Child Abuse Investigation Team - Metropolitan Police Service</b> |                        |
| • Detective Inspector   | 80%                    |
| <b>Children’s Social Care – Hackney Council</b>                     |                        |
| • Head of Safeguarding  | 100%                   |
| • Head of Children in Need  | 100%                   |
| <b>City &amp; Hackney Primary Care Trust</b>                        |                        |
| • Consultant Paediatrician  | 80%                    |
| <b>City of London</b>   |                        |
| • Director, Family & Young People Services                          | 60%                    |
| <b>City of London Police</b>  |                        |
| • Detective Sergeant  | 20%                    |
| <b>East London NHS Foundation Trust</b>                             |                        |
| • Named Professional for Safeguarding Children                      | 80%                    |
| <b>Education – The Learning Trust</b>                               |                        |
| • Head of Attendance & Behaviour                                    | 20%                    |
| <b>Hackney Borough Police – Metropolitan Police Service</b>         |                        |
| • Detective Inspector   | 80%                    |
| <b>Homerton University Hospital – NHS Trust</b>                     |                        |
| • Consultant Paediatrician  | 80%                    |
| • Consultant Neonatologist and Lead Clinician                       | 80%                    |
| <b>Royal London Hospital</b>  |                        |
| • Consultant Paediatric Pathologist                                 | 40%                    |

NHS City and Hackney and the CHSCB ensure that the CDOP has the administrative support required to carry out its functions effectively and efficiently. In the reporting period (April 2008 to March 2009) the CDOP has co-ordinated and achieved the following:

- management of the administrative process for the selection and appointment of a CDOP members and of a CDOP coordinator;
- drafting confidentiality and information sharing protocols between NHS City and Hackney and each CDOP member's agency/organisations;
- preparation and presentation of induction materials for the CDOP's inaugural meeting on 23 July 2008;
- drafting the CDOP's Terms of Reference (ToR);
- coordination of the CDOP's meetings and workflow planning;
- preparation of information proformas to assist CDOP members to conduct reviews;
- drafting a parental leaflet about the child death review process;
- liaison with relevant agencies and bodies about secured procedures for the provision and exchange of confidential information;
- receipt of all child death notifications and cascade relevant information to key agencies;
- coordination of Rapid Response (RR) meetings;
- development and management of a Child Death Register; and,
- development of guidelines and processes for collection, storage, retrieval and destruction of highly confidential and sensitive child death case review information.

During 2008-09 the CDOP received 33 deaths notifications. The Panel has, to date, initiated 26 case reviews and completed 22 of them; four cases were subject of an inquest and results are pending. Of the remaining 7 cases, four had incomplete information (at 31<sup>st</sup> March 2009) and panel members are collecting additional information in a further three cases. The RR group, which is monitored by the CDOP, has considered the unexpected deaths of 13 of the 33 deaths notified during 2008-09. Three rapid response cases are currently awaiting completion.

The CDOP is required to determine whether a death could be classified as 'preventable', 'potentially preventable' or 'not preventable' based on the analysis of all information and documents obtained from the different agencies that had involvement with the respective child. Two of the deaths reviewed during 2008-09 were considered preventable by the Panel. In making this determination, the CDOP concluded that there were extrinsic modifiable factors that could have prevented these two children from dying.

In general the achievements of the CDOP and the RR group in furthering the child death review process and improving the wellbeing and safety of children and young people during 2008-09 were:

- strengthened interagency working relationships and processes;
- strengthened working relationships with the Coronial service;
- introduced joint home visits by Homerton University Hospital (HUH) paediatricians and police officers for cases of Sudden Unexpected Death in Infancy (SUDI). Two joint police/paediatric home visits took place from April 2008 – March 2009;
- changes in the London Ambulance Service and Police protocols to emphasise the need to bring all infant deaths (birth to two years) to Accident and Emergency (A&E) departments, including those where active resuscitation is not possible;
- review of HUH paediatric A&E haemoglobinopathy protocols;
- increase awareness around the use of infant car seats and the inappropriateness of breastfeeding while travelling in a car; and,
- linking in with major Metropolitan Police initiatives about prevention of gun, gang and knife crime.

## Child Death Data

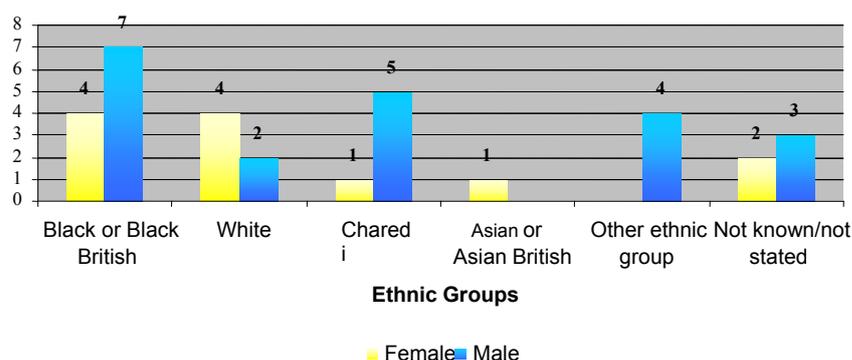
Two thirds of the 33 child deaths in the period were in males (64%) and the majority (64%) of deaths occurred between birth and 1 year.

Table 1: Age and gender of children

|        | Under 28 days | Under 1 year | 1-4 years | 5-9 years | 10-14 years | 15-17 years | Total (%) |
|--------|---------------|--------------|-----------|-----------|-------------|-------------|-----------|
| Female | 5             | 5            | 1         | 0         | 1           | 0           | 12 (36%)  |
| Male   | 6             | 5            | 1         | 3         | 3           | 3           | 21 (64%)  |
| Total  | 11            | 10           | 2         | 3         | 4           | 3           | 33        |

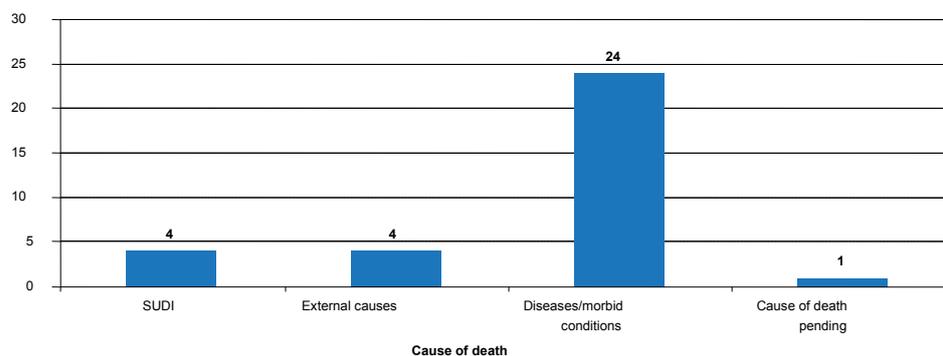
A third of the deaths (11, 33%) occurred in Black or Black British children; six (18%) in White and 6 in Orthodox Jewish (Charedi) children. The main cause of death of children in Hackney and the City of London during this period was 'diseases/morbid conditions' - International Classification of Diseases (ICD). This category includes congenital abnormalities, perinatal conditions, cancer and infections.

Figure 1: Ethnic groups



External cases accounted for 4 deaths of children (12%) and included a car accident, fatal assault, accidental injury and death by misadventure.

Figure 2: Child deaths in City and Hackney in 2008-09 by cause of death



## Challenges

Current challenges for the CDOP are:

- ensuring that the CDOP is immediately notified of all deaths;
- timely access to post-mortem results;

- further streamlining of information sharing processes, including safe information sharing pathways;
- measurement of outcomes, benchmarking and system data development;
- development of a feedback pathway for recommendations from the CDOP to the CHSCB who will advise on their implementation and monitor outcomes;
- improving access to culturally appropriate bereavement services;
- developing feedback processes to parents and/or carers; and,
- clarifying its relationship to other review processes.

## 2.2 City of London

The City of London Sub-Committee continued to meet quarterly throughout the year, bringing together the core services of Children’s Social Care, City Police Public Protection Unit and Healthcare.

The table below displays a break-down of agencies’ attendance at the City of London Sub-Committee meetings from October 2008 to April 2009 - during this period, there were 3 meetings. Data regarding attendance at meetings prior to November 2008 could not be collected because the membership changed at this time after the CHSCB undertook a re-structuring exercise of the full Board and the Sub-committees.

| Organisation                                 | % of meetings attended |
|--|------------------------|
| <b>Chair of City of London Sub-Committee</b> | 100%                   |
| <b>Children’s Social Care</b>                |                        |
| • Head of Safeguarding                       | 100%                   |
| <b>City and Hackney Primary Care Trust</b>   |                        |
| • Child Protection Advisor                   | 67%                    |
| <b>City of London Corporation</b>            |                        |
| • Children’s Social Care Manager             | 100%                   |
| <b>City of London Police</b>                 |                        |
| • Detective Sergeant                         | 67%                    |

It has been a challenge to ensure attendance at meetings from all parties against competing work pressures as, due to the low numbers of children in the City most staff cover multiple tasks with competing priorities. However, this has not impacted on the sound multi-agency response in individual child protection cases. Review of the implications of ‘Baby P’ and then the Laming Report has been a main agenda item.

As agreed for the City, wider Safeguarding issues were also considered. Work continued to ensure independent and voluntary providers have sound child protection policies and safe recruitment policies and that they follow procedures when needed. The Local Authority Designated Officer (LADO) role has been needed in a small number of cases. Also, through inviting an Environmental Health Officer to explain his health and safety role in private nurseries there is now greater awareness of processes following any child sustaining an accidental injury in any independent setting.

One function of the City Sub-Committee is to look at particular cases which might highlight whether our systems and processes are fully in place ready for the rare occasions when they may be needed. In 2008-09 a specific issue arose which showed that we need to improve co-ordination with schools outside the Local Authority area in cases involving adolescent mental health. With City resident children at 42 different secondary schools, this is a challenge to be addressed jointly with the East London NHS Foundation Trust to ensure early notification.

The work of the City of London Sub-Committee is funded from within each party's own resources, with Children's Social Care making the greatest contribution. The City's Community and Children's Services Committee agreed to increase their financial contribution to the CHSCB. It has already proved of great benefit to have the contribution of specialist CHSCB officers to support the work of the Sub-Committee. This has enabled the work of the City Sub-Committee to be more closely aligned with the full work of the CHSCB.

## 2.3 Finance

The Finance Sub-Committee was set up specifically to ensure the CHSCB has sufficient capacity to carry out its duties effectively. The remit of this group is to:

- recommend a draft budget to the Board in line with the agreed staffing structure;
- agree Partnership contributions to the overall budget; and,
- monitor spend and agree virements.

The Finance Sub-Committee has representatives from all the key partners who commit funding. Representatives are able to make principle agreement. The Sub-Committee had its initial meeting in November 2008, a draft budget and recommended funding arrangements were agreed. It is envisaged that the group will need to meet in May 2009 to monitor progress and in October 2009 to monitor spend and agree the 2010/11 draft budget.

The CHSCB budget is managed by the Professional Advisor to the Board. The Sub-Committee has agreed the following protocols in order to ensure partners' funding is spend appropriately:

- Underspends will be carried over to the following year; and,
- If there is a need to change the budget plans, large virements will be agreed by the Sub-Committee.

## 2.3 Quality Assurance

### Introduction

The Quality Assurance (QA) Sub-Committee is responsible for ensuring that member agencies of the CHSCB are meeting their safeguarding responsibilities, as laid out in Section 11 of the Children Act (2004) and its associated statutory guidance, and 'Working Together to Safeguard Children' on behalf of the CHSCB.

The Sub-Committee is chaired by Steve Goodman, Deputy Director, Hackney Children & Young People's Services (CYPS), and meets every two months. The Sub-Committee held its first meeting in November 2008. Its key focus initially will be on child protection arrangements rather than the broader safeguarding agenda. Over the coming months, the Sub-Committee will seek assurance that the 'patients as parents' agenda is being implemented across the City and Hackney, and that agencies working with adults consider adult service users as parents as well as patients.

The table on next page displays a break-down of agency attendance at QA Sub-Committee meetings from November 2008 to April 2009 - during this period, there were 3 meetings. Data regarding attendance at meetings prior to September 2008 could not be collected because the membership changed at this time after the CHSCB undertook a re-structuring exercise of the full Board and the Sub-committees.

| Organisation   | % of meetings attended |
|--|------------------------|
| <b>Chair of the Quality Assurance Sub-Committee</b>  | 67%                    |
| <b>City &amp; Hackney Safeguarding Children Board</b> <ul style="list-style-type: none"> <li>Professional Advisor to the Board</li> </ul>            | 100%                   |
| <b>Children Social Care – Hackney Council</b> <ul style="list-style-type: none"> <li>Policy and Strategy Manager</li> </ul>                          | 100%                   |
| <b>City &amp; Hackney Primary Care Trust</b> <ul style="list-style-type: none"> <li>Children’s Service and Strategy Consultant CP Advisor</li> </ul> | 100%                   |
| <b>City of London</b> <ul style="list-style-type: none"> <li>Director, Family &amp; Young People Services</li> </ul>                                 | 33%                    |
| <b>East London NHS Foundation Trust</b> <ul style="list-style-type: none"> <li>Associate Director for Safeguarding Children</li> </ul>               | 100%                   |
| <b>Education – The Learning Trust</b> <ul style="list-style-type: none"> <li>Head of Attendance &amp; Behaviour</li> </ul>                           | 33%                    |
| <b>Hackney Borough Police - Metropolitan Police Service</b> <ul style="list-style-type: none"> <li>Detective Superintendent</li> </ul>               | 100%                   |
| <b>Homerton University Hospital – NHS Trust</b> <ul style="list-style-type: none"> <li>Named nurse for safeguarding children</li> </ul>              | 100%                   |

### Section 11 Audit

The Sub-Committee has devised an audit tool that has now been completed by all key partner agencies to self assess how well they are meeting their safeguarding responsibilities, as laid out in Section 11 of the Children Act (2004) and its statutory guidance. Agencies have also been asked to identify actions that they will take to address any areas for improvement/development.

The Section 11 audit was launched at the Change for Children event on 12 March 2009. All responses are expected to be submitted in May 2009 and the QA Sub-Committee will discuss an initial draft of the S11 Audit Report at its meeting in June 2009. The CHSCB will receive the S11 Audit Report in July 2009. The audit tool also asks agencies to provide information about training which will be passed on to the Training & Development Sub-Committee to support them to shape the CHSCB Multi-agency Training Programme.

### Children’s Social Care Quality Framework

The Sub-Committee has had input into the Children’s Social Care Quality Framework. Initial and review child protection conferences will be audited for three months of the year, with both the Chair and participants commenting on the quality of the conference. Attendance from each agency will also be monitored. The first audit will take place in May 2009 and the QA Sub-Committee will consider the findings at its following meeting.

### Implications of Haringey Joint Area Review

Ed Balls, Secretary of State for Children, Schools and Families, wrote to Directors of Children’s Services (DCSs) following the publication of Ofsted’s Joint Area Review (JAR) Report into safeguarding arrangements at Haringey Council, asking that DCSs satisfy themselves about the local area’s position with regard to the recommendations. We have provided a commentary on where Hackney is against each of the recommendations, which will be included in a report by the DCS to CHSCB Members. Some of the recommendations in Lord Laming’s Report (March, 2009) will be relevant to the Quality Assurance Sub-Committee and we will be discussing these as the detail of Government action becomes available.

## 2.5 Serious Case Review

The Serious Case Review (SCR) Sub-Committee met on twelve occasions during 2008/2009. The Sub-Committee benefits from regular and consistent attendance, which means that there are established relationships and high levels of trust between the professionals who come to it. This ensures that agency representatives ask each other searching questions about practice issues, and that there are frank and thorough discussions about whether or not Serious Case Reviews should be carried out in particular circumstances.

The table below displays a break-down of agency attendance at SCR Sub-Committee meetings from September 2008 to April 2009 - during this period, there were 7 meetings. Data regarding attendance at meetings prior to September 2008 could not be collected because the membership changed at this time after the CHSCB undertook a restructuring exercise of the full Board and the Sub-committees.

| Organisation  | % of meetings attended |
|---|------------------------|
| <b>Chair of the Serious Case Review Sub-Committee</b>               | 71.4%                  |
| <b>City &amp; Hackney Safeguarding Children Board</b>               |                        |
| • Professional Advisor to the Board                                 | 100%                   |
| • CDOP & Rapid Response Co-ordinator                                | 100%                   |
| <b>Child Abuse Investigation Team - Metropolitan Police Service</b> |                        |
| • Detective Inspector   | 100%                   |
| <b>Children's Social Care – Hackney Council</b>                     |                        |
| • Head of Safeguarding  | 100%                   |
| • Head of Children in Need  | 71.4%                  |
| <b>City &amp; Hackney Primary Care Trust</b>                        |                        |
| • Consultant Paediatrician  | 100%                   |
| • Child Protection Advisor  | 57.1%                  |
| • Children's Service and Strategy Consultant CP Advisor             | 71.4%                  |
| <b>City of London</b>   |                        |
| • Director, Family & Young People Services                          | 57.1%                  |
| <b>East London NHS Foundation Trust</b>                             |                        |
| • Associate Director for Safeguarding Children                      | 71.4%                  |
| <b>Education – The Learning Trust</b>                               |                        |
| • Head of Attendance & Behaviour                                    | 71.4%                  |
| <b>Homerton University Hospital – NHS Trust</b>                     |                        |
| • Named Nurse for Safeguarding                                      | 42.9%                  |
| • Consultant Paediatrician  | 42.9%                  |

The establishment of the Child Death Overview Panel and the introduction of Rapid Response procedures (April 2008) meant that there were new procedures and relationships in City and Hackney, and it was important to work out how the SCR Sub-Committee's role could most effectively be adapted to avoid duplication of effort and instead to add to the new arrangements. This proved to be a fairly straightforward task – due to the clear and timely way that the new arrangements had been set up in City and Hackney by NHS colleagues.

During 2008-2009 the Serious Case Review Sub-Committee members:

- received notification of every death of a child in Hackney and the City of London;
- discussed each of these situations where there were safeguarding issues, and reached consensus on our response;
- debated and reached agreement on whether to carry out Serious Case Reviews; and,

- oversaw the production of 2 Serious Case Reviews and took responsibility for monitoring the Action Plans that came out of these. (For more information please refer to section 5.2 'Learning the Lessons for Serious Case Reviews').

Finally, there are a number of shared values within the group of Sub-Committee members. Amongst these is a belief in the need to learn from situations where things have either gone wrong, or where there has been a near miss, and to bring an openness to this process.

## 2.5 Training and Development

### Membership

The Training & Development (T&D) Sub-Committee was chaired by Val Wesolowicz - Head of Attendance & Behaviour, The Learning Trust - until Isabelle Trowler - Assistant Director, Hackney CYPS - took on the role in November 2008. At this time, the membership of the group was streamlined as part of a broader initiative by the CHSCB to re-assert its focus. This review of its membership and Terms of Reference enabled the group to renew its strategic purpose and set key priorities for the year ahead. The group met bi-monthly and full attendance was expected by member agencies.

The table below displays a break-down of agency attendance at Training & Development Sub-Committee meetings from November 2008 to April 2009 - during this period, there were 3 meetings. Data regarding attendance at meetings prior to November 2008 could not be collected because the membership changed at this time after the CHSCB undertook a re-structuring exercise of the full Board and the Sub-committees.

| Organisation   | % of meetings attended |
|--|------------------------|
| <b>Chair of the Training &amp; Development Sub-Committee</b> | 100%                   |
| <b>City &amp; Hackney Safeguarding Children Board</b>        |                        |
| • Professional Advisor to the Board                          | 100%                   |
| • Community Partnership Advisor                              | 67%                    |
| • Multi-agency Training Co-ordinator                         | 100%                   |
| <b>Children's Social Care</b>                                |                        |
| • Head of Children in Need                                   | 100%                   |
| • Workforce Development Manager                              | 67%                    |
| <b>City and Hackney Primary Care Trust</b>                   |                        |
| • Children's Service and Strategy Consultant                 | 67%                    |
| • Child Protection Advisor                                   | 33%                    |
| <b>City of London</b>  |                        |
| • Children's Social Care Manager                             | 67%                    |
| <b>East London NHS Foundation Trust</b>                      |                        |
| • Associate Director for Safeguarding Children               | 33%                    |
| • Named Professional for Safeguarding Children               | 33%                    |
| <b>Education – The Learning Trust</b>                        |                        |
| • Head of Attendance and Behaviour                           | 67%                    |
| • Strategy and Project Support Manager                       | 67%                    |
| <b>Homerton University Hospital NHS Trust</b>                |                        |
| • Named Nurse Child Protection                               | 67%                    |
| <b>Metropolitan Police</b>                                   |                        |
| • Detective Inspector  | 33%                    |
| <b>Youth Offending Team</b>                                  |                        |
| • Court Outcome Manager                                      | 33%                    |
| <b>Youth Service</b>   |                        |
| • Youth Service Manager                                      | 100%                   |

## Key priorities

A key priority for the year for the T&D Sub-Committee was to undertake a needs analysis exercise by the member agencies for the multi-agency programme. The member agencies were asked to submit any areas for which they consider multi-agency training necessary and which are currently not provided as part of the core programme. It was agreed along with the Quality Assurance Sub-Committee in January 2009 that this exercise would most suitably form part of a wider Section 11 audit across all agencies. Within this audit, agencies were requested to give some detail about the safeguarding training they currently provide, what the current arrangements are for identifying need, the impact of training provided and quality assurance. The findings of the audit will be presented in the new financial year and will inform the commissioning of the 2009-10 CHSCB Multi-agency Training Programme.

The T&D Sub-Committee is committed to the development of a training strategy which will underpin the work of the Sub-Committee and provide a multi-agency and single-agency focus. In the later part of the year, the group commissioned an independent consultant to undertake an in-depth review of the Multi-agency Training Programme in partnership with all key agencies. This report will make recommendations on how the multi-agency programme can be improved and strengthened for next year. The report will play an important role in the commissioning of the 2010 Training Programme.

The T&D Sub-Committee commissions external trainers to deliver a significant proportion of the Multi-agency Training Programme. This year, the group has outlined significant plans to design and implement a tendering process for an approved list of providers with Hackney Council's procurement service. The introduction of robust procurement arrangements will ensure that multi-agency training is solely delivered by trainers in whom the CHSCB has confidence. On this note, the T&D Sub-Committee would like to strongly thank our pool of experienced internal practitioners from member agencies who continue to design, deliver and evaluate multi-agency training for the CHSCB.

The arrangements for performance management have improved greatly this year with the introduction of a new database system to monitor attendance and keep accurate training history records. Historically, there had been a long-standing concern about the quality of management information provided to agencies about attendance at training. However, the CHSCB Training Co-ordinator is now able to produce regular advanced training attendance reports to help the member agencies manage their overall strategy for safeguarding training. Similarly, the new database has improved the arrangements for the evaluation of trainers and overall success of the CHSCB Training Programme.

A key priority for the T&D Sub-Committee was to ensure arrangements are in place to fully implement requirements for the Safer Recruitment Programme. This year, The Learning Trust has delivered 4 training workshops to school staff, including Head teachers and a number of school governors. Some Head teachers have elected to do the training online with the National College of School Leadership. Others have attended training delivered by other organisations. There are 7 schools where no staff are listed as trained and they will be targeted for Safer Recruitment training next year. In addition, the Section 11 audit requested that agencies give details on how safer recruitment is ensured and the results of this audit will be analysed in the next year.

Finally, the T&D Sub-Committee has been allocated a significant increase in resources for next year. The training budget for 2009-10 is set at £32000 which represents a 22% increase on the previous financial year. An important priority will be to commission the 2009-10 Multi-agency Training Programme within budget. The T&D Sub-Committee

keeps a regular check on spending and it is a standing item at its bi-monthly meetings. The budget is also closely monitored by the Finance Sub-Committee.

### Multi-agency Training Programme

The CHSCB Multi-agency Training Programme reflects local priorities and lessons learnt about best practice and its supporting evidence. The Programme ran from April 2008 to March 2009 and featured over 30 training courses. The courses range from introductory child protection awareness to specialised topical subjects within a safeguarding context. The basic courses in safeguarding children and the London Child Protection Procedures have remained very popular and attract participants across all agencies. From April 2008 to March 2009, there were 906 attendees at the range of multi-agency training courses in Hackney and the City. Training on managing allegations against professionals has been a key addition to the programme this year. The current model for training levels and target audiences is based on the guidance in Working Together (2006).

### Training Data

The training data displayed is collected from attendees for the period of January to March 2009 (data has been recorded onto the new database since beginning of January 2009).

Figure 1 gives a break-down of the number of attendees from different agencies at training courses. Hackney Children’s Social Care had the largest proportion of attendees at training. The Learning Trust and Schools combined represented the second largest group. Despite low multi-agency training attendance figures for some single agencies such as the Homerton Hospital NHS Trust, the results of the Section 11 audit are likely to confirm that single agencies are providing internal child protection training to their staff.

Table 1 shows the number of attendees on training courses. There were 338 attendees at courses between January to March 2009 and 80% of places were taken up. The introductory courses followed by *Bwise 2 Sexual Exploitation* proved to be the most popular in the last quarter of the year.

Figure 1 – Agency Attendance 1/1/09-31/3/09

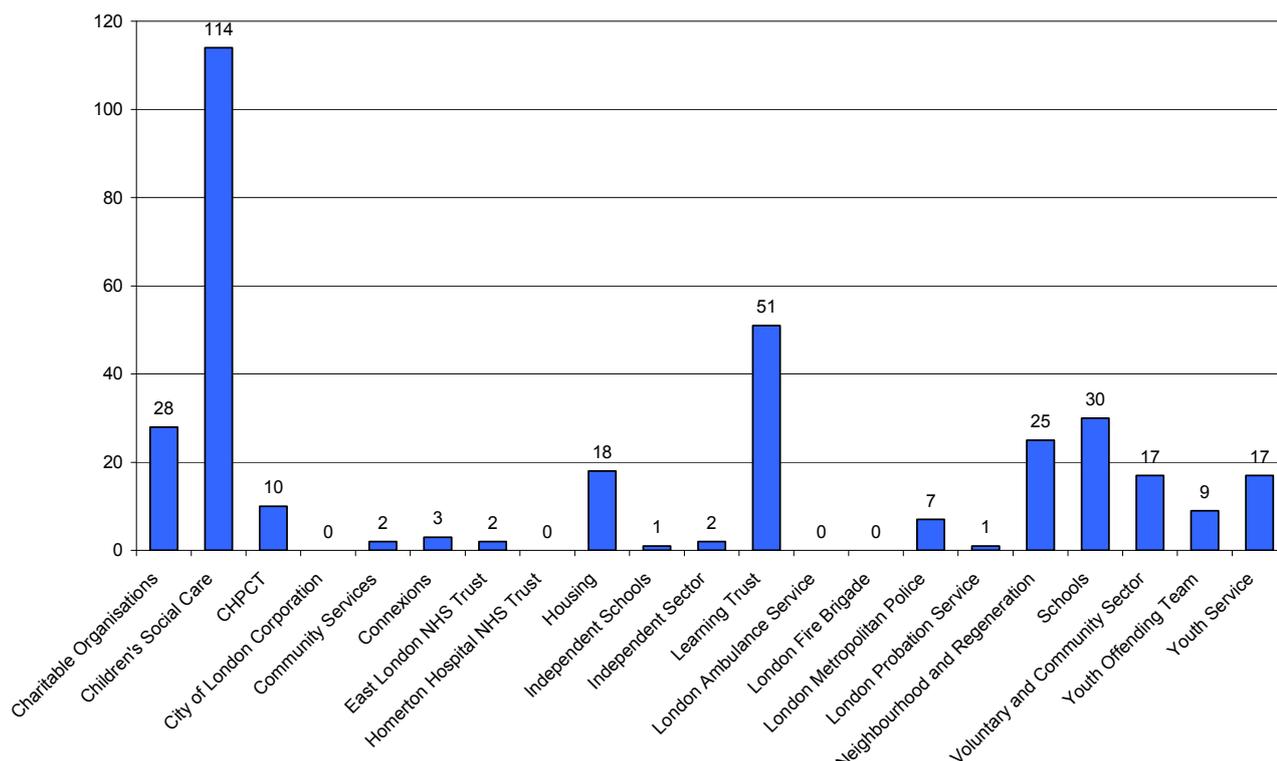


Table 1 – Course Attendance from 1 January 2009 to 31 March 2009

| Course Name  | Maximum Number of Attendees | Actual Number of Attendees |
|--|-----------------------------|----------------------------|
| Introduction to Safeguarding Children - 3 courses                                | 75                          | 79                         |
| Introduction to all London Child Protection Procedures - 3 courses               | 75                          | 73                         |
| Bwise 2 Sexual Exploitation  | 25                          | 25                         |
| Refresher: Child Protection for Nominated Safeguarding Children Advisers         | 25                          | 22                         |
| Impact of Parental Mental Health on Children & Young People                      | 25                          | 20                         |
| Parental Substance Misuse and Implications for Children                          | 25                          | 19                         |
| Working with Black & Minority Ethnic Families in Child Protection                | 25                          | 17                         |
| Safeguarding Children living with Disabilities                                   | 25                          | 16                         |
| Communicating with Children  | 25                          | 15                         |
| Professional Dangerousness   | 25                          | 15                         |
| Investigative and Assessment Skills  | 25                          | 14                         |
| Foundation in Child Protection and Safeguarding                                  | 25                          | 12                         |
| Update Seminar: Harmful Traditional Practices & their Impact on African Children | 25                          | 11                         |
| <b>TOTAL</b>   | <b>425</b>                  | <b>338</b>                 |

## Conclusion

The T&D Sub-Committee has made significant progress in achieving its key priorities set for 2008-09. It has outlined important plans to review the existing multi-agency training programme and ensure it is fit for purpose by commissioning an external consultant. The T&D Sub-Committee has demonstrated its commitment to ensuring high-quality training by launching a procurement project to tender for an approved list of trainers. For 2009-10, the T&D Sub-Committee will have to keep this project on track in order for the new improved multi-agency training programme to be launched in 2010. A key success for 2008-09, has been the introduction of new technology to record training data and project reports for performance management by the single agencies. It will support single agencies to manage their overall strategy for safeguarding training and the improvements should be greatly visible in the upcoming year.

The T&D Sub-Committee has ensured that arrangements are in place to implement the Safer Recruitment Programme. The majority of schools in the borough have staff that have been on workshops provided by the Learning Trust or used alternative training methods for Safer Recruitment. There are 7 schools where no staff have been trained and it will be a key priority for the T&D Sub-Committee to ensure they have been trained in 2009-10. The findings of the Section 11 audit will present Safer Recruitment procedures in other single agencies.

The T&D Sub-Committee has been allocated a significant increase in resources for next year. It will be important that the group continues to monitor its spending and stay within budget. It is predicted that the extra resources will be used to fund the commissioned review of the training programme and the procurement process.

Overall, the work completed this year by the T&D Sub-Committee reveals a strong dedication to encouraging multi-agency training with a focus on working together, information sharing and fostering strong inter-agency relationships.

## Part 3 – Finance and Performance

### 3.1 Budget and Finance

In 2008/09 the budget for the CHSCB was managed by the London Borough of Hackney. The total budget for the Board was £126,000 and was met in part by £23,000 of contributions from partner agencies, with the Borough financing the balance.

In September 2008, a new staffing model was adopted to enhance the Board's capacity to address safeguarding issues and development work with agencies across the partnership. The total cost of this new arrangement was budgeted at £310,000 and is analysed in the table below.

|                      |           |
|----------------------|-----------|
| <b>Staffing*</b>     | £ 245,000 |
| <b>Expenses:</b>     |           |
| Independent Chair    | £ 18,000  |
| Serious Case Reviews | £ 15,000  |
| Training Programme   | £ 32,000  |
| <b>Total</b>         | £ 310,000 |

\* Includes 75% of Head of Safeguarding post, Group Manager & LADO, Safeguarding Project Manager, Board Co-ordinator, Training Co-ordinator.

In the light of these increased costs, contributions from partner agencies were reviewed by the Finance Sub-Committee and it was proposed that 61 per cent (£190,000) of this revised cost be met by the Borough, four per cent (£12,000) would be met by each of the Metropolitan Police and Homerton Hospital, with the remaining agencies contributing eight per cent (£24,000) each. All agencies have now signed up to these revised contributions.

Monitoring of spend against budget is to be managed through the Finance Sub-Committee and is to be reported to the CHSCB on a quarterly basis.

### 3.2 Business Plan 2009 – 2010

#### All Actions to be completed by March 2010

| No. | Objective  | Key Actions  | Lead Person or group   |
|-----|--|--|--|
| 1.  | Good governance with meaningful performance indicators that hold agencies to account for their safeguarding responsibilities.          | <ul style="list-style-type: none"> <li>• To devise a reduced set of performance indicators;</li> <li>• All partner agencies to ensure that the S11 audit is completed on time and reflects the state of safeguarding within their service; and,</li> <li>• Ensure that all S11 performance indicators are useful for all partner agencies with their own regulators.</li> </ul>  | <p>Quality Assurance (QA) Sub-Committee</p> <p>All Board members</p> <p>QA Sub-Committee</p>   |
| 2.  | Training and Workforce programme to ensure the highest levels of practice across agencies including safer recruit procedures in place. | <ul style="list-style-type: none"> <li>• The Board is confident that both its own training programme and programmes within agencies promote best practice; and safer recruitment procedures are in place;</li> <li>• Review of current Safeguarding Board Training Programme to be completed and recommendations are brought to the Board;</li> <li>• That the Train the Trainer programme is completed and on target for all Schools and Early Years setting by July 2009; and,</li> <li>• That any Safer Recruitment issues that arise from the S11 audit are dealt with and a report made available to the Board meeting by 19th October 2009.</li> </ul> | <p>Training &amp; Development (T&amp;D) Sub-Committee</p> <p>T&amp;D Sub-Committee<br/>Isabelle Trowler</p> <p>T&amp;D Sub-Committee<br/>Val Wesolowicz</p> <p>All Board members</p> |
| 3.  | Shared understanding of Board's relationship to partner organisations and accountabilities.  | <ul style="list-style-type: none"> <li>• A map is drawn illustrating the links to and from other partnerships. Any identified gaps are addressed and reported to the Board;</li> <li>• Chair continues the regular programme of meetings with Chief Executives of partner agencies or their representatives; and,</li> <li>• To better understand the range of provision in the voluntary sector and build up relationships that ensure the Board's work supports the requirement of that sector.</li> </ul>   | <p>Sophie Humphreys &amp; Elaine Peers</p> <p>CHSCB Independent Chair</p> <p>CHSCB Professional Advisor</p>  |

## 3.2 Business Plan 2009 – 2010

### All Actions to be completed by March 2010

| No. | Objective  | Key Actions   | Lead Person or group   |
|-----|--|---|--|
| 4.  | Child Death Overview Panel (CDOP) functioning effectively.   | <ul style="list-style-type: none"> <li>The CDOP reviews all child deaths within timescale;</li> <li>Themes and learning from the Child Death Overview Panel are reported six monthly to the Board. The Board to ensure that partner agencies act on recommendations appropriately; and,</li> <li>All appropriate agencies attend the Child Death Overview Panel as required. Any attendance issues reported to the Board.</li> </ul>                        | <p>Child Death Overview Panel (CDOP)</p> <p>CDOP</p> <p>CDOP</p>                           |
| 5.  | Serious Case Reviews (SCRs) carried out to a high standard, action plans implemented effectively and lessons learnt evidenced. | <ul style="list-style-type: none"> <li>SCRs to continue to receive a good or better evaluation from Ofsted;</li> <li>The action plan from all Serious Case Reviews are completed and an annual report brought to the October Board meeting; and,</li> <li>All appropriate agencies attend Serious Case Reviews Sub-Committees as required. Any attendance issues reported to the Board.</li> </ul>  | <p>Serious Case Review Sub-Committee</p> <p>SCR Sub-Committee</p> <p>SCR Sub-Committee</p> |
| 6.  | The Board begins to consolidate links to regional and national safeguarding bodies and policy makers.                          | <ul style="list-style-type: none"> <li>To take account of and implement any recommendations arising from Lord Laming's safeguarding review;</li> <li>To continue contributing to devising Serious Case Review protocols within the London Safeguarding Board; and,</li> <li>That our Independent Chair via the National Independent Chairs Network is to influence senior policy makers and disseminate good practice examples to Board members.</li> </ul> | <p>Jenny Goodall<br/>Alan Wood</p> <p>Isabelle Trowler</p> <p>CHSCB Independent Chair</p>  |
| 7.  | Have a financial and staffing structure in place that supports the Board in its business.                                      | <ul style="list-style-type: none"> <li>A budget update and statement of accounts to provide to the Board for January 2010;</li> <li>Budget proposal for 2010/2011 agreed at the Board meeting for January 2010; and,</li> <li>All Board support posts recruited.</li> </ul>   | <p>Finance Sub-Committee</p> <p>Finance Sub-Committee</p> <p>Finance Sub-Committee</p>     |

## Part 4 – How we are ‘Working Together’

This section of the Report gives details of a number of initiatives within the CHSCB area where multi-agency working contributes to keep children and young people safe.

### 4.1 Change for Children Network

The Change for Children Network is a multi-agency professional network of managers across Hackney’s Children’s Services. The network meets once a term and brings together senior and middle managers from the main partner agencies: London Borough of Hackney Council, City and Hackney Primary Care Trust, East London NHS Foundation Trust, Homerton Hospital, Metropolitan Police, The Learning Trust as well as Head Teachers and Heads of Children’s Centres.

The network aims:

- to enable personal links and networking across children’s services;
- to enable ongoing learning and development of best practice in integrated working;
- to act as a tool for developing a “Children’s Trust in action”, particularly at the levels of front-line delivery and shared processes; and,
- to cement the shared goal of delivering improved outcomes for children and young people across the children and young people’s workforce.

The meeting attracts an average of 100 participants and the agendas range across the Every Child Matters agenda. Each meeting is themed and although many of the meetings have included elements of safeguarding practice, two meetings have specifically had a safeguarding theme.

‘Reclaiming Children’s Social Care’ in Hackney looked at the new model for delivery of social work services, outlined the therapeutic interventions and clinical input within the social work units, and set out how Tier 2 social work services within community settings link in with the frontline assessment services in Children’s Social Care.

More recently the network looked at Safeguarding Children in Hackney. Presentations were led by the Director of Children’s Services and the Chair of the Safeguarding Children Board on effective arrangements in Hackney and how safeguarding is everyone’s responsibility. In addition, there was a practitioner-led case study on effective partnership working and a table workshop on our Section 11 audit tool. Other themes have covered Workforce Development, Information Sharing, Think Family and Mental Health.

### 4.2 Mobile Gang Intervention Team

Hackney Youth Offending Team’s Mobile Intervention Team is one of three strands within the Local Partnership’s Strategy to tackle weapons and gang related crime and violence and was established in response to a worrying 34.2% increase in gun enabled crime in 2004/5. Along with Southwark and Lambeth, Hackney had 10-12 incidences of gun crime per 10,000 of population – the highest rates in London. While there were a number of interventions in existence at the time, it was felt that these lacked coordination and were not suitable to meet the increasing need for support, intervention and enforcement.

In 2006 Team Hackney, the Local Strategic Partnership, developed the Floor Target Action Plan (FTAP) to outline plans for the three strand strategy which included: 1) the Police's Operation *Stabiliser*; 2) *Youth Futures* delivered through the Voluntary & Community Sector (VCS); and, 3) the *Mobile Intervention Team* (MIT). The plan was to deliver appropriate intervention to steer young people away from gang and group offending (*Youth Futures*), provide support to those already in gangs to exit (MIT) and tough enforcement to those refusing to change their behaviour. *Youth Futures* has since developed into commissioning arrangements for VCS through Positive Activities for Young People (PAYP) funding.

This three strand strategy of intervention, support and enforcement was not commonplace in 2006 but has since been encapsulated in the Government's Youth Crime Action Plan and named the 'triple track approach'.

The structure of the MIT was therefore established as: 1) Head of Youth Crime Reduction; 2) Operations Manager for Prevention Services; 3) MIT Manager; 4) MIT Key Workers x 4; and, 5) Metropolitan Police Service (MPS) Constable. The MIT Key Workers provide assessment, intervention and support to young people either on statutory court orders supervised within the YOT as well as young people not on orders but either involved or at risk of involvement in gang and group offending (Prevention). The Police Officer facilitates the smooth flow of intelligence about existing and emerging gang / risk issues. The support offered to all young people referred to MIT is voluntary (i.e. non-statutory) and therefore not compulsory or breachable – even for young people on statutory court orders. It is important that young people identify for themselves the need for support rather than receiving this support through compulsion.

The interventions provided through MIT are many and varied but the key elements include the following:

- The Rise Above programme is delivered through either one-to-one or group work sessions, in schools, Youth Clubs as well as part of intervention within statutory orders. Sessions are delivered to order and host agencies / workers can request any combination of the 12 sessions according to assessed need and topics covered include identity, culture, personal safety, peer groups and pressure, decision making, weapons awareness etc;
- The Trading Places sessions are delivered in partnership with The Crib and through Youth Clubs. They involve role play between young people and serving Police Officers where sessions encourage each group to see the world through each other's eyes and include role play where the Police and young people swap roles. The aim is to increase understanding of each other and reduce the tension that often exists between young people and the Police;
- The MPS Leadership Programme is a highly effective 12-week programme delivered by the Black Police Association (BPA) which aims to raise the aspirations of participants. Where this programme has been delivered many of the young people have gone on to further and higher education as a result; and,
- Community based outreach / detached work is delivered to identified hotspots to engage young people and signpost them into appropriate interventions and activities. This approach has proved effective in some of the most challenging areas across the borough and is often developed in partnership with local agencies to ensure the work is sustainable.

In addition, the MIT approach is based on the principles of risk assessment and management, flexibility of intervention length according to ongoing assessment of need, and where necessary, resettlement through partnership working.

The vast majority of referrals to MIT come from Criminal Justice sources including the Police (23%), YOT (25%), YPPO (26%) and Safer Neighbourhood Teams (10%). The other main referrers are Children's Social Care (13%) and Schools (3%). Now that the Partnership Triage Unit is established and based at the YOT it is envisaged that the majority of referrals to MIT will be risk assessed through this pathway, thus improving the timescales from identification to allocation and engagement.

The evaluation of MIT undertaken by WM Enterprises in 2008 found that:

*"MIT is clearly undertaking worthwhile activity and at times when they are delivering prevention activity with gangs via outreach and the Rise Above programme, police have noted a reduction in levels of crime and disturbance..."*

After MIT intervention young people reported an increased involvement in training and employment with a resultant reduction in unemployment, increased motivation and confidence and a lower propensity to offend.

### 4.3 Triage Unit

The Triage Unit operates within the framework outlined in *Information Sharing: Guidance for Practitioners and Managers* (HM Government, 2008).

The aim of the Triage Unit is to use information sharing coupled with informed analysis from multiple agencies to gain a balanced perspective on the risks facing children, young people and their families and to use that perspective, where appropriate, to choose the most appropriate service to do further assessment and intervention.

The Triage Unit works in a multi-agency partnership with the following agencies:

- The Learning Trust
- Metropolitan Police Service
- Team Hackney
- Hackney Council
- City & Hackney NHS Teaching Primary Care Trust
- Homerton University Hospital NHS Foundation Trust
- East London & The City Mental Health NHS Trust

It is expected that a Triage Unit 'Case' will commence with the identification of a new 'Merlin' Police Incident Report and end when the case has been assessed, a lead professional and other relevant agencies have been identified and passed information relevant to the case. It is not expected that, except under exceptional circumstances, the hand over of the case will include any precise or enforceable instructions to follow one or more specific courses of action to achieve a suitable set of outcomes. Given the provision of timely information it will be the responsibility of the agencies to whom the case is referred to decide how it should be handled.

The Triage Unit is designed to be a fast pre-assessment, information gathering, case assessment and hand off process ideally taking less than 90 minutes from receipt of the 'Merlin' for the entire process to be complete and handed over.

## Part 5 – Other Key Developments and Updates

### 5.1 Community Engagement

The role of the Community Partnership Adviser was borne out of the London Safeguarding Children Board Community Partnership Project. A key objective for the Community Partnership Project was to engage black and minority ethnic communities and faith groups in safeguarding their children, with some focus on four specific areas of child abuse: Female Genital Mutilation (FGM), honour based violence, abuse linked to a belief in spirit possession and child trafficking.

The aim of the Community Partnership Adviser (CPA) role is to improve partnership working between statutory bodies, faith groups and minority ethnic communities. This is achieved by gathering and sharing information, promoting improvement in practice and increasing awareness on safeguarding children.

Hackney is an ethnically diverse borough and this may give rise to a plethora of safeguarding concerns that are culturally and religiously related. As part of the role, the CPA has provided case consultation to social care professionals, undertook joint home visits and arranged for experts to deliver targeted sessions to social care staff. The thrust of the work has been undertaken in partnership with schools, supplementary schools, churches and community organisations.

The CPA has worked in partnership to deliver safeguarding training for Hackney Community and Voluntary Service (HCVS), which is the umbrella organisation for the voluntary sector. Moreover, the CPA has worked in partnership with the Council's Domestic Violence team, CHYPS Plus and Stop It Now in order to deliver seminars to parents and safeguarding training sessions to community organisations in relation to domestic violence, keeping children safe on the internet and sex education. Additionally, the Turkish, Somali, Congolese and other black and ethnic minority parents have benefited from receiving training on UK Child Protection laws and honour based violence.

During 2008-2009 the CPA has established and maintained relationships with the following community organisations: 1) Akina Mama; 2) AFRUCA; 3) Ashiana Network; 4) Black Parents Community Forum; 5) Claudia Jones Organisation; 6) Congolese SOS; 7) Educators Forum; 8) Family Action (Congolese and Somali groups); 9) Hackney Play Association; 10) Hackney Refugee Forum; 11) Hackney Voluntary and Community Service; 12) Imece; 13) International Dance & Music Centre; 14) Organisation of Positive African Men; 15) Refugee Workers Cultural Association; 16) Rise Community Action; 17) Social Action of Health; 18) SOS Congolese; 19) Stepping Stones; 20) Stop it Now Campaign; 21) Trinity Centre; 22) UK Congolese Safeguarding Group; and, 23) Workers Educational Association.

The work of the CPA has also involved setting up a Child Trafficking Steering Group, which primarily focuses on increasing awareness of child trafficking and improving partnership working. The group's membership includes statutory and voluntary organisations from health, education, children social care, Hackney Refugee Forum, Hackney African Forum, Stop the Traffick and AFRUCA. Members have benefited from presentations by Child Exploitation and Online Protection, Metropolitan Police Paladin Child and an Immigration Barrister and judge. Having representation from the voluntary sector has the twin effect of increasing awareness and strengthens community engagement.

Although, there have been successes thus far, there is a need to develop links with other sectors of the community and to find ways of overcoming current and anticipated challenges. Some of the current challenges include:

- Increasing awareness of the safeguarding agenda within churches is a continued challenge, especially given the large number of churches, their mobility and limited contact details. In spite of this, links were made with an ecumenical group of Christian faith leaders and the borough dean for black majority churches. However, a concerted effort still needs to be directed towards developing a partnership with these churches;
- The role of the CPA is often seen as being an agent of the Local Authority. This is especially the case where the CPA is asked to approach faith and community groups following an investigation against a professional within their organisation;
- Working in partnership with grass roots community organisations is affected by their ability to remain functional after their funding has been expended. This effectively results in a loss of community contacts, which sets back strides that have been made to develop them;
- Some faith and community groups have a fear of statutory services and this manifests itself in the form of mistrust of the Council. Therefore, the role of the CPA being based within the Children in Need team, has created particular challenges with developing links with these groups; and,
- Engaging with the Hasidic Jewish community has been a slow process and will need to be part of a strategic plan to improve engagement.

## **5.2 Learning the Lessons from Serious Case Reviews**

During the last year the CHSCB has completed two Serious Case Reviews (SCR) both relating to children who were killed by a parent. The first by a mother who had serious underlying mental health issues and the second by a mother with complex needs. In both cases the tragic deaths were not in any way attributed to any of the agencies or professionals involved however a number of useful learning points came out of the reviews resulting in comprehensive action plans.

The first SCR provided an opportunity to reflect on how Children's Social Care and Adult Mental Health Services work together and one of the outcomes has been the revision of the Joint Mental Health Protocol incorporating a number of the recommendations made in the review. The Protocol is due to be launched Summer 2009.

The second SCR has highlighted the complexity of some of the families that we work with and the high number of different services a family may be having contact with, without each agency always being aware of the others involvement. This review has resulted in some recommendations that when fully implemented should help to identify some of the potential issues that may impact on the welfare of children at an earlier stage.

The majority of actions have now been implemented for both SCRs, and any that are remaining incomplete are clearly on target of completion. Each action plan is monitored on a bi-monthly basis through the Serious Case Review Sub-Committee.

Once an action plan is fully implemented the action plan will be reviewed annually by the SCR Sub-Committee to ensure that actions are still being implemented.

The SCR Sub-Committee not only looks at CHSCB's own reviews and action plans but also takes the opportunity to identify learning points from other Safeguarding Board's Reviews and where appropriate make recommendations to its own agencies. During 2008-2009, the learning has not been limited to the specific cases or other SCRs but also an enormous amount of learning has taken place in regards to the SCR process itself. The first SCR received an 'Adequate' evaluation from Ofsted and gave the Board an opportunity to reflect on what it would need to do in order to receive a 'Good' or 'outstanding' evaluation. The learning applied from the first review to the second resulted in the second SCR receiving a 'Good' evaluation.

Some of this learning in relation to undertaking SCRs has been superseded by the recommendations that arose out of Lord Laming's review into Safeguarding following the death of baby 'P' in Haringey, which will of course be applied to any future SCRs undertaken by the CHSCB.

### 5.3 Rapid Response

#### Background

Since April 2008 Local Children's Safeguarding Boards have been required to set up Child Death Review Processes which are managed overall by a Child Death Overview Panel. There are 2 initial processes for reviewing a child's death. The first of which is the Rapid Response meeting. Following any 'unexpected' death a Rapid Response meeting of relevant professionals who knew and worked with the child is convened with the expectation that they will seek to understand the reasons for the child's death, address the possible needs of other children in the household and the needs of all family members. The group is also expected to consider any lessons to be learnt about how best to safeguard children and promote their welfare in future. In a minority of cases if the 'unexpected' death is thought to be a consequence of abuse and neglect, the group can ask for consideration that a Serious Case Review be undertaken. Throughout the process it is expected that families and all persons involved at the time of the child's death are treated with sensitivity and respect.

The definition of 'unexpected' death of a child is that it was not anticipated as a significant possibility 24 hours before the death of the child. The death of a child with known disability or medical condition who dies unexpectedly is also reviewed under the Rapid Response processes. The 'unexpected' death of all children and young people up to the age of 18 years are considered. The initial Rapid Response meeting usually happens within 2 to 4 days of the child's death.

The City and Hackney Safeguarding Children Board have appointed a Designated Paediatrician for deaths in childhood. The paediatrician works closely with all agencies in convening the meetings and in coordinating the multi-agency response.

The professionals usually involved in the Rapid Response meetings are the GP, nurse, health visitor, midwife, mental health professional, social worker and probation officer. Also, the police team involved in the investigation of the child's death and nursery or school staff who worked with the child are key to the meeting. From time to time others also attend, these have included the London Ambulance Service and faith

leaders. The team liaises closely with the pathologist and the Coroner and shares the minutes of the meeting with them.

A second meeting of the group is convened 6 to 12 weeks after the child's death. The timing is dependent on the needs of the family, the outcome of the post mortem and police investigations.

An innovation which has been linked with the Rapid Response meeting is the introduction of joint home visits by the police and the senior paediatrician on call at the hospital at the time of the child death. These visits provide an opportunity for the paediatrician to meet with parents in their home setting and to provide a health perspective to the investigation.

### Rapid Response Meetings April 2008 to March 2009

Twenty two initial or follow up Rapid Response meetings were held over the year. The deaths investigated were in children and young people between the ages of 3 weeks to 17 years old and included deaths due to traffic accidents, stabbing and gang violence, infection and sudden infant death syndrome.

The meetings have demanded close working between agencies and the need to adjust schedules rapidly to meet necessary deadlines. Agencies who have in the past not worked closely together are now doing so with greater shared trust and confidence. Discussions at the meetings have reflected the shared preventative responsibilities of parents, professionals and society.

### Learning points

The Rapid Response meetings are often concurrent with other investigations which may include Sudden Unexpected Incident enquiries, police investigations, Social Care section 47 enquires and Serious Case Reviews. The pressures and demands of these enquiries are often stressful for those involved and we have learnt the importance of supporting those involved in these investigations.

We have learnt that the necessary delays and completion of the full pathology report can be a time of stress for both parents and clinicians and the importance of maintaining communication with families over this time. We have understood the importance of close liaison with the Coroners and his/her officers and continue to work towards strengthening communication with the team.

The chairing of the meetings has been mainly by the Designated Doctor for Child Deaths. Moreover, we have learnt that in circumstances where expertise in social care law is important the meetings are best chaired by a Senior Social Care Safeguarding professional.

Lessons learnt from Rapid Response meetings are fed back to the CDOP, where recommendations for further Public Health action are considered, and to the CHSCB. To date these have included the reinforcement of advice about car seats for babies, protocols reviews in hospital and GP settings, the reinforcement of advice to parents about co-sleeping with babies and changes to the London Ambulance Service/Police Protocols following home attendance after sudden infant death.

There have been no recommendations for Serious Case Reviews following the Rapid Response meetings in this 12 month period.

## 5.4 Safer Recruitment and Managing Allegations

### Background

The 'Bichard Inquiry' was set up in January 2004 following the murder of two children by a school caretaker. The Inquiry recommended various measures to ensure a proper consideration of all relevant information to safeguard children in relation to people working with children either in a voluntary or paid capacity.

In brief the 'Bichard Inquiry' recommended:

- improvements in Information Systems in relation to the Police;
- new arrangements for a Registration Scheme for all people wishing to work with vulnerable people so that checks could be made by employers to ensure that there is no reason why an individual should not work with children or vulnerable adults; and,
- Safer Recruitment in all Schools so that at least one member of an interviewing panel is accredited by the DCSF in Safer Recruitment.

### The new Registration Scheme

One of the issues the 'Bichard Inquiry' looked at was the way employers recruit people to work with children and vulnerable adults. It asked whether the way employers check the background of job applicants is reliable enough. It also asked whether employers should be responsible for deciding whether a job applicant can be safely employed.

The Inquiry's recommendations led to the 'Safeguarding Vulnerable Groups Act' (November 2006), which recognised the need for a single agency to vet all individuals who want to work or volunteer with vulnerable people. The Independent Safeguarding Authority (ISA) was created to fulfil this role across England, Wales and Northern Ireland.

The Independent Safeguarding Authority's (ISA) role is to help prevent unsuitable people from working with children and vulnerable adults. Every person who wants to work or volunteer with vulnerable people will be assessed by the ISA using data gathered by the Criminal Records Bureau (CRB). Only applicants who are judged not to pose a risk to vulnerable people will be 'ISA registered'.

The ISA Vetting & Barring Scheme (VBS) will be launched in October 2009. Once the Scheme is fully rolled out, employers who work with vulnerable people will only be allowed to recruit people who are 'ISA registered'. This will result in many more people that pose a risk to vulnerable people being excluded from the workplace.

### Safer Recruitment Training Programme

The 'Bichard Inquiry' recommended that Head Teachers and school governors should receive training and that all interview panels to appoint staff working in schools should have at least one member of the panel who has been trained on safer recruitment practices. Legislation will shortly make this a legal requirement. It is expected that this will eventually be a requirement for all agencies working with children.

The training for Head Teachers and governors can be accessed on-line through the National College of School Leadership (NCSL). The Learning Trust (TLT) has also set up a training programme to meet schools needs that can be delivered flexibly with either two full days or 4 separate twilight sessions. The trainers are NCSL accredited and from both Human Resources and Social Care backgrounds. 9 TLT and

Children's Social Care (CSC) staff have completed the training the 'Trainer Course' and are therefore qualified to deliver these courses.

To date 37 people have successfully completed the training on line, 58 have attended TLT training and 51 have attended Schools Direct training delivered on behalf of TLT. Additionally 17 members of staff and governors were trained at one of the Academies by an external training organisation and we are awaiting confirmation of the number who successfully completed that course.

In the next year, the City & Hackney Safeguarding Children Board will produce a proposal in relation to the new 'ISA Vetting & Barring Scheme' and the 'Safer Recruitment Training Programme'.

### **Managing Allegations**

The procedures for Managing Allegations against those working with children have been set out in Appendix 5 of Working Together (April, 2006) with further guidance set out in the London Child Protection Procedures (October, 2007, pp. 447- 462).

An allegation must be investigated where there is reasonable cause to believe that a person who works with children has:

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

### **Arrangements for managing allegations against those working with children**

Each local authority is required to appoint a Local Authority Designated Officer. Also, every LSCB Member organisation is required to identify a named Senior Officer to ensure that their organisation deal with allegations in accordance with the London Child Protection Procedures (LCPP).

### ***Initial Evaluation by the Local Authority Designated Officer (LADO)***

On receiving notification of an allegation the employers are required to inform the LADO within 1 working day. The LADO decides if the allegation meets the criteria for an investigation and advises the employer of any immediate action that might be required to safeguard children and how to inform parents. The LADO instructs the Child Protection Coordinators to convene a strategy meeting referred to as a Management Planning Meeting. This meeting should be convened within 3 working days.

### **Setting up the first strategy meeting or Management Planning Meeting (MPM)**

Before a MPM can be held a social worker from Children's Social Care has to be allocated. The social worker contacts all the relevant attendees including the police.

The purpose of the MPM is to: 1) clarify information around the allegation; 2) decide on who will gather evidence from the potential victim, witnesses and alleged perpetrator; and, 3) address any safeguarding issues and how the duty of care to the child, family and alleged perpetrator will be discharged.

## Early Indications of Allegations Profile in Hackney

The following information represents a partial picture. This is because the system has only been recently implemented.

### a) Numbers

Since the inception of the database in July 2008 there have been 47 cases initiating investigations under the Management of Allegations Procedures. This does not reflect the number of referrals to the LADO for consideration and records of this are not currently available.

### b) Category of Abuse

- approximately 38% of allegations relate to physical abuse;
- 31% are allegations of sexual abuse; and
- the rest are emotional abuse or unsuitable behaviour.

### c) Gender

- 38% of the children disclosing abuse are female and 62% are male;
- 57% of the alleged perpetrators are male and 38 % are female; and,
- The gender of the remaining perpetrators is not noted.

### d) Age range of children disclosing abuse

- about 25% of the children are aged between 5 – 10;
- about 23% of the children are aged between 10 – 14;
- about 20% of the children are aged between 14 – 18; and,
- rest relate to children where the age is not stated.

### e) Location of abuse

- the largest numbers of allegations (31%) are incidents reported to have taken place at school;
- around 25.9 % of alleged incidents occur outside of home, school, nursery and foster placement such as places of worship, leisure activities etc.;
- 25% of alleged incidents occur in the family home. These tend to refer to carers, a significant proportion of whom deal with children with special needs;
- 13.6% of allegations are made against foster carers; and,
- 2% of allegations are made against workers in nursery.

## Appendices

### Appendix a - Child Protection Statistics

|   | 2008 – 2009* | 2007- 2008 | 2006 - 2007 |
|---|--------------|------------|-------------|
| Number of children who have been the subject of Referral to Children’s Social Care (including re-referrals) in the year | 2486         | 3465       | 3057        |
| Number of children receiving an Initial Assessment in the year  | 1953         | 3000       | 2864        |
| Number of children receiving a Core Assessment in the year  | 1240         | 939        | 767         |
| Children who were the subject of initial Child Protection Conferences during the year                                   | 274          | 297        | 290         |
| Children who were the subject of Section 47 enquires initiated during the year  | 492          | 312        | 390         |

\*Data refer to the time period 1 April 2008 to 31 March 2009.

### Children & Young People who were the subject of a Child Protection Plan

#### a. by category of abuse, age and gender

| Category of abuse as at 31 March 2009 | Boys                |           |           |           |             |            | Girls                |           |           |           |             |             | Unborn children | Total children |
|---------------------------------------|---------------------|-----------|-----------|-----------|-------------|------------|----------------------|-----------|-----------|-----------|-------------|-------------|-----------------|----------------|
|                                       | Age at 31 March 200 |           |           |           |             |            | Age at 31 March 2009 |           |           |           |             |             |                 |                |
|                                       | Under 1             | 1 - 4     | 5 - 9     | 10 - 15   | 16 and over | Total boys | Under 1              | 1 - 4     | 5 - 9     | 10 - 15   | 16 and over | Total girls |                 |                |
| Neglect                               | 12                  | 24        | 13        | 20        | 0           | 69         | 13                   | 20        | 18        | 17        | 1           | 69          | 4               | 142            |
| Physical abuse                        | 1                   | 1         | 1         | 1         | 0           | 4          | 0                    | 0         | 2         | 5         |             | 7           |                 | 11             |
| Sexual abuse                          | 0                   | 1         | 1         |           | 0           | 2          | 2                    | 1         | 3         | 4         |             | 10          |                 | 12             |
| Emotional abuse                       | 1                   | 6         | 5         | 1         | 0           | 13         | 3                    | 2         | 2         | 1         |             | 8           |                 | 21             |
| Multiple/not recommended              | 1                   | 6         | 6         | 4         | 0           | 17         | 1                    | 8         | 3         | 1         |             | 13          | 2               | 32             |
| <b>Total children</b>                 | <b>15</b>           | <b>38</b> | <b>26</b> | <b>26</b> |             | <b>105</b> | <b>19</b>            | <b>31</b> | <b>28</b> | <b>28</b> | <b>1</b>    | <b>107</b>  | <b>6</b>        | <b>218</b>     |

## Children & Young People who were the subject of a Child Protection Plan

### b. by ethnic origin

| Ethnicity                |                            | 2008-09*   | 2008-09%     | 2007-08    | 2006-07    |
|--------------------------|----------------------------|------------|--------------|------------|------------|
| White                    | White British              | 99         |              | 37         | 49         |
|                          | White Irish                | 0          |              | 6          | 5          |
|                          | Any other white background | 20         |              | 27         | 27         |
|                          | <b>Total</b>               | <b>119</b> | <b>56.1%</b> | <b>60</b>  | <b>81</b>  |
| Mixed                    | White and black Caribbean  | 14         |              | 31         | 14         |
|                          | White and black African    | 0          |              | 4          | 1          |
|                          | White and Asian            | 0          |              | 2          | 3          |
|                          | Any other mixed background | 11         |              | 6          | 12         |
|                          | <b>Total</b>               | <b>25</b>  | <b>11.8%</b> | <b>43</b>  | <b>30</b>  |
| Asian or Asian British   | Indian                     | 7          |              | 7          | 0          |
|                          | Pakistani                  | 0          |              | 0          | 0          |
|                          | Bangladeshi                | 3          |              | 0          | 6          |
|                          | Any other Asian background | 1          |              | 0          | 2          |
|                          | <b>Total</b>               | <b>11</b>  | <b>5.2%</b>  | <b>7</b>   | <b>8</b>   |
| Black or Black British   | Caribbean                  | 28         |              | 54         | 31         |
|                          | African                    | 17         |              | 32         | 20         |
|                          | Any other black background | 10         |              | 9          | 11         |
|                          | <b>Total</b>               | <b>55</b>  | <b>25.9%</b> | <b>95</b>  | <b>62</b>  |
| Other ethnic groups      | Chinese                    | 0          |              | 0          | 2          |
|                          | Any other ethnic group     | 2          |              | 3          | 1          |
|                          | <b>Total</b>               | <b>2</b>   | <b>0.9%</b>  | <b>3</b>   | <b>3</b>   |
| Unborn children          |                            | 6          | 2.8%         | 2          | 2          |
| <b>TOTAL CHILDREN</b>    |                            | <b>218</b> |              | <b>220</b> | <b>186</b> |
| Total (excluding Unborn) |                            | 212        |              | 218        | 184        |

\*Data refer to the time period 1 April 2008 to 31 March 2009.

## Appendix b – Children in Care Council

As part of the Care Matters agenda, the government has asked all social services departments to make a Pledge (like a promise) to all children and young people in care about how they will help, support and care for them. In September 2008 the 'Youth Participation Project' took over the stream of work on the development of the Hackney Pledge and of the Children in Care Council (CiCC).

Over the last 8-9 months a group of young people (called the Pledge Leaders) came together to draft the Young People's side of the Pledge. In order to do so, they have undertaken a peer lead consultation with young people in care from 7-18+ years old. Particularly, the Pledge Leaders did the following;

- developed a questionnaire for both younger and older children and young people;
- carried out face to face/ over the telephone interviews with care leavers;
- presentations at staff conferences;
- undergone training to enable them to do the above;
- they organised an open day to gather further information and provide opportunities to recruit new members for the CiCC; and,
- they were involved in the equalities consultation.

To date they have now interviewed 110 young people (face to face and over the telephone interviews) and they have organised a recruitment event as part of their recruitment strategy for the development of the Children in Care Council. The event will be held on the 8th of April 2009 and will be attended by young people who are in care. The Pledge Group will undertake a presentation to other young people present on the Children in Care Council. It is expected that all 12 of the existing Pledge Groups will wish to continue and form part of the CiCC and that as a result of their event other young people will be considering to commit to being part of the CiCC.

The Pledge Group have also been involved in the 'Equality Impact Assessment'. The young people took part in a workshop which focussed on them as clients of children's service and issues relating to equalities.

The CiCC initial meetings have been planned and they will be spent undertaking some team building with the group as well as carrying out a training needs analysis to identify particular training needs in relation to their roles as CiCC members. Once identified, these training needs will form part of a comprehensive accredited training programme, which will equip CiCC with the necessary skills and knowledge to be able to carry out their roles effectively.

## Appendix c – Hackney Youth Parliament

In July 2008 publicity detailing the Hackney Youth Parliament (HYP) election process was coordinated through schools and youth organisations across the maintained, community and voluntary sectors in Hackney. 55 young people from the four Area Youth Forums as well as the Lesbian Gay Bisexual & Transgender (LGBT) Youth Forum put themselves forward for candidate training. All candidates undertook a training programme that equipped them with skills in public speaking as well as how to develop their manifestos. A candidate manifesto booklet was then developed. 10,000 were sent to Schools and youth organisations across Hackney. Candidates also attended a Hustings at Hackney Town Hall, where they were given an opportunity to meet their electorate and discuss their manifesto in more detail. Over 100 young people attended the event.

In October 2008 as part of the 'Council Local Democracy' week programme of events the Hackney Youth Parliament elections were coordinated in all secondary schools as well as youth organisations across the maintained, community and voluntary sectors in Hackney. 3000 young people voted for their representative for their respective area of Hackney. A total of 22 young people were democratically voted into the Hackney Youth Parliament (5 from each Area Youth Forum as well as 2 from the LGBT Youth Forum). From this group of 22, 7 HYP members were chosen to travel to Washington DC in November 2008, as part of an educational visit to make a film about Democracy, which would be utilised as an education resource for schools and youth clubs in Hackney. 'Freedom and Choices – Hackney Youth Parliament Does US Democracy' is now finished and a premier for schools and Youth Clubs will take place in June 2009.

From January 2009 to March 2009 the Hackney Youth Parliament have undertaken training facilitated by The British Youth Council. The training was held over 5 days including sessions at the Town Hall. The core elements of the training were to build a sense of unity and purpose amongst the HYP members as well as develop a Hackney Youth Parliament Constitution. They coordinated a meeting with Councillor Rita Krishna (Lead Member for Children and Young People) at which they presented their draft HYP constitution. They also explored with her how HYP could be involved in Hackney Executive Elected Mayor Council's Cabinet. Councillor Krishna is due to attend a HYP meeting in May to feedback on this as well as on their constitution.

Additionally, during this time the HYP: 1) have attended Westminster to represent Hackney as part of the government's 'Say No To Knives' campaign; 2) received an official invite from the Prime Minister's Office to meet with Ed Balls and Alan Johnson to discuss the government's 'Youth Alcohol Action Plan'; 3) have been invited to a meeting with MP Meg Hillier; 4) received a presentation on Scrutiny with the aim of exploring ways they can meaningfully be involved in the scrutiny process; 5) is due to meet the chairs of the Scrutiny boards to decide the best way forward for their involvement; and, 6) met with the Head of Hackney Youth Service to discuss their involvement in the commissioning process.

Elections have also taken place within the Hackney Youth Parliament to elect the executive committee (Chair, Vice Chair, Finance Officer, Communication Officer, Treasurer and Secretary). Training is also planned to equip the executive committee with the necessary skills and knowledge to carry out their role effectively.

The HYP have decided to prioritise the following issues for the duration of their time in office:

- Increasing the number of young people have a say
- Youth Crime and safety
- Young people and health
- Young People and Education

The HYP are currently developing their campaigns.

## References

*Information Sharing: Guidance for Practitioners and Managers* , HM Government, October 2008.

*London Child Protection Procedures* (3<sup>rd</sup> Edition), London Safeguarding Children Board, October 2007.

*Safeguarding Vulnerable Groups Act*, UK Parliament, November 2006.

*Statutory guidance on making arrangements to safeguard and promote the welfare of children under section 11 of the Children Act 2004*, HM Government, March 2007.

*The Protection of Children in England: A Progress Report* , The Lord Laming, March 2009.

*The Protection of Children in England: Action plan - The Government's response to Lord Laming*, HM Government, May 2009.

*Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children*, HM Government, April 2006.

## Useful Contacts

### Change for Children Network

Contact: Miriam Mutizwa  
Address: The Learning Trust, 1 Reading Lane, E8 1GQ  
Telephone: 020 8820 7058  
Email: miriam.mutizwa@learningtrust.co.uk

### Child Abuse Investigation Team

Contact: David Uwaeche  
Address: Hackney, Newham & Tower Hamlets Police Station, 1 Cam Road, Stratford, E15 2SY  
Telephone: 020 8217 6552  
Email: StratfordCJIT-SCD5@met.pnn.police.uk.cjism.net

### Children in Care Council

Contact: Sheema Meah or Michael Connors  
Address: 205 Morning Lane, E9 6JX  
Telephone: 020 8356 6349  
Email: sheema.meah@hackney.gov.uk

### Hackney Community and Voluntary Service

Contact: Kristine Wellington  
Address: 84 SpringField House, 5 Tyssen Street, London E8 2LY  
Telephone: 020 7923 1962  
Email: info@hcv.org.uk

### Rapid Response

Chair: Anne Nesbitt  
Coordinator: Pernilla White  
Address: 2<sup>nd</sup> Floor, D Block, St Leonard's Hospital, Nuttall Street, N1 5LZ  
Telephone: 020 7683 4276  
Email: anne.nesbitt@chpct.nhs.uk

### Youth Parliament

Contact: Michael Connors  
Address: 205 Morning Lane, E9 6JX  
Telephone: 07772227319  
Email: michael.connors@hackney.gov.uk

## Board Members Contact Details – as at July 2009

| City & Hackney Safeguarding Children Board Members |                   |   |               |                                    |
|--|-------------------|---|---------------|------------------------------------|
| Organisation                                       | Representative    | Position                                    | Telephone     | Email Address                      |
| CAFCASS  | Tom Brown         | Service Manager                             | 020 7210 4100 | tom.brown@cafcass.gov.uk           |
| Children's Social Care<br>Hackney Council          | Isabelle Trowler  | Assistant Director - CSC                    | 020 8356 4779 | isabelle.trowler@hackney.gov.uk    |
|  | Sophie Humphreys  | Head of Safeguarding                        | 020 8356 4042 | sophie.humphreys@hackney.gov.uk    |
|  | Steve Goodman     | Deputy Director - CYPS                      | 020 8356 4734 | steve.goodman@hackney.gov.uk       |
| Child Abuse Investigation Team                     | Kevin Baldwin     | Detective Inspector                         | 020 7217 6481 | kevin.baldwell@met.police.uk       |
| City of London                                     | Gillian Humble    | Director of Family & Young People Services  | 020 7332 1722 | gillian.humble@cityoflondon.gov.uk |
|  | Jenny Goodall     | Director of Community & Children's Services | 020 7332 1650 | jenny.goodall@cityoflondon.gov.uk  |
| City & Hackney<br>Primary Care Trust               | Anne Nesbitt      | Consultant Paediatrician                    | 020 7683 4276 | anne.nesbitt@chpct.nhs.uk          |
|  | Stephanie Sollosi | Children's Services & Strategy Consultant   | 020 7683 4315 | stephanie.sollosi@chpct.nhs.uk     |
|  | Steve Rowlands    | Director of Community Health Services       | 020 7683 4149 | steve.rowlands@chpct.nhs.uk        |
| East London NHS<br>Foundation Trust                | Dean Henderson    | Borough Director                            | 020 8510 8944 | dean.henderson@eastlondon.nhs.uk   |
|  | Lynne Hunt        | Deputy Chief Executive Officer              | 020 7655 4059 | lynne.hunt@eastlondon.nhs.uk       |
|  | Richard Evans     | Clinical Director                           | 020 8510 8297 | richard.evans@eastlondon.nhs.uk    |
|  | Sarah Wilson      | Mental Health Director                      | 020 7655 4063 | sarah.wilson@eastlondon.nhs.uk     |
|  | Vanessa Crawford  | Consultant Psychiatrist & Clinical Director | 020 8510 8629 | vanessa.crawford@eastlondon.nhs.uk |
| Education  | Steve Belk        | Executive Director Learning & Standards     | 020 8820 7351 | steve.belk@learningtrust.co.uk     |
|  | Val Wesolowicz    | Head of Attendance & Behaviour              | 020 8820 7323 | val.wesolowicz@learningtrust.co.uk |
| Hackney Borough Police                             | Steve Dann        | Borough Commander                           | 020 7275 4099 | steve.dann@met.pnn.police.uk       |
| Homerton University Hospital                       | Pauline Brown     | Chief Nurse & Governance Director           | 020 8510 7320 | pauline.brown@homerton.nhs.uk      |
| Safer Communities<br>Hackney Council               | Liz Hughes        | Head of Safer Communities                   | 0208 356 3164 | liz.hughes@hackney.gov.uk          |

**Board Unit Contact Details – as at July 2009**

| <b>City &amp; Hackney Safeguarding Children Board Unit</b>          |                     |                       |                                    |
|---|---------------------|-----------------------|------------------------------------|
| <b>Position</b>   | <b>Name</b>         | <b>Contact Tel No</b> | <b>Email Address</b>               |
| <b>Head of Safeguarding &amp; Professional Advisor to the CHSCB</b> | Sophie Humphreys    | 0208 356 4042         | sophie.humphreys@hackney.gov.uk    |
| <b>Group Manager &amp; Local Authority Designated Officer</b>       | Sarah Wright        | 0208 356 3610         | sarah.wright@hackney.gov.uk        |
| <b>Safeguarding Project Manager</b>                                 | Serena Tommasino    | 0208 356 4836         | serena.tommasino@hackney.gov.uk    |
| <b>Community Partnership Advisor</b>                                | Leethan Bartholomew | 0208 356 6371         | leethan.bartholomew@hackney.gov.uk |
| <b>Multi-agency Training Co-ordinator</b>                           | Alice Tomlinson     | 0208 356 4826         | alice.tomlinson@hackney.gov.uk     |
| <b>Board &amp; Sub-Committees Co-ordinator</b>                      | Irene Hicks         | 0208 356 3661         | irene.hicks@hackney.gov.uk         |
| <b>Child Death Overview Panel &amp; Rapid Response Co-ordinator</b> | Pernilla White      | 0207 683 4344         | Pernilla.White@chpct.nhs.uk        |

You can find an electronic copy of this document online at:  
[www.hackney.gov.uk/chscb.htm](http://www.hackney.gov.uk/chscb.htm)

Copies of this publication can also be obtained from:  
City and Hackney Safeguarding Children Board  
205 Morning Lane  
London  
E9 6JX  
Tel: 020 8356 3661  
Fax: 020 8356 4734

This Report was produced with contributions from: Anne Nesbitt, Elaine Peers, Eric De Mello, Fran Pearson, Jackie Moylan, Jane Woolley, Leethen Bartholomew, Paul Olaitan, Sheema Meah, Sophie Humphreys, Michael Connors, Naeema Sarkar, Val Wesolowicz, and the Chairs of all the Sub-Committees.

The Report also greatly benefited from inputs from: Alice Tomlinson (Report Assistant), Irene Hicks (Report Assistant), Pernilla White, Sarah Wright, Serena Tommasino (Report Co-ordinator), Simon Landau (Cover Designer).

We regret any errors or omissions that may have, unknowingly, been made.

This publication is the property of the City & Hackney Safeguarding Children Board. Extracts from this document may be reproduced for non-profit research, education or training purposes on the condition that the source is acknowledged.

No use of this publication may be made for resale or for any other commercial purpose whatsoever without prior permission in writing of the City & Hackney Safeguarding Children Board.