



**BROMLEY**  
SAFEGUARDING  
CHILDREN  
BOARD

# **BROMLEY SAFEGUARDING CHILDREN BOARD (BSCB)**

## **ANNUAL REPORT 2017-2018**



# Foreword by the Independent Chair

Over the last year the Bromley Safeguarding Children Board (BSCB) has continued to develop, strengthen and improve its partnerships. It is now more coherent than ever before and we are making real progress in a number of critical areas. Everything we do remains fundamentally focused on supporting our children and their families. The chapters of our most recent annual review provide the evidence of our ongoing efforts, success to date and remaining challenges.

We know that we have more to do and we are determined to do better. We have commissioned more local learning and serious case reviews than ever before and extended our reach into Bromley's communities by embracing new technology - making the information people need available to them where and when they need it. Our web site provides a platform for people to engage with us, whilst our BSCB Apps push information into literally thousands of pockets. If you don't have the App visit the App Store or Google Play Store and download it for free now.

This digital reach has helped us receive feedback in ways that we simply couldn't have before. Linking with the community through schools, our young people and other community-based groups, we surveyed over 800 parents and nearly 2,500 children. We asked them about the technology they use and the sites they visit, and they told us. This resulted in the ground-breaking Bromley Digital Footprint report which now forms an important foundation as we plan to meet the needs of our children and their families moving forward.

I can also report that the BSCB continues to play a central part in the Local Authority's improvement journey. Whilst delivering our own improvement plan, the BSCB has also led on the response to CSE and broken new ground with its work involving missing children, gangs and the other pathways to harm that can undermine a young person's chances in life.

Many of our partners have faced fiscal constraint and the challenges of organisational change, but all have maintained a firm commitment to our work and for that I sincerely thank them. Moving forward, we all recognise the need to streamline what we can and will grasp





the opportunities to reconfigure our approach when we are sure it will improve and not diminish outcomes for children. I am convinced that we can build on the improvements already made. In order to do so we must continue to invest in our frontline staff, those individuals who have made the real difference and without whom nothing would be possible, not least the tiny BSCB team, who continue to do more than anyone could reasonably expect.

Finally, it is important to recognise the leadership provided by the Local Authority. The improvements I have witnessed in Bromley would not have been possible without the commitment and focus of its leadership team. From the Chief Executive, Doug Patterson and the lead member, Peter Fortune to the outstanding Ade Adetosoye, the partnership has always felt encouraged and supported.

My ongoing promise is this: we will not lose our appetite to learn; we will continue to ask the difficult questions, to push, encourage and challenge one another and to do what we can to ensure that children and young people in Bromley have the opportunity to thrive.

Jim Gamble QPM  
Independent Chair



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# About the Annual Report



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# The BSCB Annual Report 2017-18 is a transparent assessment of the effectiveness of safeguarding and the promotion of child welfare in Bromley

Pages 20 to 30 set out the governance and accountability arrangements for the BSCB. They provide information about the structures in place that support the BSCB to do its work effectively.

Pages 34 to 65 set the context for safeguarding children and young people in Bromley, highlighting the progress made by the partnership over the last year and the challenges going forward.

Pages 66 to 73 highlight the lessons that the BSCB has identified through its Learning & Improvement Framework and the actions taken to improve child safeguarding and welfare as a result of this activity.

Pages 76 to 81 describe the range and impact of the multi-agency safeguarding training and briefings delivered by the BSCB.

Pages 83 to 84 set out the priorities going forward and the key messages from the Independent Chair of the BSCB to key people involved in the safeguarding of children and young people.

In line with statutory requirements and best practice, the BSCB annual report 2017/18 has been sent to the following:

- Chief Executive LBB
- The Lead Member for Children's Services
- The Director of Children's Services
- The Chair of the Health and Wellbeing Board
- The Chair of the Community Safety Partnership

- The Independent Chair of the Bromley Safeguarding Adults Board
- Bromley Youth Council
- The Mayor's Office for Policing and Crime

**This Annual Report covers and reports on activity between 1st April 2017 and 31st March 2018.**





# Glossary of Terms





ABH	Actual Bodily Harm	IHA	Initial Health Assessment
BCCG	Bromley Clinical Commissioning Group	LA	Local Authority
BAME	Black, Asian and Minority Ethnic	LAC	Looked After Child
BCU	Basic Command Unit	LADO	Local Authority Designated Officer
BSCB	Bromley Safeguarding Children Board	LBB	London Borough of Bromley
CAF	Common Assessment Framework	LSCB	Local Safeguarding Children Board
CAFCASS	Children and Family Court Advisory and Support Service	MAP	Multi Agency Panel
CAIT	Child Abuse Investigation Team	MAPPA	Multi Agency Public Protection Arrangements
CAMHS	Child and Adolescent Mental Health Services	MARAC	Multi Agency Risk Assessment Conference
CCG	Clinical Commissioning Group	MASE	Multi Agency Sexual Exploitation
CDOP	Child Death Overview Panel	MASH	Multi Agency Support Hub
CHIN	Child in Need	MEGA	Missing Exploitation and Gang Affiliation Panel
CME	Children Missing Education	MISPER	Missing Person
CP	Child Protection	NHS	National Health Service
CPP	Child Protection Plan	NSPCC	National Society for the Prevention of Cruelty to Children
CRIS	Crime Reporting Information System	OFSTED	Office for Standards in Educ, Children's Services & Skills
CSC	Children's Social Care	PF	Private Fostering
CSE	Child Sexual Exploitation	PPU	Public Protection Unit
DBS	Disclosure and Barring Service	PRUH	Princess Royal University Hospital
DfE	Department for Education	PSHE	Personal, Social and Health Education
DSL	Designated Safeguarding Lead	PSP	Pupil Support Plans
DVIP	Domestic Violence Intervention Project	QAPM	Quality Assurance and Performance Monitoring Sub Grp
ECHS	Education, Care and Health Services	RAS/R&S	Referral & Assessment Service
ED	Emergency Department	RHI	Return Home Interviews
EWS	Education Welfare Service	SCR	Serious Case Review
EHE	Elective Home Education	SDVC	Specialist Domestic Violence Court
EIFS	Early Intervention and Family Support	SEND	Special Educational Needs and Disability
FGM	Female Genital Mutilation	SRE	Sex and Relationship Education
FJR	Family Justice Review	TAC	Team Around the Child
GP	General Practitioner	UASC	Unaccompanied Asylum Seeking Children
ICPC	Initial Child Protection Conference	VAWG	Violence Against Women and Girls
		YOS	Youth Offending Service



# The Board





## CONTEXT

### **BSCB Strategic Priority 3:** Strong Leadership and Strong Partnership

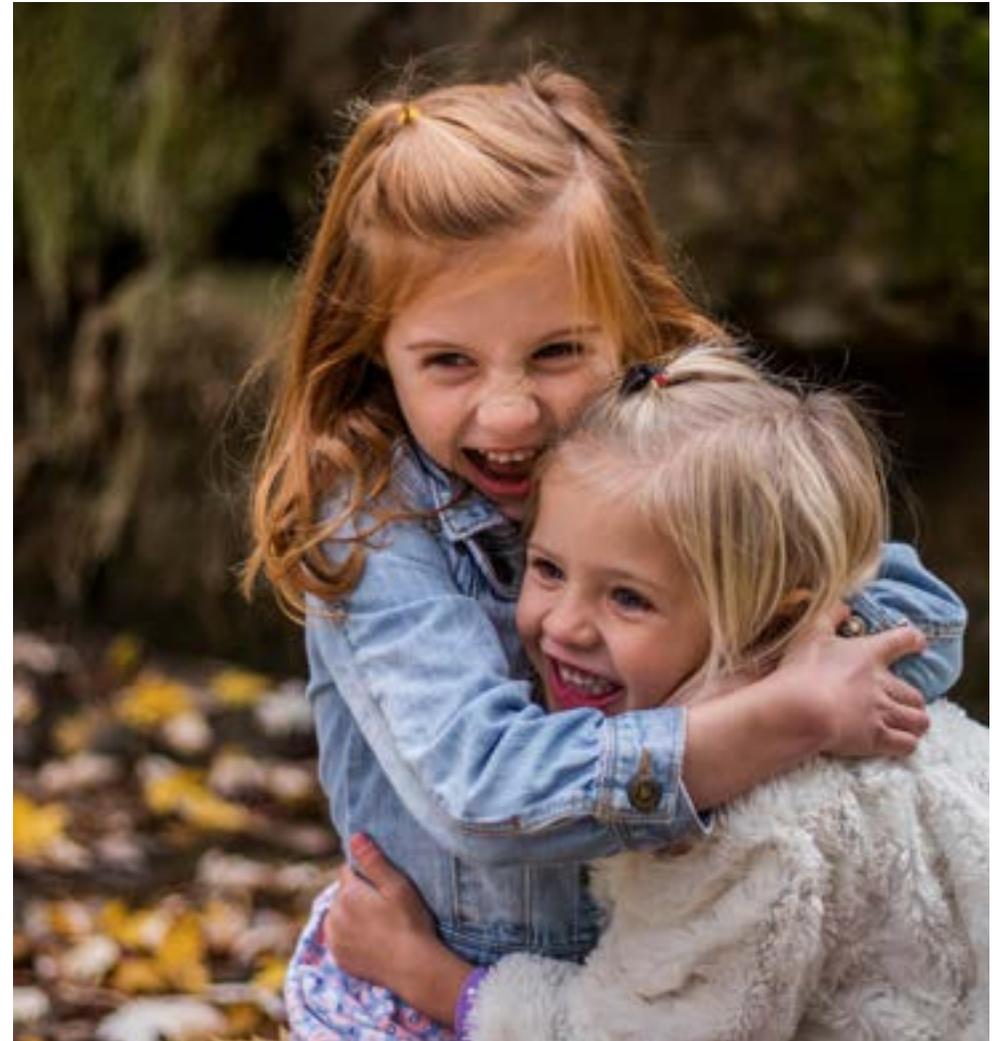
**Actions 2017-19:** In the context of the Children and Social Work Bill and the proposed abolition of LSCBs, partner agencies will continue to commit to engaging in robust arrangements that coordinate and ensure the effectiveness of how children and young people are safeguarded.

The Bromley Safeguarding Children Board (BSCB) oversees multi-agency child safeguarding arrangements across Bromley and comprises senior leaders from a range of different organisations. Its two basic objectives are to co-ordinate the safeguarding work of agencies and to ensure that this work is effective. Since the Ofsted inspection in 2016 which graded the BSCB as 'Requires Improvement', the BSCB team and partners have been dedicated to addressing the recommendations set out in the Ofsted report and have made a significant number of changes to the focus of the Board's work.

The Children and Social Work Act (The Act) received Royal Assent on 27 April 2017. The Act (see [here](#)) will amend the Children Act 2004 to put into law the key recommendations of the [Wood Review of the role and functions of Local Safeguarding Children Boards \(LSCBs\)](#). The provisions of the Act will strengthen the statutory framework around multi-agency working by placing a duty on three safeguarding partners, namely the local authority, chief officer of police and clinical commissioning group (CCG) to make arrangements to safeguard and promote the welfare of children in their area and identify and respond to the needs of children. The provisions of the Act also allow greater flexibility for local areas to determine how they arrange their services to safeguard and promote the welfare of children in the area and therefore the requirement for LSCBs to have set memberships will be removed

Following commencement of the relevant provisions of the Children and Social Work Act 2017, an updated version of 'Working Together to Safeguard Children' will be published, and the new safeguarding arrangements will come into effect. Local areas will have twelve months from the date of commencement to develop and publish

their arrangements, and a further three months to implement them in full. Bromley Safeguarding Children Board will continue to seek ways to improve and enhance our partnerships to deliver better outcomes for children; we have agreed to retain our current systems and approach, notwithstanding those areas where statute will drive explicit and non-negotiable change (i.e. SCRs and CDOP).





## POST 2016 OFSTED INSPECTION CHILDREN'S SOCIAL CARE IMPROVEMENT JOURNEY

Throughout the period 2017-18, the Children's Services Improvement Governance Board (CSIGB) met monthly; maintaining oversight and pace over the Children's Services Improvement Plan .

Following the April 2016 Ofsted Inspection, the Children's Services Improvement Plan was submitted to Ofsted in September 2016 with 306 actions to achieve to improve the service for the children, young people and families of Bromley.

The 2016-17 BSCB Annual Report highlighted what was initially put in place to strengthen arrangements and address the areas requiring further action and attention. By April 2018, following consistent and continued focus on improvement and change within Children's Social Care, the number of remaining actions on the Children's Services Improvement Plan had reduced to a total of:

- 3 actions (1%) RAG-rated 'Red'
- 45 actions (15%) RAG-rated 'Amber'
- 258 actions (84%) RAG-rated 'Green'
- 19 actions categorised as 'Blue' (actions that can be no longer progressed)



Through maintaining the focus of the Improvement Journey, Children's Social Care has successfully achieved the closure of 258 (84%) actions in eighteen months; with clear plans to address the remaining 48 (16%) actions.

**“Where local authority children's services are judged to be inadequate, Ofsted will carry out monitoring visits and report on the progress made by the local authority to support them to improve further”. Monitoring and re-inspection of local authority children's services judged inadequate; Ofsted, 2017**

Since the April 2016 Ofsted Inspection, Bromley has received 7 Monitoring Visits, each looking at different parts of the Children's Social Care services:

- **November 2016** (first Monitoring Visit)
- **February 2017** (inspectors reviewed the progress made in the areas of help and protection and children looked after)
- **May 2017** (inspectors reviewed the progress made in the areas of children looked after and care leavers)
- **August 2017** (inspectors reviewed the progress made in the areas of CSE and missing)
- **October 2017** (inspectors reviewed the progress made in permanence planning and support for children and young people looked after)
- **March 2018** (inspectors reviewed the progress made in the delivery and effectiveness of early intervention help and support)
- **June 2018** (inspectors reviewed the progress made to vulnerable adolescents, including missing CSE Gangs, Radicalisation and FGM. Partnership working and commissioning).

These Ofsted Monitoring visits have validated no inadequate practice, progress in improvement, timely identification of risk and proportionate response, good leadership and management oversight and use of professional judgement and a strengthened use and interpretation of thresholds.

As part of the Children's Social Care **Roadmap to Excellence - Delivering Better**



**Outcomes for Children and Families** an emphasis on effective engagement and communication across all levels of the organisation saw the creation of regular:

- Managers' Forums
- Getting to Good Seminars
- Social Work Practice Advisory Group (SWPAG)
- Surgeries with Deputy Chief Executive and the Director of Children Services

These all met regularly throughout 2017-18 and ensured a focus and prioritisation of high quality social work practice, management support and oversight and improved line of sight.

The links between the senior management / leadership, the frontline teams and children, young people and their families were further enhanced by the introduction and successful completion of "Practice Week". A Practice Week is a series of observations, live auditing, key meeting attendance, and discussions with parents and children about the services they receive. The purpose of these activities were to

provide increased opportunities for learning to strengthen practice and outcomes; as well as to provide our senior leaders and managers with the opportunity to better understand frontline practice, alongside allowing Heads of Service to observe practice in service areas other than their own and ensuring that families are at the centre of the improvement journey. Two very well received and evaluated Practice Weeks were held in April and October during 2017-18. A third Practice Week is planned for 3-7 September 2018.

Children's Social Care provided regular quarterly updates to the BSCB, with the following reported across the year:

#### March 2017

- Corporate Parenting Board and LinCC members reviewed the Board's workplan and activity
- Increased involvement of children and young people in driving and shaping services
- The new portfolio holder for care Cllr. Peter Fortune met with LinCC





- A celebration event of our children in care took place on the 16th February 2018 which was well-attended by young people, their carers and Members from the Council including the Deputy Mayor
- Focus on strengthening Child Sexual Exploitation (CSE) and Missing identification and response (including the development of multi-agency protocols, a vulnerable adolescent strategy, fortnightly MAP meetings, the creation of the new Atlas Unit and staff training on CSE and sexually harmful behaviour)
- Funding from Members to ensure that Bromley children receive the right service at the right time by the right professional, that social work standards and practice improve and caseloads reduce to 10-15 children (amongst the best caseload numbers in the country) and to ensure the best outcomes
- Focus on recruiting and retaining high quality social work staff

#### June 2017:

- Evidence from February and May 2018 Ofsted Monitoring Visits of increased consultation of children and young people; with this reflected within recorded practice
- Young people co-chairing the Corporate Parenting Board; with workstreams established involving partnership between Children's Social Care, young people and multiagency partners (multi-agency partners responsible for work streams and young people attached to each work group - ensuring young people are driving and helping us develop services and prioritising the work streams.)
- Development of Children Looked After (CLA) and Care Leavers Strategies
- Development of the Downham Hub for Care Leavers by CLA Nurses and Bromley Y with the aim of increasing the availability of multiagency partners to better support Care Leavers to independence. Added to this was a "Moving On" course focused on supporting Care Leavers' ability to independently manage finances and hold tenancies
- The Director of Children's Social Care and Housing developed pathways for young homeless to prevent accommodation into care and, where Care Leavers' placements have been disrupted, young people given 8 weeks' support and assessment to determine the next step
- Further developed young people to be part of all interviews for CSC staff to ensure staff who understand the corporate parenting role and the needs of young

people are appointed

- Head of Service for Early Intervention continued to co-ordinate the well-attended Multi-Agency Partnership Events (MAPEs)
- Focus on recruiting and retaining high quality social work staff

#### September 2017:

- Increasing the capacity and skillset of social workers
- LinCC spearheaded a Corporate Parenting Fun Day and requested that it should be a relaxed and informal day. LinCC have also been looking at other activities to ensure that our corporate parenting responsibilities grow and embed in Bromley
- The Chair of the Governance Board, Isobel Cattermole, observed a Corporate Parenting Board meeting on 6th July 2017
- The Multi-Agency Safeguarding Hub (MASH) / Referral and Assessment Service (RAS) hosted a successful open morning to schools; helping colleagues to increase the understanding of the MASH, with a further open day planned for health colleagues and other partners
- Continued focus and drives to employ permanent social workers and managers across CSC with a number of initiatives to accomplish this
- Continue interviewing flexibly to ensure that we interview and offer in a short space of time; with improved recruitment from 42% to around 85% of permanent staff in 5 months
- Reducing caseloads to meet the target of between 12-15 children per worker with increases in the capacity and employing of social work staff. Staff are noticing the difference in being able to spend more quality time on their cases (evidenced by Ofsted noting good morale).

#### February 2018:

- Children's Social Care move into Phase 2 of the improvement journey; a testing phase to ensure that new arrangements in place and actions completed make a difference to the lives and outcomes of children
- Service Improvement Team established to ensure continued progress against the improvement plan; with the team featuring on the business as usual service audits as well as taking forward Practice Assurance Stocktakes (PAS). A schedule has been devised with the process involving position statements being prepared and



a 3 day review undertaken by the Service Improvement Team. The outcome and recommendations from these reviews will form the action plan for Phase 2 of the improvement journey

- The recommendations to strengthen the improvement have been incorporated within an overarching plan and within service plans
- A new SIT Board was established to ensure continued challenge and pace
- The fostering recruitment team recruited 25 new foster carers; exceeding the target of 20 before the end of March 18 (able to offer more carers within the LA and wrap services around these children. As part of this there are plans to train foster carers for specialist mother and baby placements and considering training specialist foster carers for our more challenging complex young people; preventing them from being in residential placements) – this training will be accredited.
- A foster carer celebration event is being organised for summer 2018

## POLICY, PROCEDURE AND PRACTICE GUIDANCE

During the last year the following have been achieved:

- Full review and revision of the LBB Children’s Social Care Procedure Manual (relaunched July 2017 and first biannual update in January 2018) and Foster Carers Handbook (October 2017)
- Development of “Sorted and Supported in Bromley” (Care Leavers Entitlement) in collaboration with Coram Voice (March 2018)
- Corporate Parenting Board Forward Planner (January 2018)
- DCS approval checklist when considering ceasing to look after a child (March 2018)
- Direct Work Practice Guidance ( March 2018)
- Information for Parents of Children in Foster Care (January 2018)
- Life Story Work Practice Guidance (January 2018)
- Process Map for Unaccompanied Asylum Seeking Children (UASC) (January 2018)
- Pre birth protocol
- Private Fostering review

## Youth Offending Service and Improvement Journey

The 2017 Full Joint Inspection highlighted the following improved Key Judgement Area performance (all judgement areas improved, apart from “Ensuring the Sentence is Served”, which maintained the same high level:

2015 Full Joint Inspection Results	2017 Full Joint Inspection Results
Reducing Reoffending ★	Reducing Reoffending ★★★
Protecting the Public ★	Protecting the Public ★★★
Protecting Children and Young People ★★	Protecting Children and Young People ★★★
Ensuring the Sentence is Served ★★★	Ensuring the Sentence is Served ★★★★
Governance and Partnerships ★	Governance and Partnerships ★★★
Interventions to Reduce Reoffending ★	Interventions to Reduce Reoffending ★★★
Highest judgement that can be awarded is: ★★★★	



Following the January 2017 Full Joint Inspection of the Bromley Youth Offending Service (YOS) (published June 2017) the YOS Improvement Plan was developed.

The YOS Improvement Plan included an initial mapping of all recommendations following the Full Joint Inspections of 2015 and 2017, BSCB Section 11 Audit, Bromley YOS Action Plan (2016) and links to the recommendations and key priority areas within the Youth Justice Strategic Plan (2017-19) which was updated and developed in October 2017. The Plan was formally accepted at the July 2017 YOS Management Board following publication of the Full Joint Inspection in June 2017.



To ensure increased focus and pace, fortnightly YOS Improvement Boards were implemented from November 2017 with one Priority Area covered at each meeting. As well as compliance updates, evidence is required by the YOS Improvement Board before an improved RAG-rating is given for each indicator within each of the Priority Areas. The YOS Improvement Plan Priority Areas are as follows:

- Safeguarding and Protecting the Child
- Reducing Reoffending
- Protecting the Public
- Governance and Partnerships
- Interventions to Reduce Reoffending
- Ensuring the Sentence is Served
- Improving Practice

Of the original 88 required actions within the YOS Improvement Plan, by April 2018 there was the following breakdown:

- 30 actions (34%) RAG-rated 'Red'
- 27 actions (31%) RAG-rated 'Amber'
- 27 actions (31%) RAG-rated 'Green'
- 4 actions (4%) RAG-rated 'Blue' (actions that can be no longer progressed)

YOS Improvement Plan actions are spread across the multi-agency partnership and are reviewed by the YOS Partnership Board on a bimonthly basis

### **Youth Justice Strategic Plan (2017-19)**

The Youth Justice Strategic Plan (2017-19) was accepted by the YOS Management Board in October 2017 and was developed in line with the following:

- Youth Justice Plans: YJB Practice Note for Youth Offending Partnerships (Youth Justice Board, April 2016)
- What the service had included in previous Youth Justice Strategic Plans
- What the service presented in the pre-2017 HMIP Full Joint Inspection Self-Assessment Report
- The post-Inspection Improvement Plan
- Other boroughs' Youth Offending Service Youth Justice Strategic Plans that have been highlighted by the Inspectorate as examples of good practice



The Strategic Plan gives an overview of the work of the Bromley YOS; detailing the partnership's performance over the previous twelve months and priorities for 2017-2019 and focuses on the following key priorities:

- Strengthen early identification and response to child sexual exploitation (CSE) working in partnership with Police and other multi-agency colleagues in line with revised Bromley CSE and Missing Protocols and the new Atlas (CSE) Team; and increase monitoring and intelligence-sharing of gang-related activity
- Reduce re-offending by working more effectively with Early Help services to target young people and prevent their offending behaviour becoming entrenched
- Increase the systematic focus on victim support by ensuring that this and the protection of the public is a key priority in all assessments, planning and delivery of intervention
- Increase the consideration of individual safety, wellbeing and learning styles of young people during assessment and delivery of interventions (ensuring better engagement with the SEND agenda and specialist SALT worker)



- Strengthen the effectiveness and impact of collaborative partnership working with commissioned and external agencies to ensure the most positive outcomes for young people who use the service, their families and the wider community
- Strengthen the number and quality of YOS interventions to positively impact on the lives of the young people seen by the services and the victims of youth offending in the borough

### YOS Partnership Board and Forward Planner

To enhance the focus and importance of partnership working through the YOS Management Board, the name of the Board was changed to the YOS Partnership Board in February 2018.

To increase effectiveness, assurance, scrutiny and oversight, a Forward Planner was developed with standing agenda items of:

- Improvement and Youth Justice Plan Delivery
- Performance Reporting
- Safeguarding Reporting
- Audit Reporting
- Service Area Presentations

### NHS England-funded Mapping of Health Services and Pathways for Children in the Justice System in Bromley

Supported by NHS England funding, the Bromley Youth Offending Service (YOS) and Bromley Clinical Commissioning Group (CCG) commissioned a piece of work to map the health services and pathways for children and young people in the justice system in Bromley.

The mapping exercise was undertaken by an Interim Project Officer engaged in improvement projects across Children's Social Care and YOS and with a previous health background across Provider and Commissioner Organisations, with experience in the inspection of services and preparation for inspection of services, quality assurance and improvement and performance monitoring and management. The mapping exercise assessed the level and effectiveness of the health provision to children and young people in the justice system in Bromley and analysed and



triangulated the findings; assessing strengths, weaknesses and gaps before making recommendations to further develop and improve what is in place for this group to positively impact on their health outcomes. Through its analysis and recommendations, the mapping sought to contribute to the design of a system, service and pathway that learns from, and importantly avoids, the repetition of the nationally and historically repeated issues and challenges that have not responded well enough to the health needs and inequalities experienced by this cohort of children and young people.

The Mapping Report was presented to the February 2018 YOS Partnership Board and highlighted the following findings and recommendations:

Findings	Recommendations
1. Young people attending Bromley YOS did not appear to be well enough informed and engaged in health services across the borough	1. Review all health-related material and advice for young people seen by Bromley YOS in relation to availability, access and use of health services and pathways, taking into consideration; what young people said in response to the questionnaire, previous work by Bromley Youth Council on accessing health services, current Bromley CCG Co-production work and in consultation with young people accessing the service
	2. To receive lists and addresses of all current Bromley health services from the CCG and Public Health to create a visual map of all services in the borough, including: types of services, locations, transport routes and where they are placed in relation to the addresses of the young people seen by the YOS

2. The level of health services provided to Bromley YOS had reduced over recent years	3. Consideration of increased funding (and therefore capacity) of the YOS Nurse role to enable all young people to be seen, assessed and screened in relation to their health needs by a health specialist; rather than relying on identification and onward referral by YOS workers who are focused on the needs of the young people, but who are not health specialists
3. Bromley YOS appeared to compare less favourably to reported local and statistical neighbouring boroughs in terms of health provision and resourcing	4. Updating of the joint protocol (between YOS and BHC) to reflect the changes in commissioning arrangements and service provision relating to the YOS Nurse role; agreeing the expected realistic, measurable deliverables and outputs required from the YOS Nurse role; and commence increased reporting and monitoring of activity, outcomes and effectiveness of the YOS Nurse role in relation to its impact on young people seen by the YOS (including regular reports to the YOS Management Board of activity, performance, strengths and gaps; with appropriate exception reports provided where required)
	5. An immediate review of the emotional wellbeing service provided to the YOS including: clarification of expected outputs and deliverables, establishment of targets, monitoring of compliance with the expectation of submission of activity and outcome data (and exception reporting where necessary) and a clarity of criteria in relation to the emotional wellbeing and mental health pathway in place for this complex and vulnerable group of young people



<p>4. Whilst there was widespread agreement that assessment of health needs (physical, sexual, emotional and mental health) by a health specialist, of all young people attending YOS would enable better early identification, assessment and intervention, as well as increasing awareness and engagement of this group of young people in their health needs; there was not capacity in the current level of health resourcing to the YOS in Bromley to achieve this</p>	<p>6. An immediate review of the substance misuse provision to the Bromley YOS, including: consideration of the service requirements and whether the current provision ensures sufficient focus, profile and meets need; resolution of disputed issues relating to service level agreement and information sharing between the services in the best interest of young people</p>	<p>6. Health service-related observations and recommendations from local Full Joint Inspection reports of health services for young people within YOS remained unresolved</p>	<p>8. Consideration (linked with Recommendations 2, 3, 4 and 5) of ensuring that the health provision to the Bromley YOS is sufficiently well funded, resourced and integrated to enable every young person seen by the service to have a physical, sexual, emotional and mental health assessment and screening by a health worker as part of their overall YOS assessment</p>
<p>5. Health staff at Bromley YOS, whilst undoubtedly committed to meeting the health needs of young people, do not routinely attend (in many cases due to lack of sufficient time and capacity) YOS planning and risk management meeting; reducing the opportunity for effective multi-agency collaboration, support and challenge, and adversely impacting on the ability to provide an integrated response and service to young people</p>	<p>7. YOS staff to increase and document referral rates in line with reported identifications of SALT needs with tis group of young people to enable consideration of increasing the frequency and capacity of the SALT provision to the YOS to enable those young people identified as requiring SALT assessment and intervention to receive this in a timely and effective way</p>	<p>7. Whilst health have been well represented at a senior level at the Bromley YOS Management Board they had not submitted, or been asked to submit, health-related data, information and reports to enable increased oversight of the level, effectiveness and impact of the health resources and provision available to the service</p>	<p>9. Build on the momentum of the recent agreement to convene a task and finish group to plan the implementation and delivery of a Liaison and Diversion service for young people within the borough; ensuring that there is connectivity across different local agencies and with a local post-diversion infrastructure underpinned by a shared commissioning strategy and the recruitment of post-holder of sufficient expertise and experience to provide the specialist assessment as well as ensuring that the appropriate diversion and specialist health interventions are available and provided</p>

A Task and Finish Group was set up by the YOS Partnership Board to respond to the recommendations and strengthen the multi-agency health provision to children and young people in the justice system in Bromley.



### Areas of Service Focus and Development Across 2017-18:

- Focus on the development of a strengthened multi-agency approach and response to young people involved in serious youth violence and gang-related activity
- Engaging young people in diversionary and prevention activities
- Maintaining low numbers of first time entrants and low rates of reoffending
- Further development of group work programmes and interventions including:
  - A Youth Justice Board-endorsed programme aimed at black and minority ethnic young men and focusing on race, identity, perceptions of self, attitudes and behaviours, stereotypes and breaking down barriers and perceptions of masculinity)
  - A Girls Group



- Pilot forensic psychology input has seen a consultant clinical psychologist seconded to the service for a year; delivering good support, consultation and training to staff in their work with young people with complex needs
- NHS England funding secured for a new service provision to divert young people from the justice system with the introduction of the Liaison and Diversion post implemented in summer 2018. This will further impact on reducing and keeping low the numbers of first time entrants into the system; offering support and intervention
- Recruitment has remained a challenge and an area of focus; but staff in post are committed and have a good understanding of the complexities of the work and working intensively with young people.
- Increased integration with the wider Children's Social Care and YOS attending and contributing to strategy meetings and other panels where risk and safety is discussed involving young people.
- New processes to track and monitor children and young people missing, exploitation and gang affiliated is now more joined up between MASH and the YOS; with a YOS manager seconded into MASH to embed and facilitate further joint working
- Development and implementation of a strengthened YOS annual audit programme
- Development of practice guidance and revision of all YOS policies and procedures in line with the LBB Children's Social Care revision of its Procedure Manual (previously, YOS procedures were housed elsewhere but, in line with enhanced joint working, are now within the Children's Social Care Procedure Manual)

In December 2017, Bromley YOS successfully hosted a group of Columbian justice sector professionals (following approach from the Foreign and Commonwealth Office) who were keen to learn from the UK and increase their understanding of different ways of approaching and delivering youth justice. Bromley YOS were able to showcase work in relation to:

- Restorative justice
- Reparation
- Out of court work
- Partnership with Police



## KEY ROLES AND RELATIONSHIPS

### The Independent Chair and the BSCB Team

Jim Gamble QPM has been the Independent Chair of the BSCB since January 2017. The Independent Chair is tasked with leading the Board and ensuring it fulfils its statutory objectives and functions. Key to this is the facilitation of a working culture of transparency, challenge and improvement across all partners with regards to their safeguarding arrangements. The Chair is accountable to the Chief Executive of the London Borough of Bromley. The Executive Director of ECHS (Education, Care and Health Services) and the Director of Children's Services also continued to work closely with the Chair on related safeguarding challenges.

The BSCB is supported one Business Manager (job share) and one full time Business Support Officer. They ensure the smooth running of the Board's day to day business.

Whilst being unable to direct organisations, the BSCB does have the power to influence and hold agencies to account for their role in safeguarding. This influence can touch on matters relating to both local and national arrangements that impact directly on the welfare of children and young people.

### Designated Professionals

The Designated Doctor and Nurse take a strategic and professional lead on all aspects of the health service contribution to safeguarding children. Designated professionals are a vital source of professional advice. The Designated Dr and Nurse have continued to demonstrate their value by offering challenge and support to partners. This includes the escalation of cases as recommendation for learning review, development of the Health Economy Dataset and leading on health contributions to the BSCB dataset.

### Partner Agencies

All partner agencies across the Bromley are committed to ensuring the effective operation of the BSCB. This is supported by a Constitution that defines the fundamental principles through which the BSCB is governed. Members of the Board hold a strategic role within their organisations and are able to speak with authority, commit to matters of policy and hold their organisation to account.



**BSCB Challenge:** At the beginning of the year, two agencies advised the BSCB that they were unable to make the required financial contribution to Bromley Safeguarding Board.



**Action:** Following negotiations with the Independent Chair regarding their full participation in the partnership, both agencies have now agreed the full financial contribution.

Awareness of the escalation process has been raised at monthly BSCB Multi Agency Partnership Events, via the BSCB app and during training events. The escalation policy was revised, simplified and publicised in July 2017. Escalations reported to Board have increased.





In October 2017 the Care Quality Commission (CQC) undertook a full Safeguarding and Children Looked-after Review of Bromley health services. A copy of the full report can be found on the CQC website. Broadly, the review found across the health economy, committed professionals and staff with good examples of partnership working and innovative working where staff improved outcomes through service development. The report also identified areas that needed continued development such as improving information sharing and information technology across services so that vulnerable children are highly visible within the health system and can be safeguarded. A combined Health Action Plan has been developed and is overseen by Bromley Clinical Commissioning Group (BCCG).

The Bromley 0-4 Service was retendered during 2017/18. This tender process resulted in the Bromley Health Visiting Service and Family Nurse Partnership moving to

Oxleas NHS Foundation Trust on the 1st October 2017. There are information sharing agreements in place and the safeguarding team now has full access to both EMIS and Oxleas RiO electronic records so important documentation can be shared in a timely manner. In addition to this all the community paediatric services commissioned by the CCG went out to tender in 2017. The services were retained by Bromley Healthcare and the new service specifications commenced on the 1st December. As a result of some changes, it took longer than planned to recruit to the Paediatric Liaison role. This is now in place.



**BSCB Challenge:** Capacity for School Nursing following change in commissioning.



**Action:** Following London Borough of Bromley's decommissioning of the School Nursing Contract and commissioning of a new Health Support to Schools (HSS) Service in 2017, BSCB added School Health Plans to its risk register and requested an evaluation of the new service after six months. The evaluation showed gaps in service and partners raised concern. In January 2018, London Borough of Bromley committed to an additional £300k for an additional 6 nurses for the remainder of the existing Health Support to Schools contract.

Kings College Hospital NHS foundation Trust has increased leadership in paediatric nursing across the Trust by appointing a deputy to the Head of Nursing for paediatrics. This will provide additional support for the paediatric nursing team at the Princess Royal University Hospital (PRUH). The new appointee takes an interest in paediatric mental health which will be positive for patients at the PRUH. A new senior clinical nurse specialist for safeguarding children also joined the Trust in October 2017. The CQC Review of Looked After children in October 2017 found there to be good practice in gathering information in relation to assessing the risk of partners during pregnancy. There are robust arrangements to identify and record safeguarding risk and referrals to social care were of good quality. However, they stated that further quality assurance should be in place. The review also concluded that the Named nurse and safeguarding midwife lead on developing and promoting good safeguarding practice and there is evidence of good information sharing and joint working.



**BSCB Strategic Priority 3: Strong Leadership and Strong Partnership**

**Actions 2017-19:** To consistently promote the importance of effective and swift information sharing, promoting a culture that puts the protection of children before the protection of information.

The Designated Nurse for Safeguarding at BCCG chairs the Bromley Child Protection Information Sharing Programme (CP-IS). The CP-IS project is linking the IT systems used across health and social care and helping organisations to change business processes so that child protection information can be shared securely between them. All local health care settings are now 'Live'.

This year, the Metropolitan Police Service announced changes to the way local policing is delivered in London through the introduction of Basic Command Units (BCUs). A BCU is a larger police command unit that will replace the Met's previous 32 borough model, by merging local policing in boroughs to form 12 BCUs. Bromley now sits within the Croydon, Sutton and Bromley BCU. BCUs deliver the same core

local policing functions - neighbourhoods, emergency response, CID and safeguarding - in a more consistent way. Each BCU is led by a chief superintendent who is the BCU Commander. As part of this, Bromley Police has restructured. The Child Sexual Exploitation (CSE) Investigation, CSE SPOC (Single Point of Contact), Missing Persons Unit, Missing Persons (MISPER) SPOC, Gangs SPOC, Mental Health Liaison Officers, MASH team and Vulnerable Adult team have all been resubordinated into one bespoke unit which has been titled the 'Safeguarding Hub.' These officers now fall under a dedicated inspector who co-ordinates their activity. As well as the combining of portfolios there has also been a staff uplift within the command to provide additional resilience and improve efficiency. The Safeguarding Inspector has also been placed as the chair of the Multi Agency Sexual Exploitation (MASE) Panel to ensure full operational oversight is retained in one place. The restructuring has also enhanced Bromley Borough Police's ability to better share information and co-ordinate efforts with partners as officers attending partnership meetings now have a far more holistic and developed picture of the cases raised and are likewise able to more fully back-brief police colleagues following such meetings.



**BSCB Challenge:** Reduction in police numbers and transformation to the One Met BCU model



**Action:** The Independent Chair wrote to the Met Police Head of Partnerships (Safeguarding) to seek assurance that safeguarding would remain a local priority and resourcing would be sufficient. The BSCB is following this up with an audit of attendance at Child Protection conference.

The reorganisation of Probation Services in 2014 has created challenges for workforces coming to terms with new geographic responsibilities, structures and practices. The National Probation Service (NPS) is responsible for assessing risk and providing pre-sentence advice and reports to courts, for parole assessment and for the management of all high risk offenders. The Community Rehabilitation Companies (CRC) are responsible for the management of offenders assessed as posing medium and low risk of harm. During autumn 2017, NPS was inspected by Her Majesty's Inspectorate of Probation (HMIP). The report recommended that "The



National Probation Service should – improve how it shares and uses information to better assess and manage child and adult safeguarding” . NPS has recognised that its practitioners need to improve the quality of their safeguarding referrals through MASHs with respective Children Services. Practitioners must also undergo the NPS mandatory safeguarding training in addition to local partnership training. NPS has developed a Probation Improvement Tool (PIT) for safeguarding children referrals to support this initiative. They are aiming to ensure that all safeguarding referrals are recorded on the offender contact system, across London, in order to monitor the timeliness of responses from respective partnerships. In Bromley, The NPS has seconded a Probation Officer into Bromley Youth Offending Service to ensure a smooth transition into the adult criminal justice system. It also continues to commit a Probation Officer one day per week to be part of Bromley MASH.

### Lay Members

The attendance of Lay Members at Board Meetings and a variety of other forums has been key to offering a different perspective which provides insight into the realities of life in Bromley. The Lay Members (Marina Laurie and Valerie Burton) operate as full members of the BSCB, participating as appropriate on the Board itself and in various projects. They have shown commitment to the work of the Board in coordinating and ensuring the effectiveness of safeguarding arrangements. The BSCB is hugely grateful to the Lay Members for their dedication, time and effort.

The Lay Members attend all BSCB Board meetings and submit a written update to the Board each quarter. They are also members of the Community Engagement Sub-Group. The Lay Members have a mentor, Professor Sally Glen, Lay Member for the City and Hackney LSCB. They meet regularly at the Civic Centre and is a valued training experience.

One of the Lay Members has carried out a comparison exercise between the Church of England online safeguarding training and the equivalent BSCB course and has provided feedback. The Head of Quality Assurance in Children’s Social Services now sits on the Safeguarding Board of the Diocese of Rochester.

Mental health awareness is prominent in the Board’s concern for young people and therefore a Lay Member took part in a Mental Health Strategy Stakeholder Event, as well as a MindKit training session.

The Designated Nurse arranged an information sharing meeting for Lay Members at the Bromley Clinical Commissioning Group, introducing them to some of the commissioning staff and safeguarding professionals. They learnt about Public Health’s role in the Joint Strategic Needs Assessment, how practice is shared across the Pan London Designated Professional Network to ensure compliance and to provide challenge and support and how the Head of Integrated Commissioning aims to consider the views of young people to increase the effectiveness of services offered.





## Relationship with Other Strategic Boards

### **BSCB Strategic Priority 3:** Strong Leadership and Strong Partnership

**Actions 2017-19:** Continue to strengthen the governance interface between the BSCB and other key strategic forums and Chairs.

The Independent Chair of the BSCB is a member of the Health and Wellbeing Board and has developed links between the two boards with regard to strategic use of the Joint Strategic Needs Assessment. The Chair is also a member of the monthly Children's Services Improvement Governance Board to ensure that the BSCB is part of the post-Ofsted improvement journey, and has had strategic oversight of key partnership areas such as CSE since March 2017. The BSCB Chair chairs an Inter Board Chairs Group which brings together the Chairs of the BSCB, the Bromley Safeguarding Adults Board, the Community Safety Partnership and the Health and Wellbeing Board. This meeting will be responsible for the coordination of leadership, collective awareness, and the coherence of respective plans when reporting back to individual Boards and will consider the strategic risks and key issues across safeguarding including children, young people, families, adults, those leaving care, and communities.

The Safeguarding Adults and Children's Board's met in February 2018 to consider joint areas of work for 2018/19. Both Boards agreed that there would be three areas of joint focus and this would be a standing item at each BSCB board meeting. These areas are:

- Context - focussing on the theme of 'inter-generational abuse in the family home.' The Boards will review how abuse can occur between different family relationships and what creates or aggravates vulnerability to abuse
- Transitional Care - seeking to gain a better understanding of the journey from children's to adults' social care, and closing the gap, so that we can identify and address practical issues. This will help inform policy and guidance in managing practice. The Boards will specifically consider groups who are highly vulnerable, such as those with learning development needs, care leavers, young carers and those with no evident care and support needs under the Care Act 2014.
- Strategic Issues and Concerns - working together to address strategic issues and

concerns. Three of areas that the Boards will address are: cultural and ethnicity issues by ensuring that we collectively understand the changing demographic within Bromley; managing and maintaining partnership support; Identifying and managing risk by creating a joint risk register and providing joint responses to concern.





## Board Membership and Attendance

### BSCB Strategic Priority 3: Strong Leadership and Strong Partnership

**Outcome:** The BSCB leads the safeguarding agenda, is professionally curious and challenges the work of partner organisations, and commits to an approach

The Board met four times during the 2017-18 and had a membership made up of representatives from all statutory partners. The Board also has representation from the Portfolio Holder for Education, Children and Families, and Head teachers from two Bromley Schools. A list of current Board Members is set out at the back of this report. The Board oversees the work of the sub groups which meet between the quarterly board meetings and scrutinises agency reports from across the partnership. The agenda offers opportunities for information sharing and discussion, but also encourages questioning and challenge. The BSCB captures all challenges raised by the Independent Chair and partners inside and outside of Board meetings in an Impact Log. The Independent Chair has also reviewed governance arrangements and reconfigured sub groups in or order to improve oversight and scrutiny.

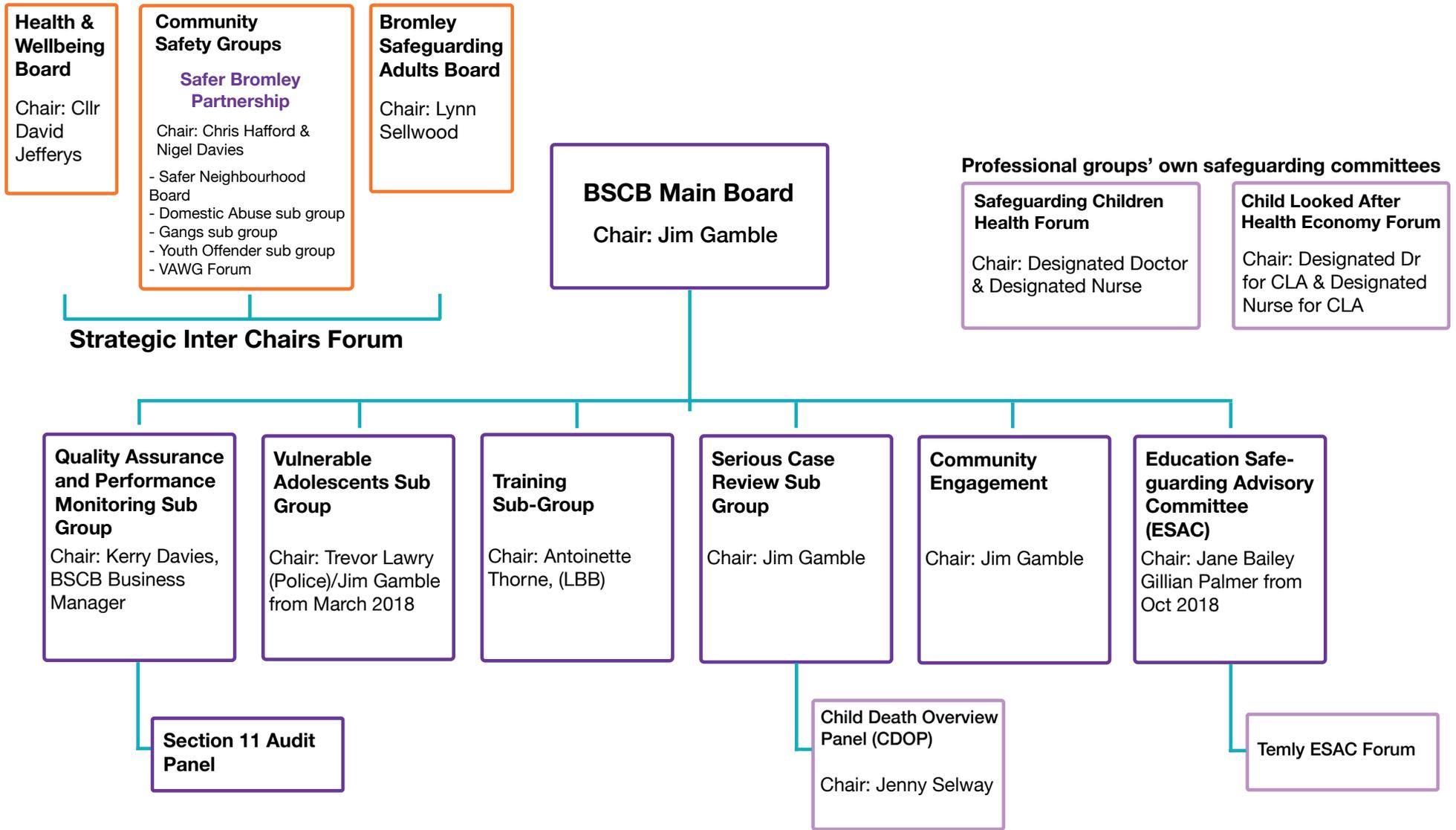
There were some fluctuations around attendance rates sometimes associated with changes of staff changes within agencies. Attendance rates remain subject to ongoing monitoring and agencies are robustly challenged if attendance decreases. This has been a key area of focus for the Chair. The attendance rates by agency for 2017-18 to the four main Board meetings are set out below.

The BSCB now regularly reviews performance through reference to its risk register, self-assessment process and partner agency updates submitted to each Board meeting. During 2017-18, key risks identified as having the potential to impact on the BSCB's ability to carry out its statutory objectives included restructuring of the Metropolitan Police and Probation services, the abolition of LSCBs via the Children and Social Work Act 2017 and the development of effective partner agency data sets.

		Number of seats per
Independent Chair	100%	
London Borough of Bromley, Children's Social Care	100%	
London Borough of Bromley, Education	100%	
London Borough of Bromley, Youth Offending Service	100%	
London Borough of Bromley, Public Health	100%	
London Borough of Bromley, Deputy Chief Exec	50%	
National Probation Service	100%	
London Community Rehabilitation Company	0%	
Lay Members	100%	
Children & Family Court Advisory & Support Service	50%	
Bromley Secondary School Representative	100%	
NHS England	0%	
Bromley Clinical Commissioning Group	100%	
Bromley Portfolio Holder Care Services	25%	
Kings College Hospital	75%	
Metropolitan Police Service – Bromley Borough	75%	
Metropolitan Police Service – Child Abuse Investigation Team	100%	
Bromley Healthcare	50%	
Oxleas NHS Trust	100%	
Children & Family Voluntary Sector Forum	50%	
Change, Grow, Live	100%	



**BSCB STRUCTURE**





## BSCB SUB GROUPS

### **BSCB Strategic Priority 3:** Strong Leadership and Strong Partnership

**Actions 2017-19:** The BSCB and partners successfully deliver against the BSCB sub groups / working groups that learns lessons, embeds good practice and is continually influenced by children, young people and their families.

The initial focus of the new Independent Chair has been to review and reconfigure BSCB governance, structure and sub groups. Below is an outline of each sub group, priorities and achievements over the last year.

### **Quality Assurance and Performance Monitoring Sub Group**

The Quality Assurance and Performance Monitoring (QAPM) Sub Group is central to the effective functioning of the BSCB. The sub group met 4 times during 2017-18. The sub group is chaired by the BSCB Business Manager. The QAPM subgroup takes responsibility for monitoring standards in safeguarding arrangements and other operational aspects of local safeguarding. It checks how well single-agency safeguarding arrangements are working and is able to provide robust challenge to improve practice and outcomes for children and young people.

This year the work of the QAPM sub group included:

- A multi-agency re-audit of 18 CSE cases which were audited in 2015, as well as an audit of 5 newer CSE cases (referred Aug 2016 – Jan 2017)
- Scrutiny of Section 11 returns and ongoing monitoring of improvement through a S11 action plan
- Further revision of the BSCB performance management information dataset
- Quarterly scrutiny and challenge of performance information with challenge and follow up (included 'triangulation' meetings/visits)
- Challenge sessions on: FGM data; CSE ethnicity data; CQC's Review of health services for Children Looked After and Safeguarding in Bromley; self-harm data, late bookers to maternity services; young people presenting to the Emergency Department following an overdose; IRO Annual Report; and Domestic Violence report.

- Scrutiny of single agency's audits, inspection reports, deep dives and peer reviews
- Robust challenge of a tier 4 mental health provider's performance
- Monitoring BSCB performance against the post Ofsted Improvement Plan and post YOS inspection Improvement Plan
- Roll out of a new Practitioner Survey in January 2018 which had 1200 responses from the children's workforce in Bromley

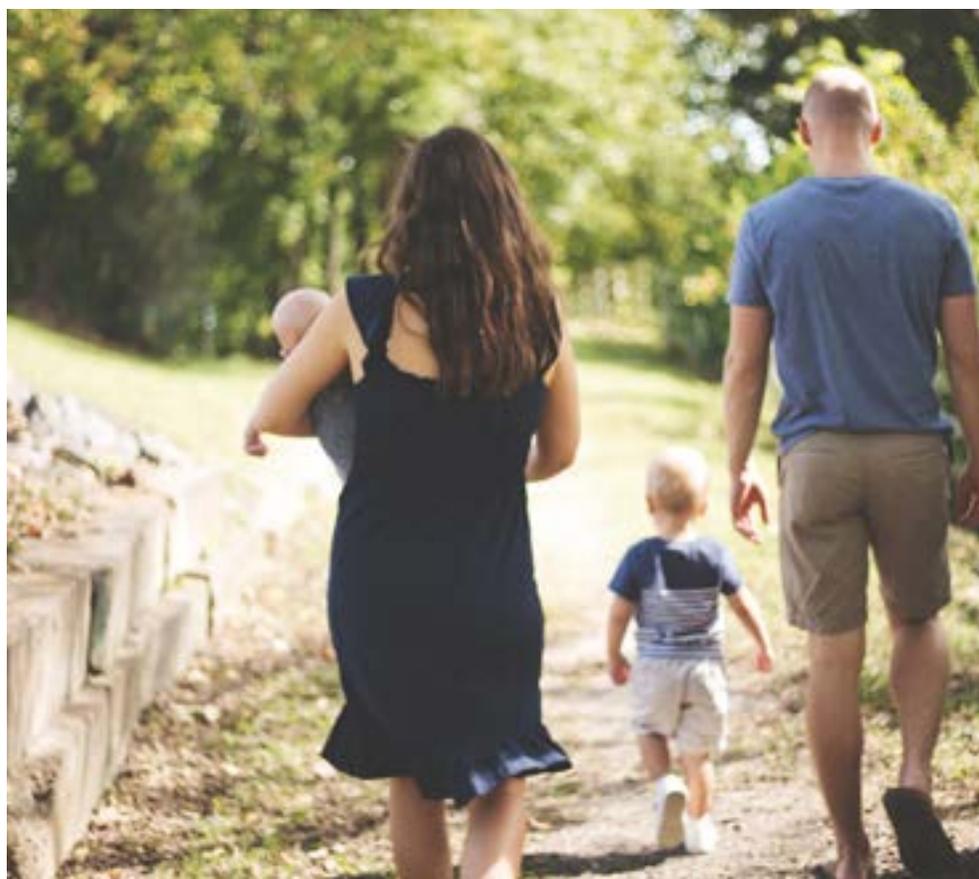




### Training Sub Group

The BSCB Training Sub Group met 3 times this year to evaluate the BSCB training provided and to agree the training programme for the following year. It is chaired by the Head of Workforce Development at LBB. This year it achieved the following:

- There was an increase in the number of attendees in face to face training sessions again this year. 1177 people attended a face to face training session, which was either formal and classroom based (714 people), or a more informal seminar/briefing (183) or a full day MAPE (Multi Agency Partnership Event) session (280).
- There was a good take up of BSCB e-learning for levels 1 and 2 with 1896 individuals completing courses. A wide range of staff complete e-learning.



- 964 people completed the Level 1 Safeguarding Children module this year compared to 279 two years ago. This is a significant improvement and continues to ensure the 'safeguarding is everybody's business' directive is reaching a much broader audience. Participants included pharmacists, childcare staff, housing, adult services staff, healthcare assistants and those working as volunteers.
- BSCB ran a well-received Annual Conference on Empowering Communities with 131 attendees in November 2017. 70% of attendees who completed an evaluation scored it as extremely or very helpful/relevant to their job, with very knowledgeable speakers and a good mix of participants.

### Vulnerable Adolescents Sub Group

The Vulnerable Adolescents Sub Group (VASG) has been in place since February 2017 and subsumed the Vulnerable Children Sub Group and post-Ofsted Working Group for CSE (child sexual exploitation), Missing and Gangs. Until October 2018 it was chaired by the Deputy Borough Commander of Bromley Borough Police. Following his departure to another role and significant restructuring of the Met Police, the Independent Chair of the BSCB now chairs the sub group in order to regain its focus. Its aim is to coordinate and ensure the effectiveness of the partnership's strategic response to adolescent vulnerability. The MASE reports to the VASG. During the year, the sub group has had a primary focus on ensuring robust and effective arrangements are in place for the following three priority areas of risk:

- Child Sexual Exploitation (including Harmful Sexual Behaviours)
- Children and young people missing from home, care and education and
- Children and young people exposed to risk through gang involvement or association.

Over the year, the VASG has:

- Published a [Vulnerable Adolescents Strategy](#)
- Undertaken stocktaking exercise for both CSE and Gangs by holding well-attended Round Table events
- Put in place a Gangs Working Group to develop a Gangs Protocol
- Published underpinning [protocols for CSE, Missing and Gang](#)
- Agreed a strategic multi agency problem profile for both victims and perpetrators in Bromley.



Going forward the VASG will widen its strategic remit to the wider range of associated vulnerabilities that young people in Bromley can be exposed to, such as Domestic Abuse, Special Educational Needs and Mental Health. VASG will be holding a Working Group in May 2018 to map:

- Identifying vulnerabilities
- Pathways to harm (knife crimes, gangs, etc)
- Interdiction/diversion strategies.

### Serious Case Review Sub Group

The Serious Case Review (SCR) Sub Group is chaired by the Independent Chair of the BSCB and meets quarterly. In addition, extra-ordinary meetings are held when the unexpected death of a child requires further enquiry and cross-partner investigation. The purpose of the sub group is to: consider instances of significant harm to, or the death of a child that may meet the criteria set out in section 5 of the Local Safeguarding Children Boards Regulations; to agree how learning can best be captured, distilled and shared; to act as the core group when an SCR is initiated and to maintain critical oversight of action plans resulting from SCRs and learning reviews. The Child Death Overview Panel (CDOP) now reports directly to the SCR Sub Group. The BSCB Business Manager attends CDOP meetings and all Rapid Response meetings for unexpected deaths of children in Bromley. CDOP and Rapid Response updates are a standing item of the SCR Sub Group.

During 2017/18, the SCR Sub Group:

- Worked jointly with Lambeth on an SCR regarding the murder of a five year old boy (learning will be published in 2018/19 annual report)
- Commissioned an SCR regarding the murder of a teenage girl in 2014 which was not considered for SCR at the time
- Commissioned two further SCRs relating to a teenage suicide and a case of child sexual abuse (learning will be published in 2018/19 annual report)
- Commissioned three Learning Reviews on the theme of links to gangs, cross borough working for children with disabilities and a suspected fictitious illness (learning will be published in 2018/19 annual report).

### Community Engagement Sub Group

A new Community Engagement Sub Group has been in place since May 2017. The sub group provides a platform to listen, learn and reflect on the experiences and feedback from our children and young people, their families and carers. It will be responsible for the development and maintenance of the BSCB Communication Strategy, networking and surveying opportunities, reality checking, providing an opportunity to be heard and to challenge, capture impact and cascade strategies. During the last year, the Sub Group has been responsible for commissioning and testing a Digital Footprint Survey. 967 primary school children (7-11 years), 1383 secondary school children and young people (11-18 years) and 872 parents with children in education from preschool to Year 13 were surveyed online from July – October 2017. The survey aimed to understand the online footprints of Bromley's children and young people and their exposure to potentially harmful content or behaviour. Detailed findings gauging parent/carers' awareness of their children's online behaviour and their ability to activate the correct safety measures were also included. A full report with recommendations and tools has been published on the [BSCB website](#). The follow up in 2018 will include the launch of a specific Safer Schools App to address issues highlighted by the survey.

Over the next year, the Independent Chair is refocussing the group to focus on specific issues in more depth. A series of 3 meetings per issue will take place where the voice of children and communities is heard, an issue defined, solutions sought from partners and impact monitored. Surgery sessions with the Independent Chair will also be set up.

### Education Safeguarding Advisory Committee

The terms of reference and membership of this group have been revised to ensure that work is led by schools and settings to meet their needs. There is good representation across early years, primary, secondary special and independent sectors. To respond to our demanding work programme, ESAC now meets twice a term.

The purpose of ESAC is to:

- champion safeguarding across all education settings in Bromley, by promoting understanding of the need to safeguard the welfare of children;



- provide a communication channel between education settings and BSCB to share information and as a source of peer support in meeting safeguarding responsibilities;
- respond to and act on learning from serious case reviews and BSCB audits.

An ambitious work programme has been informed by the 2017 school safeguarding audits. We also heard from a headteacher leading a similar group in a neighbouring borough and learned from how they have tackled their local priorities. Over the coming year, the work programme will cover:

- Sharing resources
- Safe transitions between schools
- Model safeguarding policy /policies, endorsed by ESAC and BSCB, including a child friendly version
- Supervision for Designated Safeguarding Leads (DSL)
- Learning from serious case reviews
- Quality assurance through safeguarding audits
- Supporting implementation of revised KCSIE when published
- DBS checks for school governors, directors.

### Health Economy Safeguarding Children Forum

The Health Economy Safeguarding Children Forum is chaired by the Bromley Clinical Commissioning Group (CCG) Head of Safeguarding / Designated Nurse. It provides a professional network for named safeguarding professionals (nurses and doctors) across the NHS and private sectors. The Forum helps support these professionals to link the work of Bromley CCG, BSCB and NHS England and informs their work plans, training, supervision and their Boards. This year:

- The Forum met bi-monthly through 2017/18. Membership includes safeguarding named professionals (nurses and doctors) and leads from across the NHS and private organisations.
- Presentations to the Forum included: Bromley Change, Grow, Live, the Children's Drug and Alcohol Service; Writing Individual Management Reviews Workshop setting the standards for serious case reviews and learning reviews.
- Forum members were tasked with reviewing their safeguarding related policies to

ensure the following areas were included: 'Think Family', capturing 'the voice of the child', 'Was Not Brought', disseminating learning and changes to practice and the escalation process.

### Financial Arrangements

A range of partner agencies continued to contribute to the BSCB's budget for 2017-18, in addition to providing a variety of resources, such as staff time, accommodation and IT for the BSCB Team, and free venues for meetings and training. Agency financial contributions totalled £129,014. This income together with prudent Reserves set aside last year ensured that the overall cost of running the BSCB was met.

Two health providers struggled to make the requested financial contributions to the BSCB this year due to unprecedented financial strains in their organisations. This was robustly challenged by the Independent Chair and both agencies committed to contributing the same amount as in 2016-17 with one agency additionally agreeing to pay the increased rate in 2018-19 which had been requested last year and refused.

A significant number of Serious Case Reviews and Learning Reviews were underway or agreed by the Independent Chair during 2017-18 so significant funds have been put in reserves for this purpose.





## BROMLEY SAFEGUARDING CHILDREN'S BOARD 2017-18

<b>INCOME</b>	<b>£</b>	<b>EXPENDITURE</b>	<b>£</b>
2016-17 Carry forward (including SCR Reserves)	79,297	BSCB SALARIES, including independent Chair, lay members expenses and temp BSCB Auditor	169,155
Bromley CCG	22,046	TRAINING COSTS, including e-learning and annual conference	34,398
Oxleas NHS Trust	22,046	SCR/Learning Review COSTS	18,394
Bromley Healthcare CIC	10,530	OTHER costs, including general office expenses, venue hire	497
Kings College Hospital NHS Trust	22,046	SCR Reserves (£40k) and Other Reserves for ringfenced activity (£5330) for 2018-19	45,330
Metropolitan Police	5000	<b>TOTAL EXPENDITURE</b>	<b>267,774</b>
Bethlem And Maudsley Hospital School	615		
CAFCASS	550		
National Probation Service	800		
Community Rehabilitation Company	1000		
London Borough of Bromley	43,881		
London Fire Brigade	500		
Training income (including annual conference)	35,215		
<i>Ringfenced money for Prevent training</i>	9830		
<i>Ringfenced money for Child Death SPOC administration</i>	15,000		
<b>TOTAL INCOME</b>	<b>268,356</b>		

As part of its Corporate Social Responsibility (CSR) programme, Ineqe Group Ltd funded the analysis of the Digital Footprint Survey, production of Take Five videos and some free training. As a leader in its field, Ineqe continues to support the BSCB in its programme of work focussing on safeguarding and technology and social media.

Going forward, it is essential that the BSCB receives adequate resources at the beginning of the financial year in order to effectively plan its work and achieve its priority objectives.



# Communication



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## THE BSCB WEBSITE

[www.bromleysafeguarding.org](http://www.bromleysafeguarding.org)

The BSCB website includes separate sections for people working with children, for parents and carers, and for children and young people. Issues including CSE, E-Safety, Gangs, Harmful Cultural Practices, Radicalisation, Emotional Health and Wellbeing; Domestic Abuse, Bullying, Substance and Alcohol Misuse and Sexual Health have their own sections of the website with advice, signposting to resources, tips and information tailored to the specific audience. There are specific pages for young carers, children in care, licensed premises, and educational establishments. We now have videos embedded, a News section to promote our surveys and new products and a live Twitter feed. The BSCB multi-agency training programme is accessed through the website and the Training and Resources section is a rich source of learning from audits, reviews and partnership events.

## TWITTER

[@BromleyLSCB](https://twitter.com/BromleyLSCB)

BSCB's Twitter account was launched in January 2017 and has been steadily increasing its number of followers. BSCB uses Twitter to share information about local and national safeguarding campaigns and promote local learning events and BSCB products to the children's workforce in Bromley as well as children, young people and families in the Borough. BSCB has supported the following campaigns through Twitter and our website this year: Safer Internet Day, E-Safety, CSE Day and ongoing CSE awareness; domestic violence; Lullaby Trust's safer sleeping; NSPCC's 'Talk PANTS' and Preventing Child Sexual Abuse; Forced Marriage Unit campaign; Private Fostering Week; DfE's second Tackle Child Abuse campaign; various FGM campaigns; good mental health campaigns; and drowning prevention following a child death in a neighbouring borough.





# Safeguarding Context in Bromley



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## BROMLEY DEMOGRAPHICS SNAPSHOT



Approximately **80,000** children and young people are under 18. Of these, around **21,000** are aged less than five years.

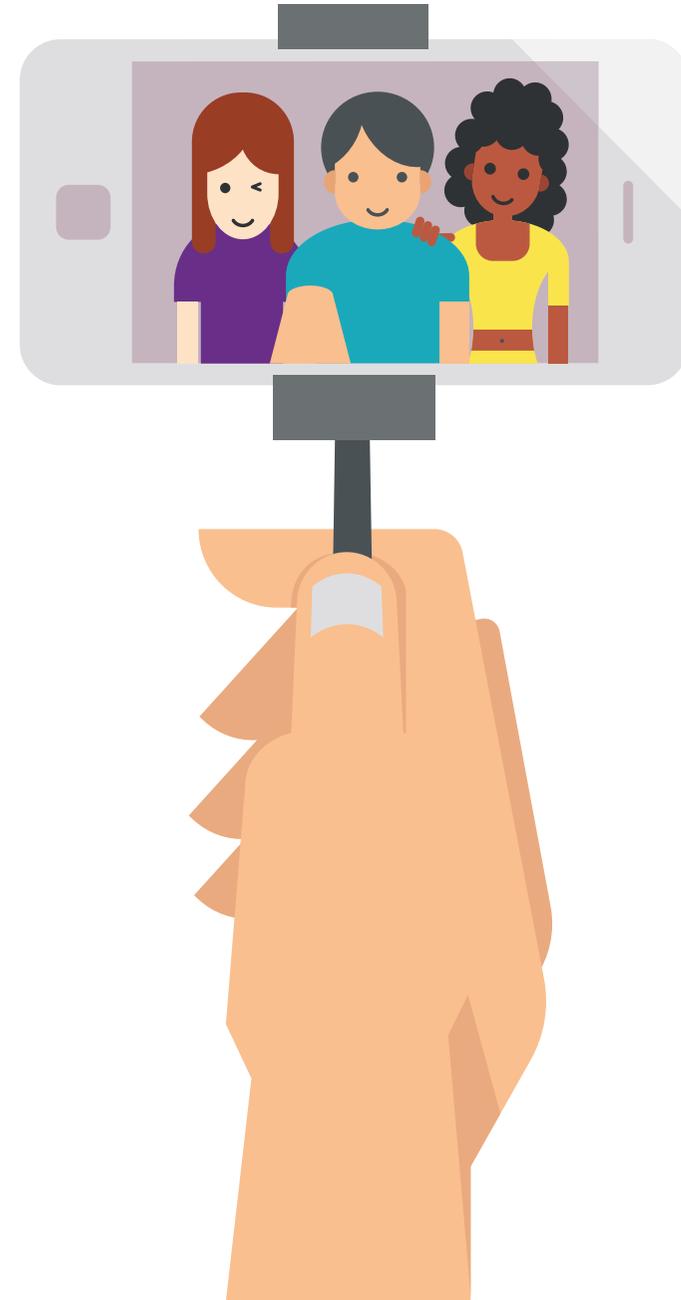
0-18 year olds make up **24%** of the total population in Bromley

Bromley's largest ethnic group is white British. Our other ethnic groups are Black African (7%), White and Black Caribbean (3%) and Black Caribbean (3%). Other White group, which include Gypsy or Irish Travellers, is 6%. Although only around 19% of Bromley's population are from BAME, for our school population the percentage of BAME is much higher at 35%.

The level of child poverty is better than the England average with **15.5%** of children aged under 16 years living in poverty.

The children and young people JSNA 2018 was published in July 2018 shortly after this report was prepared:

 [Children and Young People Joint Strategic Needs Assessment \(JSNA\) 2018](#)





## BROMLEY SAFEGUARDING INFORMATION

### MASH Enquiries and Referrals

The number of monthly MASH enquiries received during 2017-18 has fluctuated throughout the year peaking at a natural high of 814 in November 2017.

The three biggest sources of enquiries to the MASH in this period were:

- Police - 46%
- Health - 16%
- Schools - 13%

26% of all children with MASH enquiries in 2017-18 were referred to Children's Social Care (CSC) for an assessment. This conversion rate is lower than 2016-17; largely due to a the Threshold document being launched and partners having an understanding of services within the Local Authority. The highest conversion happened in June 2017 (35%); with the lowest (20%) in October 2017.

In November 2017, the MASH team ensured that they were following the Pan London MASH protocols which improved the robustness around timescales. Child protection concerns are always passed straight to the Referral and Assessment Service (RAS) where checks are carried out with the Child Abuse Investigation Team (CAIT) as part of the S47 process.

### Social Work Assessments

In 2017-18, 2476 Social Work Assessments (SWAs) were completed; compared to 2703 in 2016-17. 88% of SWAs were completed within 45 days, which exceeds the previous year's outturn of 67% and our annual 2017-18 target of 87%. The 3 most common factors identified at SWA were:

- Domestic Abuse (of parent/carer)
- Emotional Abuse (of parent/carer)
- Mental Health (of parent/carer)





### Children in Need

A child in need is defined under the Children Act 1989 as a child who is unlikely to reach or maintain a satisfactory level of health or development, or their health or development will be significantly impaired, without the provision of services, or where the child is disabled.

The Department for Education Child in Need Census includes all children referred to CSC and any that are currently open cases, except cases where children have reached successful permanence and are being monitored for funding purposes.

Locally, our Child in Need cohort is those children who have been assessed as being in need by a completed Social Work Assessment (excluding Children Looked After, Care Leavers, Child Protection and Private Fostering). Children with a disability are categorised into further subcategories of Child in Need.

In 2017/18, 4271 children were open to Children's Social Care at some point. At 31st March there were 1862 children in need. This is 250 per 10,000 children in the Bromley population, and below the 2016/17 national average of 330 per 10,000.

The total number of children assessed to be in need has fluctuated this year but has generally increased as the number of children subject to a Child Protection Plan has reduced. The Disabled Children Team Child in Need numbers have not greatly fluctuated month-on-month.

### Section 47 Investigations and Initial Conferences

1280 Strategy Discussions were held in 2017-18 and 1023 Section 47 enquiries commenced. This is over 20% less than in 2016-17 and expected for this stage of our improvement journey.

382 children were the subject of Initial Child Protection Conferences (ICPC) in 2017-18. This is a 23% decrease from 2016-17. The average monthly number for 2016-17 was 32, ranging from the lowest number of 21 in May and the highest of 50 in July. Per 10,000 children in Bromley, 55 children had an ICPC, a decrease from 71 last year, and below the national average of 65.

74% of ICPCs have resulted in the child becoming subject to a Child Protection Plan in 2017-18, compared to 41% nationally.

81% of ICPCs were conducted within 15 days of S47. This is lower than the previous year's outturn but above the national average.

### Children Subject to a Child Protection Plan

There were 222 children subject to a child protection plan. This represents 30 per 10,000 population and is below the national average rate of 43. This marks the lowest Bromley rate since the end of 2012-13. The number of children subject to a CPP in Bromley has reduced by 1/3 since this time last year.

There are no longer any 'multiple' categories of abuse for children subject to a child protection plan. The highest category of abuse for Child Protection Plans is Neglect (119, 54%); followed by Emotional Abuse (85, 38%).

In 2017-18, 15 children have ceased to be subject to a Child Protection Plan that was longer than 2 years (there were none in the second half of the year). This is an improvement on the previous year and brings Bromley in line with the 2016-17 national average of 3.8%.

55 children (19.5%) were subject to a Child Protection Plan for a second or subsequent time in 2017-18. This is slightly higher than the national average of 17.9%. Again this change would be in line with our improvement plan and practice improvement

The recording and reporting of visits changed in March 2017. One year on, managers are using weekly and monthly data reports to ensure that all children are seen every 10 days and visits are written up within 48 hours. The monthly data shows that this is now significantly improved.

### Children Looked After

At the end of March 2018, there were 310 Children Looked After (CLA). This increased by 22 since the end of 2016-17. This amounts to 42 per 10,000 population and is



significantly below the national average rate of 62 per 10,000.

54% of the CLA cases were held in the CLA team and 18% in the Leaving Care Team (LCT). The remaining children were spread across 4 other Children's Social Care teams.

At 31st March 2018, 23% of children were looked after under Section 20, this is 8% lower than last year as there are now more children with Full Care Orders. Bromley has reviewed all S20 children to consider the direction from the President of the Family Court to confirm the appropriateness of S20 and the proportionality of decisions.

35 (11%) children were in 3 or more placements during 2017-18. This is an improved position from 2016-17 and above the national average of 10%.

65% of Children Looked After under the age of 16 have been in care for 2.5 years and in the same placement for 2 years. This is an improved position but slightly below the National average of 68%.

At 31st March 2018, 72% of CLA were in foster placements. Of these:

- 48% with in-house carers
- 35% with IFAs
- 17% in connected persons placements
- 18% in residential placements
- 3% in independent living
- 4% in adoptive placements
- 3% placed at home

23% of children are placed outside of Bromley and more than 20 miles from where they used to live. This is above the national average of 16% but is due to the complexity of young people and the need for them to be outside the borough due to safety issues.

Of the 61 care leavers aged 17 and 18, 59 were in touch, and of this 59, 93% were in suitable accommodation. 65% were in EET.

The outturns for 19-21 year old care leavers are below the national average. 19%



of the 155 care leavers were no longer in touch on their birthday compared to 10% nationally. 75% were in suitable accommodation, compared to 84% nationally. 46% were in EET; just below the 50% national average.

Bromley CCG is now notified of CLA who are placed in borough by other Local authorities and receives regular notification of CLA placed by Bromley in other boroughs. The LAC Health Forum enables partner agencies who work with CLA to work more effectively and share each other's knowledge and information, providing better joined up support for young people. Recruitment of the new Designated Nurse for CLA ensures a seamless handover and continuity of care. The GP training, an interactive session about CLA, was well received by participants and feedback was positive. Ongoing supervision of the Named Nurse has led to improved communication and better understanding of the role.

- Quarter 1 and 2 presented together: 100% of initial health assessments for under 5's were completed within statutory timeframe. 68% of initial health assessments for over 5's were completed within the timeframe. 100% of review health



assessments for all children completed within timeframe.

- Quarter 3 data: 100% of Initial Health Assessments (IHA's) for all children were completed within the statutory timeframe... For Review Health Assessments, 84% of under 5's and 95% over 5's were seen within the timescale.
- Quarter 4 data: 100% of initial health assessments for under 5's and 97% of over 5's were seen within statutory timeframe.
- For Review Health Assessments, 80% for under 5's and 90.2% for over 5's.

### Adoption

14 children were adopted from care in 2017-18. This is 10% of children ceasing to be looked after - slightly below last year (11%) and lower than the national average of 14%.

22 children have been newly placed for adoption in the year. This is a significant improvement on just 8 in 2016-17. At the end of 2017-18 there were 13 children placed for adoption and a further 9 had had an ADM decision for adoption and were waiting to be placed.

11 CLA (7.5%) ceased to be looked after due to a Special Guardianship Order in 2017-18. This is less than half of the number from 2016-17 and below the national average of 12%.

The average number of days between a child entering care and moving in with an adoptive family in 2017-18 was 449. This is longer than the national threshold of 426 days.

The average number of days between Bromley receiving court authority to place a child, and matching the child with an adoptive family, was 142 days in 2017-18. This is longer than the national threshold of 121 days. The 3-year average is also above this at 169 days.

The percentage of children waiting less than 14 months between entering care and moving in with their adoptive family was sustained at 44%; slightly below the national average of 47%.

The published scorecard looks at data over the last 3 years and will continue to be affected by the long adoption timeframe of a 15 year old in 2015-16.

### Fostering Households

At the end of 2017-18, there were 117 approved foster carer households (including respite and connected persons). This is an increase from 112 at the end of 2016-17. There have been 14 newly approved mainstream foster carer households this year with a further 12 in the pipeline and 12 newly-approved connected person households.





## Youth Offending

The Youth Offending Service (YOS) supports children and young people aged 10 to 17 entering the criminal justice system for the first time or as a repeat offender. The YOS aims to reduce and prevent offending amongst children and young people to improve outcomes away from crime. Caseloads have increased by 40% since April 2017. YOS has experienced an increase in Out-of-Court Disposals and Pre-Court Interventions as a result of low-level offending.

The YOS reports quarterly on 3 main key national indicators

### 1. Custodial Sentences

Despite the increase in the number of active cases, only one young person was sentenced to custody during the month of March 2018. There has also been reduction in high gravity offending. Custodial sentences are currently low. On average, one young person is sentenced to custody a month since April 2017. Custodial sentences have reduced annually by 14%.

### 2. First Time Entrants

The number of first time entrants has increased annually in comparison with the previous year. There has been an increase in first time entrants entering the criminal justice system for knife-related crime. Knife-related crimes are not eligible for a Triage intervention which prevents the opportunity for a young person to be diverted away from entering the criminal justice system. 30% of first time entrants for March 2018 were knife-related crimes. This is a 3% reduction since February 2018.

### 3. Reducing Re-offending

The following narrative is based on 2017-18 local live tracking information and data rather than national data (the national data set tracks young people for 12 months and verifies that data via the Ministry of Justice; taking 18-24 months for the data to be published. The last published national dataset relates to the period 2014-2016).

Therefore, for the purposes of this 2017-18 Annual Report, the local live tracking information and data for Bromley young people will be used.

In Bromley, 166 young people who were sentenced or received a youth caution between April 2017 and March 2018. Of the 166 young people in the offending cohort, 47 re-offended (28%). The 47 who re-offended committed 141 offences between them a frequency rate of 0.85%.

Although the April 2017 to March 2018 cohort still needs to be tracked until March 2019, the YOS have achieved a 19% reduction in the number who re-offended. However, due to the number of prolific offenders within the cohort, the number of offences committed (141) by those who have re-offended has increased by 18% in comparison with the previous year.

Of the 47 who re-offended, 11 are prolific offenders who have committed 4 or more offences to date. The YOS are targeting these individuals with enhanced interventions aimed at reducing further offending through constructive activities, group work and 1-2-1 supervision.

YOS are working jointly with multi-agency partners to better understand and respond to offending in Bromley. This continued partnership approach will enable increased opportunities to enhance our preventative offer as well as better utilising the existing early help provision in the borough; all of which will impact on better outcomes for this group of young people.



## RE-OFFENDING LIVE TRACKER

### Numbers in the Cohort



### % of Re-offenders (Binary Rate)



### Numbers who Re-offended



### % of Offences (Frequency Rate)



### Number of Offences



### Re-offences per re-offenders



\*Note: 2017-18 Cohort to be tracked to the end of March 2019 (full year not complete)\*



The YOS also reports against local indicators including the following:

- Suitable Education, Employment & Training

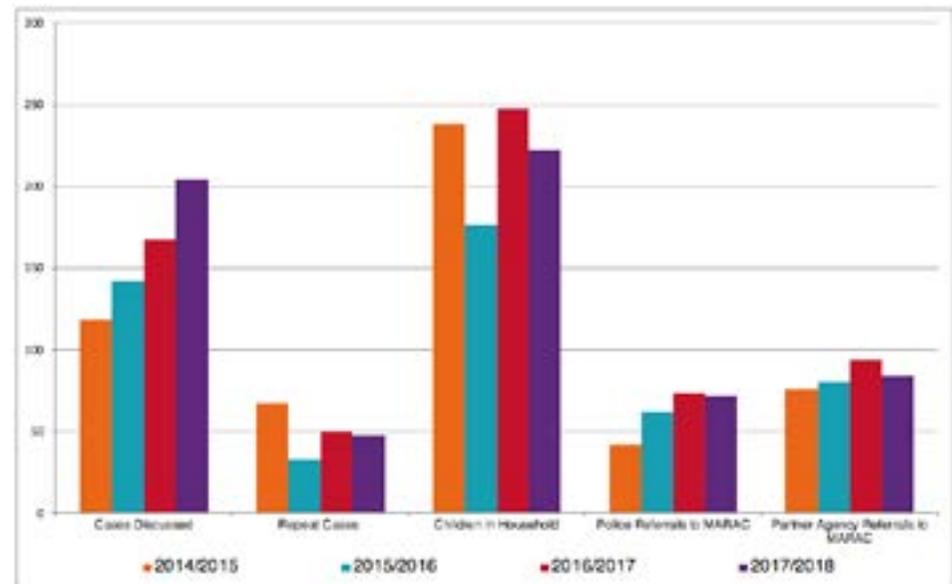
The proportion of young people who are actively engaged in education, training or employment is counted as at least 25 hours and, for those above statutory school age, at least 16 hours. Of the 21 interventions ending during March 2018, 6 young people were NEET at the end of their order. All of these NEET young people are above school age and were referred to the 16+ education officer.

### Domestic Violence and Abuse

Ensuring a robust and effective multi agency response to Domestic Violence and abuse is a priority for BSCB and other partnerships in Bromley. Domestic violence is one of the key themes of Safer Bromley Partnership's Strategic Assessment Report around keeping victims and their families safe and holding perpetrators to account. Further detail on the progress made is set out later in this report.

The Multi-Agency Risk Assessment Conference (MARAC) is a process which aims to allow statutory and voluntary agencies to give a consistent and structured response to managing the risk in cases of Domestic Abuse. During 2017/18, 204 cases were discussed at MARAC which follows the trajectory of year on year increase seen over the last three years. There were 222 children in the households of these cases. Referrals were made to MARAC from the police, IDVA, social care, education, health services, mental health services, probation and the voluntary sector.

The table below sets out MARAC referrals over the last three years.



### Elective Home Education

As of July 2017, 232 children were registered as receiving elective home education (EHE) compared with 122 in 2011/12, 139 in 2012/2013; 146 in 2013/2014, 178 in 2014/2015 and 212 in 2015/2016. There continues to be a steady year on year increase. This is not confined to Bromley, but seen as a national trend. It is recognised that this number is fluid with families returning to mainstream education during the academic year. Bromley has a high point of engagement between the education advisor and EHE families, with 89% success with 1:1 face to face visits.



It should be noted that these figures are based on academic years as opposed to financial years. As of 29th March 2018 there are 268 families recorded as EHE.

Clear systems of escalation for non-engagement are embedded. The main reasons given for EHE remain consistent year on year with the greatest reason of philosophical preference, accounting for 26% of declarations compared to 27% the previous year; followed by bullying and anxiety issues accounting for 17% of declarations compared to 18% the previous year and 16% of declarations linked with dissatisfaction with the school. This cohort has seen a rise of 6% compared with previous years data. It should be noted that the gender split of students declaring EHE remains balanced.

The ethnic breakdown of students appears to be representative of the demographic mix of the population of Bromley. Of the 232 families that declared EHE 189 disclosed and had a record of their ethnicity with 69.3 % of EHE declarations coming from a white British background compared to the previous year of 56% and 30.6% from a minority ethnic background compared to 19% the previous year. Whilst this split appears to be representative of the demographic student population of Bromley (63% of 49371 student population coming from a white British background and 34.87% coming from a minority ethnic background), it should be noted that in real terms there was an increase in declarations from those of a minority ethnic background and in particular from the traveller community which comprised of 18% of the total ethnic minority and 8.3% of the total ethnic declarations

A clear protocol exists between Bromley CSC and the Education Welfare Service to manage EHE arrangements. These arrangements remain subject to on-going and robust scrutiny by Senior Leadership Team and Portfolio holders.

### Private Fostering

A private fostering (PF) arrangement is where a child under the age of 16 (18 if disabled) is cared for by a person other than their parent, person with parental responsibility or a close relative for 28 days or more. BSCB monitors the arrangements in place for privately fostered children in Bromley. The QA & PM sub group considers the quarterly data on private fostering and the BSCB receives the local authority (LA) annual report to scrutinise the arrangements the LA has in place to discharge its duties

in relation to PF. Progress in 2017/18 has included regular scrutiny of progress by the BSCB helping to put in place new processes and systems to prevent drift and delay. Bromley Annual Private Fostering Report 2017/18 provides a full analysis of Private Fostering activity.

The Private Fostering process changed on the 1st of April 2018. The previous current process of notifications was that all notifications went through the MASH Service, then Referral and Assessment Service carrying out Regulation 7 visit, Regulation 4 assessments and Regulation 8 visits until the case was transferred to Private Fostering. The Private Fostering Team only accepted the case following a positive suitability assessment of the private fostering arrangement and assurances that there are no safeguarding concerns.

As from the 1st April 2018 we have streamlined the process; although the notifications will continue to go through the MASH they will now transfer the cases directly to Private Fostering as opposed to Referral and Assessment Service. This means the regulation 7, 4 and 8 will now be carried out and completed by the lead officer for private fostering addressing the issues of drift and delay and adding consistency of social worker to the children and young people in these arrangements.

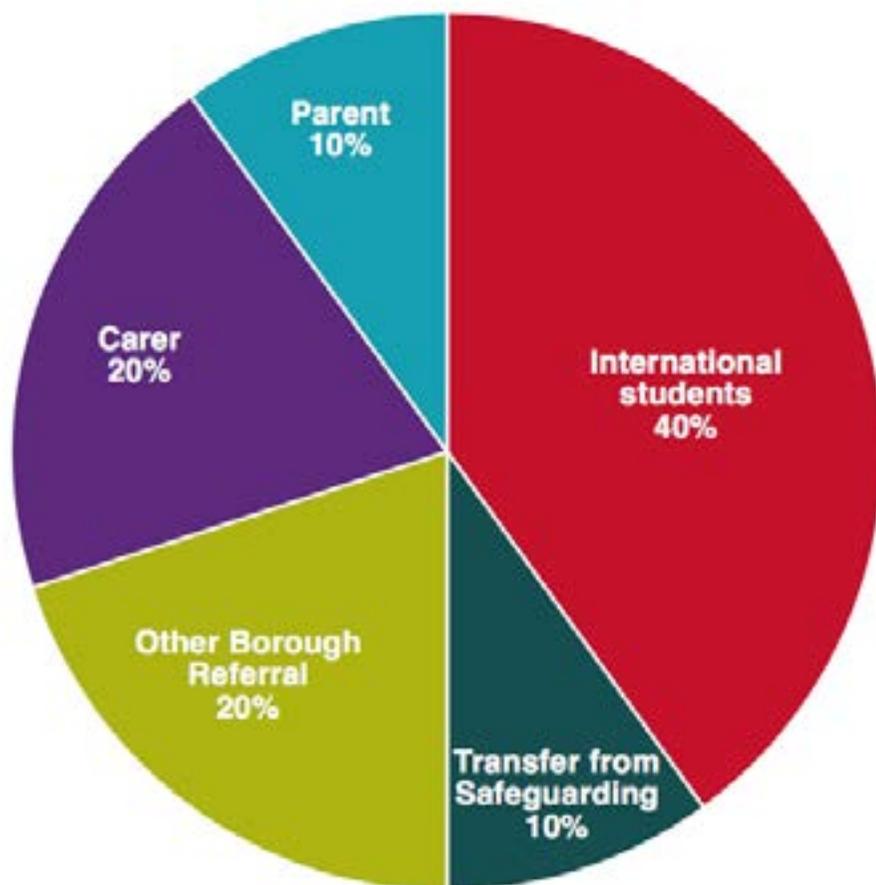
In the financial year 2017 to 2018 there were 10 notifications for Private fostering arrangements.

Referrals and Notifications	
International students	4
Other Borough Referral	2
Carer	2
Parent	1
Transfer from Safeguarding	1

Total number of notifications for the period 01/04/2017 to 31/03/2018 is 10.



## Referrals and Notifications



In this financial year the BSCB has developed and launched a Private Fostering App which we have promoted to professionals and partner agencies, as well as on posters. The aim is for every social worker in Bromley to have the app on their mobile. We have also developed Welcome Packs for carers, parents and children, with essential information about the service including the complaint procedure. We are in the process of developing a booklet for professionals about private fostering which will

be rolled out in May 2018. In addition Private Fostering posters and App have been featured in newsletters, circulars including Bromley spotlight. We are also advertising the Private Fostering App on 3 different Petrol stations across Bromley.

The lead officer has presented Private Fostering training for professionals as part of Learning and Development sessions, as well as presentations to various team meetings across children services, Bromley CCG and at the Bromley Safeguarding Children Board Annual conference. Our aim is to make Private Fostering Training part of Learning and Development mandatory training for social workers and other children's safeguarding officers in Bromley.

### Young Carers

Young carers are young people who care for a family member who is affected by a long term illness, disability, mental health issue, alcohol or substance misuse or HIV. Carers Bromley's Young Carers Service supports young carers aged 4 - 18 years.

Carers Bromley is in contact with over 1,000 young carers living in the London Borough of Bromley.

### SEND (Special and Educational Needs)

As at January 2018, there were 50,869 children and young people aged 0-19 attending Bromley state funded schools. Of this cohort, 5,927 (11.7%) are receiving SEN Support (primary age 12.4% and secondary age 10.6%). There are 1,848 children and young people for whom Bromley maintain Education Health and Care (EHC) Plans or Statements of SEN. The school census indicates that 1,498 children are eligible for free school meals, 779 speak English as an additional language and 78 identified as being from the traveller population:

	Travellers	EAL	Free School Meals
<b>SEN Support</b>	72	619	1,107
<b>EHC Plan / Statement of SEN</b>	6	160	391
	<b>78</b>	<b>779</b>	<b>1,498</b>



Bromley schools have a higher percentage than outer London or national of pupils with

- Specific learning difficulties
- Severe learning difficulties
- Social, emotional and mental health needs
- Hearing impairment
- Autistic spectrum disorder.

Bromley schools have a lower percentage than outer London or national of pupils with

- Moderate learning difficulties
- Multi-sensory impairment
- Profound and multiple learning difficulties.

The number of children with a disability who are known to Children's Social Care was 441 in March 2018, an increase from 395 in September. The increase is partially due to the promotion of short breaks and the introduction of the Short Breaks Online Assessment. Short breaks provide opportunities for disabled children and young people to have enjoyable social experiences as well as providing a valuable break for their parents or carers. Short breaks can enhance social development and reduce social isolation and can include day, evening, overnight or weekend activities and take place in the child's own home, the home of a carer, a residential or community setting.

During 2017 and into 2018, Bromley is undertaking a root and branch review of arrangements for SEN/D to examine how we:

- Organise ourselves in order to meet the needs of our children and young people who have SEN/D
- Spend our resources
- Understand and know what strengths and challenges exist in the borough and what families think of the current arrangements
- Improve the arrangements for children and young people who have SEN/D.

Throughout the review, parents reported that, based on their experience, Bromley needs a more graduated range of support and provision that is offered consistently to children, young people and their families across education, health and care providers in the borough.

The vision in Bromley is to work in partnership across the local area to ensure a well-planned continuum of provision from birth to age 25 that meets the needs of children and young people who have SEN/D and their families.





## Children with Disabilities

In March 2018, there were 441 children known to the Disabled Children's Team within Children's Social Care. Historically there was a significant increase in cases open to the team (which includes the provision of short breaks), following the legacy of 'Aiming High for Disabled Children' starting from 2008/9 to 2010/11 where children with a lower level of disability were accepted into the service. Since 2011, many of these children have been closed as no longer needing a service, or reaching 18 years of age.



In the past 12 months we have started to increase again in cases open to the Disabled Children's Team, with the implementation of the on-line assessment which has supported easier access to services but also a closer level of monitoring. It is also recognised that advances in medical technology has resulted in children who might not have previously survived a premature birth, now surviving, some of which have a severe/profound disability requiring services from the Disabled Children's Team.

The Disabled Children's team now complete their own strategy discussions and subsequent Section 47 enquiries / Child Protection Conferences if applicable. This has strengthened the safeguarding of disabled children; having practitioners with knowledge of the child, family, and the child's communication needs does aid in making appropriate decisions to safeguard the child, whilst also recognising the pressures of caring for such a child.

The Disabled Children's Team has also taken the lead on many court cases, including considering the appropriateness of the long term use of Section 20, as well as taking the necessary action to safeguard vulnerable disabled children. This ownership of the child's situation has improved the skills of practitioners and consistency of support for disabled children. The strengthening of management structures, legal support and monitoring panels has aided in ensuring that care planning is timely and outcome focused.

## Children's Mental Health

Bromley has a single point of access for children and young people experiencing emotional or mental health issues. This is provided by the Community Wellbeing Service (Bromley Y). Specialist Child and Adolescent Mental Health Services (CAMHS) is provided by Oxleas NHS Foundation Trust in Bromley. It is based at two sites – Stepping Stones House and Phoenix Centre.

The number of children and young people seen by Oxleas NHS Foundation Trust (CAMHS) in 2017/2018 was 1050 (1148 in 2016/17).

Prevalence data on attempted suicide this year led to the Designated Safeguarding Professionals requesting a 'deep dive' which involved the Oxleas CAMHS and



the Emergency Department at King's College Hospital NHS Foundation Trust to understand the profile and context for young people admitted to the emergency department at PRUH following attempted suicide.

At the BSCB Board meeting in December 2017, the Board scrutinised mental health support in schools and the CAMHS transformation plan 2016-20. The Board noted a concern by schools regarding self harm and also noted the most common reason for young people being referred to the Community Wellbeing Service as Anxiety followed by Changes in Mood. There was considerable variability in rates between schools but no overall geographical pattern or obvious link to deprivation.

Kent House Hospital is a 20 bed Tier 4 low secure hospital for young people aged 12 – 18 years with mental health needs requiring a low secure environment. Over the past few years, due to mixed findings from CQC Inspections and frequent changes of ownership, BSCB has been maintaining oversight of the safeguarding arrangements. Following a Care Quality Commission Inspection (October 2016) that highlighted a small number of areas that needed strengthening, BSCB members have continued to meet with NHS England, who commission the service. NHS England then submitted a deep dive report to the BSCB in March 2017 to test out improvements.



**BSCB Challenge:** Insufficient evidence to show that Kent House Hospital had improved patient safety



**Action:** Independent Chair, BSCB Manager and Designated Nurse for Safeguarding conducted a triangulation visit in November 2017. BSCB were reassured by revised policies and practice, new DBS procedures and training as well as evidence provided by the Local Authority Designated Officer (LADO). Practitioners and young people were spoken to as part of the visit and all areas of the site were seen.

A new Safeguarding Children Advisor post was created in direct response to the transition of the 0 – 4 children's (Health Visiting) service to Oxleas NHS Foundation Trust in October 2018. The Trust also launched the Safeguarding Children RiO (electronic) forms in adult and children's service. The form is designed to both support safeguarding practice and to assist reporting an agreed dataset. Oxleas made a total

of 46 referrals to Bromley Children's Social Care this year. Oxleas has improved its processes for monitoring referrals; the expectation that the referring clinician is responsible for recording the receipt and outcome of their referral helps to ensure timely escalation of cases if necessary.





In October 2017 Bromley CCG launched a year-long co-production programme (designed and produced by young people and statutory organisations) to test out the outcomes of earlier work and produce a model of service delivery for emotional and mental wellbeing for children and young. The New Economics Foundation (NEF) has demonstrated that young people want more focus on support and early intervention to reduce the risk of them going into crisis. Over 40 different meetings were held with partner organisations including schools, faith groups, after school clubs and homework clubs to test out the NEF findings. A survey was also sent out to schools in Bromley to ask young people about their emotional wellbeing. Almost 1,500 young people responded. Feedback mirrored the earlier NEF findings, which has strengthened the case for a focus on early intervention. In January 2018, a stakeholder event was held to discuss the programme, consider how outcomes could be delivered and get a system wide commitment to co-production, followed by three community meetings. In 2018 the project will continue as the community in Bromley continues to co-design approaches and models of care to meet the emotional and mental wellbeing needs of young people.

with offenders to work together in partnership in dealing with these offenders. The Police, Prison and Probation Services (Responsible Authority) has a duty to ensure that the risks posed by specified sexual and violent offenders are assessed and managed appropriately. Other bodies have a duty to co-operate with the Responsible Authority in this task. Duty to Co-operate agencies are YOS, Ministers of the Crown eg Job Centre Plus, local education authority, local housing authority, local social services authority, local health authority, Primary Care trust, NHS Trust, providers of electronic monitoring and the UK Border Agency.

As at April 2018, there are 186 Category 1 (Registered Sex Offender's) and 87 Category 2 (Violent Offenders) in the community in Bromley subject to MAPPA scrutiny.

### Alcohol and Substance Misuse

This year, the BSCB has updated its multi agency protocol for [Safeguarding Children and Young People Living with Parental Substance Misuse](#).

In 2017/2018, the Change Grow Live (CGL) Bromley Changes service received a total of 208 referrals which is an increase on from the previous years. This shows that the service is slowly becoming more established within the borough of Bromley. Bromley Changes were also able to engage with over 4,500 students in the same year by providing drugs and alcohol workshops and assemblies across both primary and secondary schools. The service has highlighted that there is a need for pieces of work around hidden harm to help support young people whose lives are affected by their parents / carer's substance misuse. Therefore the service is now engaging with primary schools by facilitating drug and alcohol awareness workshops with Year 6. Bromley Changes facilitated three group based intervention programmes in schools with individuals where substance misuse had been identified. Bromley Changes introduced a Transitional Protocol whereby an agreement was set up between both the service and the adult service (Bromley Drugs and Alcohol Service) where it has been agreed that Bromley Changes will do some early intervention for young adults aged between the years of 19-21. This would be followed up by transitioning them over to the adult service.

 **BSCB Challenge:** Concern for young people with severe mental health issues being accommodated in the Princess Royal University Hospital (PRUH) Emergency Department until a Tier 4 in-patient CAMHS bed became available.

 **Action:** The Independent Chair and BSCB Manager conducted a triangulation visit at the PRUH and was reassured of the context for keeping the young person in a secure and separate area within ED to best suit their needs until a specialist Tier 4 bed became available. Staff were interviewed from a range of grades and the accommodation itself was inspected.

### MAPPA

The Criminal Justice Act 2003 provided for the establishment of Multi-Agency Public Protection Arrangements (MAPPA) in England and Wales.

These are designed to protect the public from serious harm by sexual and violent offenders. They require the local criminal justice agencies and other bodies dealing



Within Bromley we have designated safeguarding leads for both BDAS (adults) and Bromley Changes (children). The Service Manager is a member of the BSCB and also the Training Sub Group. In October 2017 CGL Bromley Changes participated in the CQC audit for Looked After Children where positive feedback was given, for instance with regard to how Bromley Changes works effectively with schools. Satellite sessions are held in various schools across the borough, delivering “drop in” clinics and hosting sessions on health promotion and preventative work often through school assemblies. In particular the school “drop ins” have been effective in engaging young people with the service and in one school, 23 young people signed up for a group programme, demonstrating evidence of good engagement.

In 2017 Bromley Change conducted 45 safeguarding interventions and recorded 82 reviews.

### Mental Health

Guidance for adult mental health services on making a referral to Children’s Social Care was developed and launched by Oxleas NHS Foundation Trust early in the year. Oxleas continues to embed a ‘Think Child, Think Parent, Think Family’ approach in adult services. The safeguarding children adult mental health specialist has increased the number of ‘drop ins’ for in patient and community settings. These offer practitioners an opportunity for case discussion or can be used for ad hoc safeguarding children updates.

The CQC Review of Looked After Children found the ‘Think Family’ approach well embedded at Oxleas. Oxleas perinatal team have now been given access to care records at Kings College Hospital where women have been identified with significant mental health issues.

### Trading Standards

A key priority for Trading Standards is to contribute to the safety and wellbeing of young people in Bromley. A specific programme of advice, education and enforcement is carried out every year in order to ensure local businesses who sell age restricted products are not selling to under age children. By restricting access to alcohol, tobacco, e-cigarettes, fireworks and knives to young people we can support





healthier lifestyles as well as keep young people and the communities they live in, safe from anti-social behaviour and crime.

The London Knife Crime Strategy, published by the Mayor of London in June 2017 set out a number of recommendations in response to increasing knife crime with injury cases. They included the implementation of responsible retailers agreements, and test purchasing by trading standards to identify those businesses willing to sell knives to young people. Throughout June, July and August visits were made to small retailers who sold knives and bladed articles and encouraged them to sign up to the Bromley responsible retailer scheme known as Bladesafe. Around 20 of these businesses agreed to sign the agreement, receiving an information pack and window sticker. These visits were followed up with test purchase attempts by an 18 year old to test the diligence of the business, who agreed to a Challenge 25 policy as part of the

Bladesafe agreement. A further test purchase by an underage police cadet working with trading standards was carried out and none of the Bladesafe businesses sold.

Between April 2017 and March 2018 the service carried out 63 business advice visits at high risk premises, providing guidance to retailers on their obligations around selling age restricted products to children, in particular tobacco, alcohol, fireworks and e-cigarettes. Test purchase attempts using an 18 year volunteer provided evidence to justify further under age test purchasing with two 15 year old police cadets working with trading standards. There were 10 illegal sales of alcohol, tobacco and fireworks which have been dealt with by way of prosecution, alcohol licence reviews, simple cautions and written warnings. This compares to 26 sales the previous year with a similar number of lead in visits.





# Progress in Bromley



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## EARLY HELP

**BSCB Strategic Priority 2:** Early Help and Early Intervention.

**Actions 2017-19:** To evaluate the effectiveness of early help arrangements in Bromley

In December 2017, the Head of Service for the Early Intervention and Family Support Service (EIFS) presented to the BSCB and was challenged by partners about Early Help arrangements. As a result schools were sent full details of the Early Help offer and this will be added to the BSCB App for the whole children's workforce to be reminded about these invaluable resources. The Head of Service was also requested



to attend a challenge session at QAPM in 2018 following scrutiny of the Early Intervention dataset.

EIFS comprises of the Bromley Children Project which includes Children and Family Centres, Family Support and Parenting under SureStart Children's Centres and the Tackling Troubled Families agendas, the Information Advice and Support Service, the Common Assessment Framework (CAF) Team, and the Family Contact Centres.

Under the Ofsted Inspection in April 2016, the service was described as offering good early help support. Since then, the service has strived to ensure continuous development, to enhance the recognised good practice and to keep pace with changes to practice standards across Children's Social Care where appropriate to early intervention.

Ofsted undertook a Monitoring Review Inspection visit for EIFS in March 2018. Ofsted reported that the previous good practice continued and that there had been improvements:

*"The provision of early intervention services in Bromley is an area of strength. The Local Authority has prioritised and improved the range and quality of family support. This is effective and well established.....requests for help are quickly and effectively responded to and they are able to access a wide range of high-quality local services that are preventing the need for statutory services. This is a proportionate response to risk and is improving children's circumstances."*

Children and young people in Bromley continue to have access to and benefit from a wide range of early help services that are focused on meeting the diverse needs of local communities. Increasing the number of children and their families taking up early help services has remained a priority for BSCB. The number of step-downs from statutory social care has remained consistently high - in line with last year's record high.

The Prevention and Early Intervention Strategy has a focus on ensuring the right help is provided at the right time and in the right place.



**BSCB Challenge:** Thresholds are not clearly understood across the partnership



**Action:** The Threshold of Need Guidance was revised and published in May 2017 and shared extensively across the partnership, particularly through Multi Agency Partnership Events. A Staff Survey was rolled out in February 2018 to ask practitioners anonymously about their own understanding whilst case audits continued to check application and found improvement.

The interface between EIFS and child in need/child protection is clear through the management of all referrals via the MASH and the weekly Transfer Panel. In addition, the Heads of Service for EIFS and MASH/Referral and Assessment meet fortnightly to discuss cases, practice and service developments. Added to this, the CAF team are now embedded within the MASH five days a week to help decision making in relation to thresholds and signposting MASH colleagues to services within EIFS.

A total of 455 holistic EIFS family assessments were completed by the Bromley Children Project team during this reporting year, an increase of 11.5% against last year (2016/17).

#### Family Support and Parenting work

- Bromley Children Project ran 46 evidence-based parenting programmes, which 671 'unique' parents /carers attended equating to 3,147 session attendances.
- The number of families referred to the Bromley Children Project for support continues to grow. This year we received 876 family referrals compared to 833 last year. This represents a 5% increase.
- A total of 455 holistic EIFS family assessments were completed by the Bromley Children Project team during this reporting year

#### Tackling Troubled Families

- This reporting period is Year 3 of Phase 2 which is five years in total.
- Bromley's target cohort for Phase 2 is 1,949 families across the totality of Phase 2.
- Bromley has attached 1266 families to date.
- Bromley has achieved 384 claims in line with targets agreed with Ministry for Housing, Communities and Local Government



#### Children and Family Centres

- The number of visits to the Children and Family Centres reached an all-time high this reporting year of 94,025- an increase on last year of 10%
- The number of unique individuals accessing the Children and Family Centres reached an all-time high this reporting year of 23,514 -an increase on last year of 23%
- The co-location of the Health Visiting Service continued following the transfer of the contract to a new provider, Oxleas. The existing close working has continued and families at risk are held more securely as health visitors are becoming more familiar with the range of services and support available through the Children and Family Centres
- Health clinics delivered in the Children and Family Centres by Bromley Healthcare Health Visitors had over 19,000 attendances, an increase of 12% on last year.
- The Midwifery 'Early Pregnancy Parent Education' Classes continue to grow with over 1,480 people attending these sessions, an increase of 16.5% on last year.
- 1,664 people have used the Sensory Rooms in the Children and Family Centres including families with children displaying traits of sensory related conditions but awaiting official diagnosis. The spaces are also used by children with diagnosed special educational needs and disabilities, an increase of 24% on last year.



## Information Advice and Support Service

This year saw another increase in the number of families accessing the Information Advice and Support Service with 542 cases opened compared to 530 the previous year. The most common reason for seeking support from the service was for support related to SEN Support Stage and a perceived level of support from the school.

## Common Assessment Framework

- The number of CAFs logged with the CAF Team during this reporting year was 668, a reduction of 8% on last year's numbers. The reduction in CAFs appears to directly relate to a substantial reduction in CAFs logged by colleagues working across all health related services; a total of only 19 'health' authored CAFs were logged in this reporting year.

This year, for the first time, behavioural issues was the most common primary reason for a CAF followed by parental issues impacting on the children, and School Attendance came in third for the first time overtaking SEN.

## DOMESTIC VIOLENCE AND ABUSE

**BSCB Strategic Priority 1:** The Local Safeguarding Context

**Actions 2017-19:** To monitor the ongoing effectiveness and impact of the partnership in responding to Domestic Violence

The Safer Bromley Partnership has identified domestic violence (DV) as one of the key themes of the Community Safety Strategy and is committed to keeping victims and their families safe and holding perpetrators to account. The DV and VAWG (Violence Against Women and Girls) Strategic Group is a sub group of the Safer Bromley Partnership and works on its behalf to lead on the effective monitoring, scrutiny and governance of the multi-agency responses to DV. It consists of senior managers across social care, health, police, education and voluntary sector. The DV/VAWG Forum and the MARAC (Multi-Agency Risk Assessment Conference) Steering Group report to the DV and VAWG Strategic Group. The VAWG Strategy 2016-2019 was launched in 2016.

MARAC is a process which aims to allow statutory and voluntary agencies to give a consistent and structured response to managing the risk in cases of Domestic Abuse. MARAC is used to consider cases of domestic abuse that are categorised as High Risk. The Bromley MARAC is held on a monthly basis and is chaired by Police. Relevant agencies are able to share up to date risk information, with a comprehensive assessment of a victim's needs and decide upon the most appropriate way to lower or manage the identified risks. The number of cases considered at MARAC has continued to increase and reflects a more robust response to providing multi-agency support to victims and children at risk of domestic violence and abuse.

The VAWG Service delivered by Bromley and Croydon Women's Aid continues to respond and grow to the needs of the local community. The Independent Domestic Abuse Advisory Project (IDSVA) service is delivered under the colocation model. The co-location model ensures that services in Bromley work across boundaries in strong partnership and intervene early. The IDSVA team are collocated across: Adult Early Intervention Team; Bromley Drug and Alcohol Service; 16+ Looked After Children Team; Children's Early Intervention Team (Troubled Families); Community Safety Unit; Community IDSVA.

The co-located IDSVA's take referrals directly from the teams, engage in discussions with professionals and provide support and advice for individual cases, deliver bite size training and awareness sessions, ensure there is an awareness of services available to victims/survivors and the referrals pathways into those services. Bromley and Croydon Women's Aid in partnership with Domestic Violence Intervention Project (DVIP) deliver all strands of the LBB Domestic Violence Service to provide seamless delivery and continuity for victims. All services are accessed by one telephone number/email address. These service areas are funded through the Local Crime Policing Fund (LCPF), which is a grant provided by the Mayor's Office for Police and Crime (MOPAC).

## Independent Domestic Abuse Advocacy Project

The Domestic Abuse Advocacy Project increased victim safety and worked to improve conviction rates for domestic abuse crimes by providing dedicated support, advocacy



and advice to victims:

- 346 services users have been supported by the IDVA Service between April and December 2017. There has been a large increase in the number of 16-19 year olds supported by the service
- 90% of service users reported an increase in feelings of safety after being supported by the service
- 98% of service users reported satisfaction with the service they received from the IDVA service

### Community Domestic Abuse Projects

- Attendance at the One Stop Shop has been steadily growing; the service has had 428 attendees with a target of 330 in year ending March 2018. Support has been widened by providing specialist immigration solicitors at the One Stop Shop.
- The number of referrals made to the Keys to Freedom Support programme at the end of December was 219
- 88% of attendees had an increased understanding of the effects of domestic abuse on children on completion of the programme.
- A waiting list for the support programme is in operation as the number of referrals continues to exceed the group capacity.

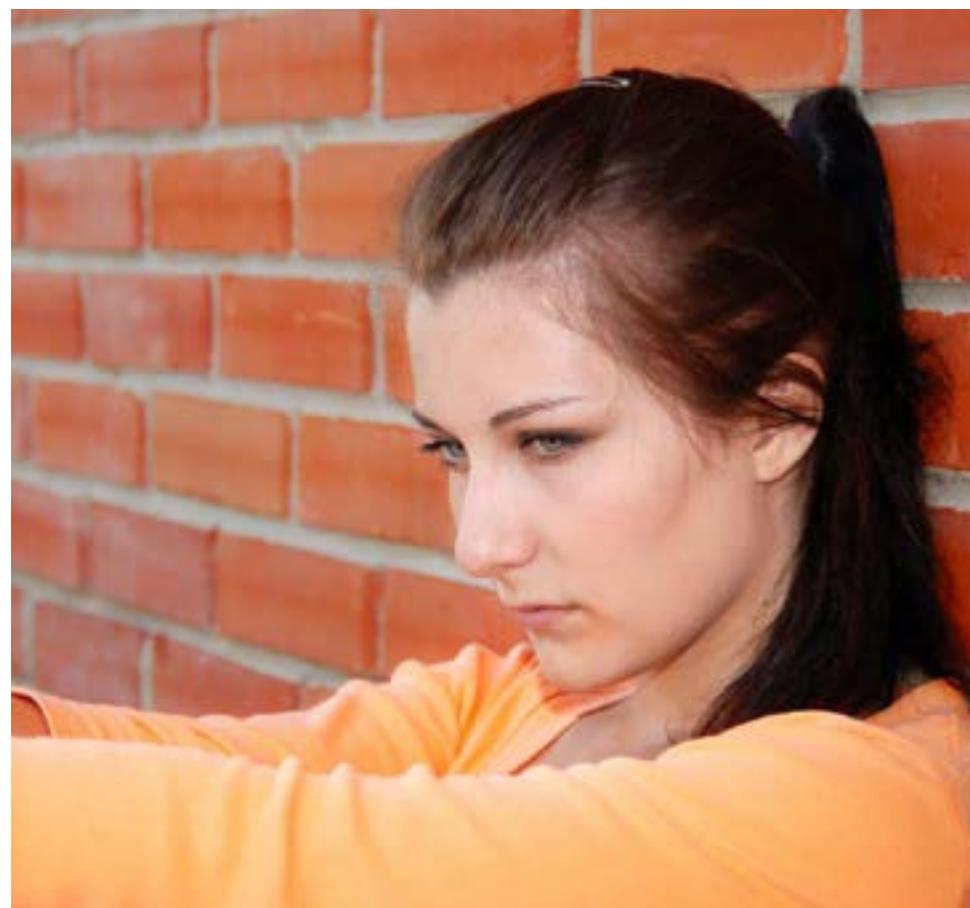
### Perpetrator Programme:

The perpetrator programme has received 37 referrals. At the end of March, 12 men were attending the programme. 100% of women reported an increase in safety where the perpetrator had attended at least 12 sessions of the programme.

### Young Person's Support Group:

The Young Person's IDVA has designed and delivered a support group for young women aged 16-25 that have experienced domestic abuse. The group was established in response to feedback from young service users that felt that the Freedom Programme did not always reflect their experiences of abuse or fully meet the needs. The programme provides crèche space to remove barriers for young women with children being unable to attend due to child care issues.

The support group takes place over 6 weeks and focuses on recognising warning



signs of an abusive relationship, understanding the impact of abuse, develop coping mechanisms that young women can use to increase self-esteem and help them move on with their lives. The programme has received a very positive response from the service users that attended.

Following the findings of the CQC review in October 2017, Kings College Hospital will speak to women about domestic abuse at booking and in addition at 28, 34 weeks and at completion of care.



## NEGLECT

**BSCB Strategic Priority 1:** The Local Safeguarding Context

**Actions 2017-19:** To monitor the ongoing effectiveness and impact of the partnership in responding to Neglect

The impact of neglect on children and young people is enormous. Neglect causes great distress to children, leading to poor health, educational and social outcomes and is potentially fatal. It can be difficult to define neglect and research shows that it often co-exists with other forms of abuse and adversity. It is also the most common reason for child protection plans in the UK. Neglect can also be a catalyst to future harm if not tackled effectively.

For a number of years in London Borough of Bromley, neglect has been the highest or the second highest category of abuse for a child being made subject to a Child Protection Plan.

The BSCB have now launched its multi agency [Neglect Strategy](#) and the accompanying [Neglect Toolkit](#). The BSCB Business Manager publicised this at a briefing session, through the BSCB newsletter and on Twitter.

The strategy outlines the vision and guiding principles of the BSCB in relation to neglect. It sets out what neglect is, what the risk factors are, what the prevalence is locally and nationally, and what our local strategic priorities are in relation to neglect. The BSCB Neglect Toolbox is for use by the children's workforce in Bromley to identify and assess neglect, record evidence using a chronology and contains links to useful information. The toolbox also contains a list of all the neglect indicators from the Bromley Threshold of Need Guidance, which is used by all partners.

The Early Intervention and Family Support Service continued to offer the bespoke parenting course developed for parents and carers of children known to Children's Social Care where their children are on a plan for neglect: Caring for your Child. Take up has been historically low and therefore in 2018 the BSCB will be requesting evidence for its effectiveness.





## CHILD SEXUAL ABUSE

Since it was agreed that all Child Sexual Abuse (CSA) cases identified by children's social care would be referred to the Community Paediatricians for involvement in strategy meetings, there has been a rise in the numbers of children being seen for CSA medicals by local community paediatricians. Historically there were only six cases referred per year on average. This had risen to ten cases per year, despite the Haven (Sexual Assault Referral Centre) criteria increasing to include review of all children assaulted within the last 3 weeks and 13-18 year olds assaulted within the last year (previously it was generally only within 72 hours). This trend is encouraging and will continue to be reviewed since it is widely acknowledged that CSA is greatly under-recognised.

Work continues to ensure that the services available to these children provide the best possible quality of care. Children that have experienced CSA are encouraged to engage with psychological support services which are accessed via the single point of access at Bromley Community Wellbeing. The Designated Doctor continues to be a member of the South East London Steering Group for CSA.

## CHILD SEXUAL EXPLOITATION

**BSCB Strategic Priority 1:** The Local Safeguarding Context

**Actions 2017-19:** To monitor the ongoing effectiveness and impact of the partnership in responding to CSE

Typical CSE victims within the London Borough of Bromley are most likely to be white females, 13-15 years of age, not Looked After by the local authority and based in central or south Bromley and are technologically capable. Victims are predominantly found to be involved in peer-on-peer offences or online offences – in fact in general these types of offences show a distinct cross over area and 25 of the 35 crimes feature a peer-on-peer style relationship that has grown to incorporate online type offences.

Predominantly the CSE offenders identified operating within the Bromley area tend to be white. The peer-on-peer offenders encountered will frequently show a tendency towards other low level criminality and links to periphery of gangs. Whilst peer-on-peer does tend to dominate the figures it is the policing teams' belief that there are actually far more online style offences that simply do not get reported. There are three main hotspots in Bromley: online/virtual space; popular fast food restaurants; open areas such as common grounds and parks.



**BSCB Challenge:** Requirement to have a CSE Strategic Lead in each agency



**Action:** Independent Chair wrote to all agencies requesting that they clarify the name/role of their strategic lead for CSE and publicise within their agency and provide proof that this was completed. Compliance has been monitored at Board meetings.

The Atlas Team was established in January 2017 with key emphasis on co-ordinating activity in relation to young people who are at risk of CSE and Missing. This team comprises of a team manager, 2 return home interview officers, a data officer and a business support officer. The team is now located in MASH to improve partnership working within a firewalled environment. They also work closely with all Children's Social Care teams and Early Intervention Services. Because the team is integrated into the MASH, it works closely with partner agencies including Police, Health, Education, YOS, Barnardo's and Bromley Targeted Youth Services (TYS) and Probation and shortly a mental health professional will be part of this.

The Designated Nurse for Safeguarding has begun scoping the role of Health within the Atlas Team; a proposal for funding to appoint an interim post has been presented to the BCCG Clinical Executive Team. The establishment of Atlas has been instrumental in developing key relationships in the partnership and ensuring the children and young people receive a co-ordinated response when risk is identified. The team works particularly closely with the Police SPOC's for Missing and CSE and the newly appointed Gangs SPOC.



In line with the BSCB focus on context and early help, the BSCB Vulnerable Adolescent Subgroup (VASG) has strategic oversight of CSE, Missing and Gangs across the partnership. Its primary role over the last year has been to ensure that pathways to harm are identified and policies and protocols developed and maintained to divert, safeguard and protect children missing from home/care and or education and vulnerable to CSE.

The BSCB's Vulnerable Adolescents Strategy has been published. This is supported by underpinning protocols for CSE and Missing. These have been reviewed in line with the pan-London protocols. Following a realignment of Atlas to MASH in May 2018, as well as implementation of Young Person's Safety Planning Meetings, protocols are to be reviewed in 2018/19.

The effectiveness of Bromley's response to CSE has been tested by a multi agency audit of CSE (completed May 2017) and a multi-agency challenge session (round table) was chaired by the Independent Chair of BSCB. The insights provided by this work has led to a number of snap audits being commissioned by the BSCB Chair including police responses to missing in the context of the use of telecoms data and cold case review and follow up.

The BSCB has produced a number of overview briefing videos called Take 5. The first Take 5 CSE video was shared with partner agencies at the end of July 2017 and is available on the BSCB website. In 2017/18, 8 CSE/ Missing workshops and 6 Harmful Sexual Behaviour Sessions were delivered via Safer London. Atlas has also worked in collaboration with the Police, Health, five Secondary Schools and Barnardo's to deliver workshops to 25 vulnerable girls to raise awareness around CSE and the impact it could have on them. The Atlas team manager continues to offer 1:1 consultations to social workers and advice to professionals. Multi Agency training on CSE and 'What is Sexual Violence?' will be delivered by the BSCB in the coming year. The BSCB Chair led a multi agency training event in August 2017 which incorporated the launch of the CSE and Missing Protocols. It was attended by 80 partners. The BSCB Annual Conference in November 2017 (140 attendees) included a presentation by the BSCB Independent Chair on CSE/Missing and also e-safety. Throughout 2017, twelve multi-agency partnership events (MAPE) were held for the children's workforce in Bromley.



The programme was developed to follow the journey of the child through the various services and to address topical issues, gaps in knowledge, and areas of concern raised by colleagues. Several MAPEs included the BSCB video on on-line safety and sexting.

A central database for CSE and missing children was set up in January 2017. It is populated with those children known to be at risk or vulnerable to CSE, identified through Multi Agency Planning (MAP) meetings. Immediately following the 2016 Ofsted inspection, the purpose of MAPS was to ensure a clearer multi-agency response to CSE and Missing. From May 2018, MAPs will be replaced with the MEGA Panel (Missing Exploitation and Gangs Affiliation). The Panel meets each Wednesday and covers all children who are at risk together with persons of interest so that we are able to effect a profile .



The arrangements for the Multi Agency Sexual Exploitation Panel (MASE) have been reviewed and changed. The Atlas data analyst co-ordinates and populates a data collection template which is starting to enable the MASE to respond strategically to CSE. Despite the volume of data being collated, key information about potential perpetrators, missing locations and CSE hotspots is not always captured effectively. There is limited triangulation with datasets held by other partners. This is a partnership responsibility and developing a more sophisticated and intelligent data set will inevitably improve service delivery for young people.

Bromley Borough Police has conducted a series of testing operations for local hotels to see if they adhere to national guidance around challenging and reporting CSE activity. This has involved the use of police cadets to support. Where hotels have failed to adhere, the Independent Chair of the BSCB has written to them to advise them that they may be retested.

All Bromley Police Officers have received central training over the last 12 months to improve initial interaction with children they come into contact with through the course of investigations and routine work. Schools officers, CSE, Gangs and Missing SPOCs proactively engage with children using a variety of means in order to provide protection, advice and gather vital intelligence.

From April 2017 CSE was included in Change Grow Live's (Drug and Alcohol Misuse Service) new Entry Into Service Assessment Tool. CGL also has a CSE Measurement Tool and this is available on the intranet. The CGL CSE Measurement Tool and Signs and Indicators of Abuse both identify missing children as a high risk sign that requires action

The CQC Review in October 2017 found that recording of child sexual exploitation risk at Kings College Hospital requires improvement and maternity staff should be asking about domestic abuse. As a result of this, the Bromley CSE assessment tool will be used at the PRUH instead of the King's tool and referrals to CSC will be regularly audited.



## MISSING CHILDREN

**BSCB Strategic Priority 1:** The Local Safeguarding Context

**Actions 2017-19:** To monitor the ongoing effectiveness and impact of the partnership in responding to Missing Children

[The BSCB Missing Protocol](#) was published in August 2017 and included a process flowchart. The Business Support Officer linked to the Atlas unit collates daily information on young people who have been reported missing. They work closely with the Police Public Protection desk (based in MASH) to reduce any delays in notification to the Local Authority. Missing is part of the MASH morning meeting and enables quick responses to children missing and enables swift allocation to the RHI officers. This enables the MASH Group Manager to ensure that strategy meetings are held appropriately.

The Return Home Interview (RHI) process has been brought in-house to CSC. The 2 RHI workers are based in the Atlas team. Between April 2017 and March 2018, 593 return home interviews were undertaken. Given the number of RHI's undertaken in the last 12 months, LBB is now in a better position to analyse the findings of these interviews and to target and commission service delivery in line with the intelligence gathered and trends identified. RHI's are offered to all Bromley children even where they are placed a considerable distance away from the Local Authority.

The collation of missing data also allows for the Atlas manager to allocate work to the RHI officers to ensure that interviews are conducted in a timely manner. Progress has been made to the timeliness and quality of RHIs which was supported in the recent Practice Assurance Stocktakes. An annual report on RHIs was presented to the BSCB in September 2017 and will be presented to the Board again this year. The delay to Safe & Well checks by police has been an area of concern and is now being addressed. From May 2018, the weekly MEGA meetings track young people who are missing, at risk of CSE and Gang Affiliation which includes the RHI data.

Bromley Police's Missing Persons Unit (MPU) has been completely re-structured with

new staff and in a new format in order to better deal with the investigation and actions related to missing persons inquiries. A more formalised working relationship has been put in place with uniformed response officers and the MPU around the early stages of investigations and as such police can enact an earlier and better co-ordinated multi-portfolio response. Staff within the command have received bespoke training around Child Abduction Warning Notices which they have cascaded to other officers within the Borough. This has resulted in an increase in the amount of these being used to stop individuals harbouring children.

The designated Professionals for Safeguarding in Health reviewed and contributed health-focused questions within the Return Home Interview questionnaire used by police, social workers and Barnados workers.

## MISSING FROM EDUCATION

[The Children Missing Education Policy](#) was updated in 2017.

The Education Welfare Service through their Children Missing Education Officer (CME) continue to ensure that Bromley Council is meeting its statutory responsibilities in regard to the identification, monitoring and tracking of children missing or not receiving a suitable education. This includes liaison with MASH where there are safeguarding concerns.

The work of the Education Welfare Service (EWS) team fits closely with other strands of work to support vulnerable pupils including supporting schools and families to prevent poor school attendance, truancy, exclusions and supporting schools and families to get children back to school once absence has occurred. The team liaises closely with Bromley Children's Project and Admissions services.

Whilst robust referral and tracking procedures are in place, children continue to leave the borough without a known destination. The majority of these cases are tracked and traced by the Education Welfare Service and Child Missing Education Officer (CME). From September 2016 to July 2017, the EWS received 167 CME referrals compared to 213 the previous year. The decrease in referrals can be explained in the statutory referrals of off rolling notifications by Bromley Schools.





The majority of pupils referred to the CME officer either moved out of the borough or remained resident in the borough but transferred to an out of borough school: 13% of referrals received related to students who had moved overseas, their departure being verified by border agency checks; 26% of referrals related to families moving out of the borough and securing schools in other authorities; 50% of referrals locating families and confirming attendance within Bromley schools or return to Bromley Schools. 1.1% of referrals subsequently identified as being Electively Home Educated, having never entered the education system. The remaining 8.9% of referrals resulting in referrals to Fair Access; School Attendance Orders being issued or In Year applications being secured.

The Gangs Round Table event was a stock taking exercise to understand the coordination of partners' work on gangs and serious youth violence. The findings of this informed the work of the Gangs Task and Finish Working Group, chaired by The Head of Service for RAS, MASH and Atlas. The Working Group has developed a [protocol](#) to address risks associated with youth violence/gangs. It confirms the partnership arrangements and commitment to the weekly tracking of vulnerable adolescents to ensure robust and timely reduction of risk strategies through MEGA Panel.

The role of Gangs SPOC has been created within the Police Safeguarding Hub to bridge the proactive work undertaken by the police and partner agencies. This recently implemented role plays a key part in MEGA meetings.



**BSCB Challenge:** Accurate recording by schools of part day school absence



**Action:** The Independent Chair wrote to all schools reminding them of their duty to record part day absence accurately and conducted a dip sample of schools with reassuring results.

### COUNTY LINES

Through the MEGA panel and the work of police and CSC there is now a better understanding of children within the Borough who may be travelling out of London following the County Lines model. Given the location of Bromley this is most likely to be Kent. Partners need to look at establishing links and information sharing with their equivalents in Kent in order to mitigate this gap. Kent Police and British Transport Police will need to be engaged with on a strategic level as these two agencies are the most likely to encounter Bromley children 'County Lining' in the Kent area. This should be a developmental focus for 2018/2019.

### GANGS

**BSCB Strategic Priority 1:** The Local Safeguarding Context

**Actions 2017-19:** To monitor the ongoing effectiveness and impact of the partnership in responding to Gangs

This year Greenwich University made a successful bid to Health Education England to develop a multi- agency training package for County Lines. Oxleas CAMHS were represented on the Steering Group.



**BSCB Challenge:** Bromley's response to Gang activity and youth violence



**Action:** multi agency Gangs Round Table event took place in November 2017, chaired by the BSCB Independent Chair, to inform development of Gangs Protocol.

### FEMALE GENITAL MUTILATION (FGM) AND HARMFUL PRACTICES

**BSCB Strategic Priority 1:** The Local Safeguarding Context

**Actions 2017-19:** To monitor the ongoing effectiveness and impact of the partnership in responding to FGM.



The Multi Agency FGM Protocol, developed by the BSCB, is well embedded across Bromley and will be reviewed in 2018. This is a joint document with the Bromley Safeguarding Adult Board as it includes referral pathways for children, pregnant women and adult women who are not pregnant. The document was distributed widely and the BSCB requested that managers embed the protocol through training and supervision. The protocol also signposts to the on-line FGM training provided by the Home Office which was endorsed by partners. It is due to be updated in May 2018. Changes will include an important new contact at University College London Hospital

(UCL) Children's FGM Service who conduct medical investigations to confirm FGM as well as management of the physical and psychological implications if FGM is confirmed. It will also include additional information on FGM Risk Information Sharing (RIS) and consent; Health Record of FGM; referral pathway for under 18s which now includes females up to age 25 if Children Looked After, Care Leavers or those with an Education, Health and Care Plan.

It was noted in the QAPM subgroup that Bromley's adult FGM data was not as comprehensive as it could be. The BCCG Safeguarding Children Dataset was reviewed and FGM indicators refined in line with national guidance. At the April 2018 Safeguarding Children Health Forum, NHS Digital who are responsible for the national FGM database attended and gave a presentation and shared Bromley and pan-London data. The FGM Lead at NHSE also attended along with the NHSE Safeguarding and Quality Lead for London. The session was well attended and received. The issue was explored and solutions agreed with local providers. Board member agreement will be sought in 2018 and improved data collection is expected once all the optional data fields are added to the nine mandatory fields in local data collection systems.

The CQC Review of Looked After Children in October 2017 found that Kings College Hospital processes were in place to identify women who have been subject to FGM and there was a pathway for young women under 18. The Oxleas Annual Safeguarding Children Champions Event was held in June 2017 and focussed on support for Women and Girls subject to FGM.

## PREVENTING RADICALISATION

**BSCB Strategic Priority 1:** The Local Safeguarding Context  
**Actions 2017-19:** To monitor the ongoing effectiveness and impact of the partnership in responding to Radicalisation

PREVENT is part of the Government's counter terrorism strategy which is known as CONTEST. PREVENT aims to stop people becoming terrorists or supporting terrorism.





The objectives of the PREVENT strategy are:

- Respond to the ideological challenge of terrorism and the threat we face from those who promote it
- Prevent people from being drawn into terrorism and ensure that they are given appropriate advice and support
- Work with sectors and institutions where there are risks of radicalisation that we need to address.

Bromley has low levels of community tension, however tensions were elevated following specific incidents including gang violence, and after the London Bridge terror attacks. Bromley has relatively low levels of hate crime and no emerging trends have been highlighted.

The Community Safety Team co-ordinates the Prevent Strategy on behalf of LBB. The Chief Executive Corporate Leadership Team acts as the Strategic Prevent Panel and receives an annual update on the authority's response to the duty. The Safer Bromley Partnership oversees the delivery of the outcomes of the Prevent Key Priorities. Prevent is one of the key priorities of the 2016-2020 Safer Bromley Partnership Strategy. Previously, an action plan has outlined the work streams for delivering the borough's statutory response set out in The Counter Terrorism and Security Act 2015. The report presented to the Corporate Leadership Team in February 2018 identified the following priorities for 2018/19:

- Establish and maintain a robust Prevent Case Management board
- Maintain close working with local SO15 officers
- Attend monthly London Prevent Network meeting to keep abreast of regional developments
- Raise awareness of Prevent through the delivery of WRAP
- Contribute to consultation process on the implementation of the Dovetail project, which is looking to place a greater responsibility on local authorities to deal with PCM and CHANNEL referrals.
- Update the Prevent Action Plan to reflect achievable outcomes over the next 12 months
- Ensure Prevent is included in inductions for new Councillors post May elections





Over the past 12 months the Community Safety team has produced a Prevent leaflet which is distributed to officers who attend WRAPs (Workshop to Raise Awareness of Prevent). Several WRAPs have been delivered and were attended by 85 staff from Children’s services and 34 from Education.

In March 2018 the Government released figures relating to “individuals referred to and supported through the Prevent Programme” during the 2016/17 financial year. The largest proportion of the 1,146 individuals discussed at a Channel panel in 2016/17 was from London (254; 22%). More than half of all those referred into the Prevent programme (6,093) were aged 20 or under.

Throughout 2017, the BSCB funded and delivered WRAP ‘Train the Facilitator’ training for schools over ten sessions, in order that it can be cascaded by leads across the school network. There were 85 attendees - mostly school designated safeguarding leads. The Trainer reported that “Overall, the courses were very successful, with all candidates approaching the guidance professionally and showing genuine interest in the content. During the training it was revealed that some of the Bromley schools already have considerable experience in managing incidents in school and their stories helped to illustrate the course theory. As a general comment, most candidates reported a good experience with Prevent professionals in Bromley and most could name the key staff that would be available for advice or guidance.”

This year, Oxleas NHS Foundation Trust has improved its rollout of WRAP training with a compliance rate exceeding 90%. A new national Prevent e-learning course has also been made available to staff.

### LOCAL AUTHORITY DESIGNATED OFFICER (LADO)

In accordance with Working Together to Safeguard Children the London Borough of Bromley like all Local Authorities has a designated officer with overall responsibility for managing and co-ordinating allegations made against staff who work with children. LSCBs have a responsibility for ensuring that the correct procedures are in place for investigating allegations against adults who work with children. This role is undertaken by a Local Authority Designated Officer (LADO). The LADO should be informed of all

allegations and should provide advice and guidance to ensure cases are dealt with and resolved in a timely manner.

There were a total of 223 referrals made to LADO in 2016/17 and a total of 914 in this current year of 2017/18. Of the 914 consultations in this financial year, 160 were referrals which required more than just advice, support or guidance. 44 of those referrals required an Allegations Against Professionals meeting, 107 of those were referred for internal management investigation and risk assessments, 9 required no further action and as at the time of writing, there are 0 awaiting consideration.

The rise in the number of consultations in this financial year is as a result of the LADO now recording not just contacts that lead to referrals but recording all consultations with LADO. As a result of the ongoing awareness raising, quick response and easier access the LADO provides, professionals feel more able to contact the LADO in good time to seek advice, guidance and support before matters escalate. The high number of notifications is often due to organisations seeking clarity as to whether or not the





alleged incident meets the criteria to trigger the managing allegations procedure. Although the LADO continues to have oversight and monitor such cases, agencies are encouraged to undertake internal investigations and feed back to the LADO within recommended timescales. Such cases may sometimes progress to an ASV pending on the outcome.

The following is a breakdown of the 160 referrals:

- 89 allegations of Physical Abuse
- 14 allegations of Sexual Abuse
- 14 of allegations of Neglect
- 22 allegations of inappropriate behaviour
- 21 allegations of emotional abuse

The increase in number of consultations with LADO also reflects the increasing awareness and knowledge of the LADO process within agencies in Bromley. This continues to be aided by the ongoing quarterly LADO lunch time briefing as well as the LADO presentation at the Bromley Multi Agency Partnership event and many more forums. In addition to this, the LADO has organised and held tailored LADO briefing to agencies that presented as needing better awareness. For example, specific presentations have been undertaken for churches and foster carers.

In regards to the overall outcomes of the cases referred, 5 cases were founded, 47 were substantiated, 66 were unsubstantiated, 15 were unfounded, 1 was malicious and at the time of writing, there were 26 ongoing cases. 13 of those cases were referred to DBS referral, 14 were referred to other regulatory bodies such as NCTL and there was 1 conviction (custodial/non-custodial).

It is worth noting that although 47 cases had an outcome of substantiated/founded outcome, the matters alleged which were founded did not necessarily meet the threshold for a DBS referral or professional bodies. In those cases, although what was alleged did occur, discussions between the LADO and relevant organisations and Human Resource professionals assessed that the issues were not significant enough to require the member of staff to be barred from working with children.



The unsubstantiated outcome continues to be the highest outcome in regards to the investigations undertaken. This is usually where there is not enough evidence to substantiate the allegation even when it meets the threshold for a LADO complex Strategy Meeting.

The highest number of referrals continues to come from education where children have the most contact with adults who work with children. There were 77 referrals from Education, 19 from Early Years, 17 from Foster Carers, 12 from Health, 13 from other (SEN transport, theatre groups, sporting and leisure organisations etc.), 8 from Residential units, 2 from Faith groups and 1 from a voluntary sector.

In the previous year, the LADO was concerned about the low number of referrals and contact from health and police. However, this year, the police have made 4 referrals in respect of other professionals and aside from the actual referrals made by health professionals, health colleagues have a much better contact with LADO and keep LADO updated and informed of internal allegations. There is also an increased and timely contact from Social care.



# Learning & Improvement



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**BSCB Strategic Priority 3:** Strong Leadership and Strong Partnership

**Actions 2017-19:** Maintain the BSCB Learning and Improvement Framework; scrutinise and challenge performance; identify, disseminate and embed lessons; engage with children, young people and families and evaluate the impact on outcomes.

**THE CHILD'S VOICE**

The Independent Chair visited Bromley Youth Council in March 2017 to propose a number of joint projects including digital footprint surveys in order to better understand how local children and young people are using technology, particularly social media and any safeguarding risks they are taking. A draft memorandum of understanding was agreed and a new Community Engagement Sub Group was set up with the Bromley Youth Council.

**BSCB Business Plan Principle:** At the core of our safeguarding and child protection work is the commitment to ensuring that children and young people are seen in the context of their lives, heard through professionals taking time to listen and helped by remaining professionally curious. To understand the quality of a child's individual experience in the unique context of their lives in Bromley.



'What Children and Young People are Telling Us' is a standing item at each BSCB Board meeting as a way of partners sharing any insights.

The Digital Footprint Survey was launched for primary and secondary pupils in 2017. The survey aimed to understand the online footprints of Bromley's children and young people and their exposure to potentially harmful content or behaviour. Detailed findings gauging parent/carers' awareness of their children's online behaviour and their ability to activate the correct safety measures were also included. Over 3000 responses were received and a full report with recommendations has been published on the [BSCB website](#) (See section on [Technology and Social Media](#)). In response to the concerns and issues raised, a Safer Schools App will be produced for schools and parents to use.

A survey of Children and Young People (CYP) across Bromley was developed by the Designated Doctor in conjunction with the Communication team at Bromley CCG. 182 CYP completed the online survey and over 100 CYP were engaged face to face. Results highlighted that many CYP are unaware of how to access the health and support services available to them, and less than 1 % of survey respondents had heard about the NHS Go app, a free app for mobile phones/ tablets that provides free confidential health advice and information about local services. CYP completing the survey indicated a strong preference for information about health and support services to be shared with them via their school or educational establishment or via social media. The majority of CYP respondents said that they would seek support from family members when worried about the safety of themselves or others. This highlights the importance of education of the wider community about health and support services available, and about how to respond when a child makes a disclosure of a safeguarding nature. Concerns were also highlighted about lack of exercise, limited fruit and vegetables in the diet, and poor sleep. These issues are known to have an enduring impact on health and development and will need to be addressed in conjunction with Public Health Colleagues. An action plan is currently being drawn up and full survey results will be shared across the multiagency network.

Oxleas NHS Foundation Trust has a number of methods of gathering user feedback and structures that allow them to systematically analyse, report on and respond to this



feedback, often undertaking one-off feedback exercises through online surveys, paper questionnaires and focus groups about services needing improvement. This work is overseen by the Patient Experience Group (PEG), made up of senior staff from across the Trust. All feedback is reported to monthly meetings where they are discussed and action plans are set. Oxleas employs a Young People's Participation Worker who facilitates a range of participation activities in each of its Boroughs. In Bromley the Bursting Stigma Group runs every Wednesday. Feedback gathered through these processes is reported into the Directorate Patient Experience Group where it informs future plans and actions.

Borough Police have engaged with young people in school assemblies and 'Impact' days and support the Bromley Youth Council and the 'Speak Out' challenge.

This year Bromley CCG Communications and Engagement Team have led on engaging children and families in transformation of services programme, such as CAMHs.

Bromley Healthcare has a well-established culture of listening to and valuing the views of children and young people in its care. For example at Hollybank respite home, patient surveys ensure that children are consulted regarding their experience of care. School nurses use "It's All About Me" questionnaire for all vulnerable children and young people they know about. This includes children and young people referred for an initial case conference and vulnerable young people in the Youth Offending Service and Pupil Referral Units. 'Your Choice Your Voice' which has continued to be delivered in schools in 2017/18 discusses CSE and the risks to young people. The Children's Occupational Therapy team have devised a child friendly questionnaire to ask children and young people about their experience of the service and there is a child friendly version of the friends and family test.

### THE COMMUNITY'S VOICE

In March 2017, the Independent Chair attended a Forum of Bromley Parent Voice, an organisation which seeks to improve services for children and young people with additional needs or disabilities and their families by working in partnership with



statutory and voluntary agencies and by contributing towards the development of policies and practices. The Independent Chair values this partnership and will be seeking ways to ensure that Bromley Parent Voice can contribute to the work of the BSCB.

As part of the Independent Chair's reconfiguration of the Board's structure, a new Community Engagement Sub Group was set up in May 2017. The Sub Group provides a platform to listen, learn and reflect on the experiences and feedback from our children and young people, their families and carers. It is responsible for the development and maintenance of the LSCB Communication Strategy, networking and surveying opportunities, reality checking, providing an opportunity to be heard and to challenge, capture impact and cascade strategies. Members will include representations from Bromley Youth Council, Bromley Parent Voice, Bromley Children and Families Voluntary Sector Forum, local businesses, and faith communities.



This year's Annual Conference was entitled 'Educating and Empowering Communities'. Topics included supporting the voluntary sector to make a positive difference, neglect by affluent families, lived experience of neglect and positive outcomes in the care system, listening to young people with complex disabilities, Bromley Youth Council campaigns, local safeguarding context and profiles, Digital Footprint Survey findings and Community Engagement Subgroup intelligence.

## THE VOICE OF THE CHILDREN'S WORKFORCE

### **BSCB Strategic Priority 4: A Healthy Workforce**

**Action 2017-19:** The BSCB sets up a task and finish group to lead on designing and implementing a thorough health check of the organisational arrangements in place to support effective safeguarding practice.

A multi-agency staff survey was circulated widely in January 2018. The purpose was to test that staff are confident in escalating and challenging, to test understanding of the Threshold Document and to ask about work pressure and job satisfaction. All



responses were anonymous but staff were asked to identify the division/area they worked in, how long they had worked in Bromley and whether they were managers. As at February 2018, 1202 people had completed the survey. Results are to be analysed by the BSCB and reported to the Board. Section 11 agency leads will be given anonymised summaries of their own staff data in order to inform the self-assessments for 2018-19.

## REVIEWS OF PRACTICE

Serious Case Reviews are undertaken to learn lessons and improve the way in which local professionals and organisations work together to safeguard and promote the welfare of children. LSCBs must always undertake a Serious Case Review (SCR) when the following criteria are met under Regulation 5 of the 2006 LSCB Regulations.

- (a) Abuse or neglect of a child is known or suspected
- (b) Either (i) the child has died; or (ii) the child has been seriously harmed and there is cause for concern as to the way in which the authority, their Board partners or other relevant persons have worked together to safeguard the child

Where the SCR criteria has not been met, the BSCB can also undertake smaller-scale multi-agency case reviews. Whatever the type of review, the principles are still the same with the aim being to share information, identify good practice and establish the key lessons that will help to improve safeguarding arrangements. During 2017-18, the SCR Sub Group has met on four occasions plus one extra ordinary meeting. Over the year the SCR Sub Group has:

- Worked jointly with Lambeth on an SCR regarding the murder of a five year old boy (learning will be published in 2018/19 annual report)
- Commissioned an SCR regarding the murder of a teenage girl in 2014 which should have been commissioned at the time (see below)
- Commissioned two further SCRs relating to a teenage suicide and a case of child sexual abuse (learning will be published in 2018/19 annual report)
- Commissioned three Learning Reviews on the theme of links to gangs, cross borough working for children with disabilities, and fabricated or induced illness (learning will be published in 2018/19 annual report).



### Serious Case Review Elizabeth

At the time of Elizabeth's death, a Serious Case Review was not considered. When the new Independent Chairman of the BSCB started in his role in 2017, he reviewed the case and commissioned this Serious Case Review to reflect on Elizabeth's journey and to look more closely at the services she received. There has already been some focus on the perpetrator but this has been an opportunity to ensure that Elizabeth's voice is also heard.

Critically, this Serious Case Review's focus on Elizabeth found nothing to indicate that there was a known acute physical risk to her from another person and no alternative responses by any of the agencies with which she, or her family, were involved could have served to predict or prevent her murder.

Despite this there were some aspects of Elizabeth's experiences and the responses to them that indicated a heightened level of vulnerability and the report highlighted that some potential advantage might have been gained from more information exchange and multi-agency communication. As a result, opportunities for improvements in the way services recognise and respond to vulnerability, particularly with regard to record keeping and communication, have been identified and reflected in the recommendations in the report.

### AUDITING

#### Section 11 Audits

Section 11 (s11) of the Children Act 2004 places a statutory duty on key persons and bodies to make arrangements to ensure that in discharging its functions, they have regard to the need to safeguard and promote the welfare of children and that the services they contract out to others are provided having regard to that need. Improving the way key people and bodies safeguard and promote the welfare of children is crucial to improving outcomes for children.

*Working Together to Safeguard Children (2015)* requires Local Safeguarding Children Boards (LSCBs) to monitor the effectiveness of organisations' implementation of their duties under s11 of the Children Act 2004. Schools have a statutory obligation to comply with this, under sections 157 and 175 of the Education Act 2002. In practice, this means that the importance of safeguarding and promoting the welfare of children is clearly visible in the way that a school operates – in governance arrangements; in the way that staff are recruited, trained and supervised; and in the ways that all staff are held accountable.

In previous S11 auditing cycles, the percentage of Bromley schools responding to the audit has been very low. This year, therefore, the BSCB has focussed on working with schools to develop an audit tool which was useful for them. Efforts were made to engage with 78 primary schools, 23 secondary schools and 16 independent schools (including special schools and alternative provision). In total 73 primary school audits, 19 secondary school audits and 16 independent school audits were received. The Harris Academy Foundation did not agree to engage in the audit programme and





minus the Harris Academy Foundation the audit return response was 100%. Harris Academies did provide their own self assessments using their alternative template. The tool has been referenced against Keeping Children Safe in Education and will help schools self-assess how well they are meeting requirements to safeguard children. Recommendations from the audit included:

- Promote schools' use of the [Bromley Thresholds of Need](#) and [BSCB Escalation Policy](#) in local policies and training.
- Promote attendance at [BSCB training](#) as includes local thresholds, context of safeguarding and early intervention.
- Promote reference to the [BSCB Protocols, Guidance and Procedures](#) webpage and app.
- Promote early intervention CAF assessment/tools

- Consideration to be given in relation to refresher CAF training for all schools
- Promote schools attendance at LADO lunch time briefings for all schools
- Education Safeguarding Advisory Committee (ESAC) to consider producing advice and guidance in relation to the minimum requirements for safeguarding training.
- ESAC to consider producing a definition and purpose of supervision for schools.
- ESAC to consider encouraging schools to share information in relation to services and resources.

### BSCB MULTI AGENCY CASE AUDIT – CSE

The multi agency audit in 2017 explored how agencies work together to identify children who are victims of CSE, intervene to reduce risk and monitor effectively the impact of interventions. Sixteen cases which were audited in 2015 were re-audited and five new cases were audited. The report was published on our website and two learning workshops held with multi-agency staff. The presentation from the workshops was shared widely via the BSCB website.

#### Key Findings – Strengths:

- Extensive support including early intervention - school
- Skilled direct work by social workers, school, police
- Robust CSC responses including longer term planning eg CP plan/ LAC
- Effective inter agency working eg CSC, police & school for high risk missing young person
- Effective work between GP and social worker regarding a young person's health concern
- Challenge from police to CSC resulting in an effective outcome around risk management
- CAMHS input around parental capacity, complex mental health and safeguarding.

#### Key Findings – Challenges:

- Limited communication and information sharing between agencies eg case developments
- Assessing parental capacity eg parental influence & affluence /parental resistance and social deprivation
- Diversity – young person with multiple adversities experiencing collective failures





- of process across agencies.
- Application of thresholds
  - Case management and supervision inconsistency around management oversight leading to drift and delay
  - Maximising impact of work on CYP and families through joined up working for non CP/ LAC cases.

In the next year, the BSCB will undertake multi agency audits on Vulnerable Adolescents, Early Years, Safer Recruitment and adult substance misuse referrals where there are safeguarding concerns regarding children.

### SINGLE AGENCY AUDITS

Bromley Borough Police are subject to a continuous rolling audit and dip sampling of all police interactions with children which is undertaken by the Central Improvement Team. Over the past 12 months they have had over twenty dip-samples and reviews of cases. In general performance has seen a marked improvement. Additionally the BOCU Commander has requested a peer audit of the Missing Persons Unit to identify current performance and identify areas for improvement. The information gathering phase of this audit has just been completed.

The Named GP for Safeguarding Children Bromley CCG completed an audit to better understand why GP reports were not always received for case conferences. Twenty Bromley GP Practices were contacted in February 2018 following non receipt of reports for initial case conference between November 2017 and January 2018. Six GP Practices were able to provide information for the audit as not all the information on the child's details was complete. The outcome of the audit found a mixture of reasons for GP Child Protection Case Conference reports not being received into Children's Social Care: out of date information on the correct child's GP which led to some of the reports not being requested from the right Practice or not being received by the Practice; reports being sent correctly but not being included at the conference; reports not being sent by email (a requirement) and some GP Practices needing to improve their office systems for dealing with report requests. Recommendations are being implemented.



Following Oxleas' Safeguarding Children audit, Oxleas has reviewed the process for monitoring the quality of all referrals. This includes ensuring the grounds for concern are clearly expressed and that CSC's receipt and outcome are recorded on RiO. The changes have been incorporated into the Safeguarding Policy and Procedures. In addition, guidance for adult mental health clinicians on how to make a 'good' referral to children's social care was launched this year.

### PERFORMANCE DATA

Further improvements were made to the BSCB Performance Dataset this year and to the way in which the Quality Assurance and Performance Monitoring (QAPM)



subgroup scrutinises and challenges performance across the partnership. A more comprehensive dataset has been established which now includes data on substance misuse and from sexual health clinics which we identified as a gap last year.

Although the performance summary at the front of the performance dataset focusses discussion at the quarterly QAPM subgroup meeting, all members are expected to have read the full dataset and come with challenges where performance is off track and new trends are noted. Each quarterly meeting now includes a challenge session of a particular area so that QAPM sub group members can fully understand the context for the data and can ask questions of the operational managers. This new format has proved successful this year and will be more fully developed for 2018-19. A key focus in 2017-18 was FGM data. Although there have not been any cases of Under 18s with FGM in the borough, there are adult women with FGM whom the QAPM subgroup did not know enough about to inform a profile. As mentioned elsewhere in this report, the issues were worked through with NHS Digital, NHSE London, and local providers and a far more comprehensive local profile will be available in 2018-19.

In the last Annual Report, we stated that a key focus in 2016-17 was improving the data for CSE/Missing. This has been achieved in 2017-18 and the priority is now to establish a gangs dataset. A multi-agency Task and Finish Group will update the Bromley Gangs Profile as part of their work in 2018.

This was the second full year of collating the new BCCG Safeguarding Children and Children Looked-after Health Economy Dataset with amendments made during 2017-18 to focus on key areas. This is 'shining a light' on services or areas of care which require more focused challenge and support from BCCG and directly improving the safeguarding arrangements and thus outcomes for vulnerable children and young people. 'Deep dives' into areas identified by the data are requested when we need further assurance on e.g. late bookers to antenatal services.

The Metropolitan Police's new 'safeguarding dashboard' became partly available to LSCBs part-way through this year. There have been teething problems and all 32 London LSCBs still require additional information and this is being pursued at a

London level. Borough level data now available to us includes the number of: U18 victims of crime, U18 victims of domestic abuse, victims of child abuse, indecent images, victims of CSE and Missing Children. This is all useful information and is used alongside other agencies' information to triangulate a view on local issues.





# The Child Death Overview Panel



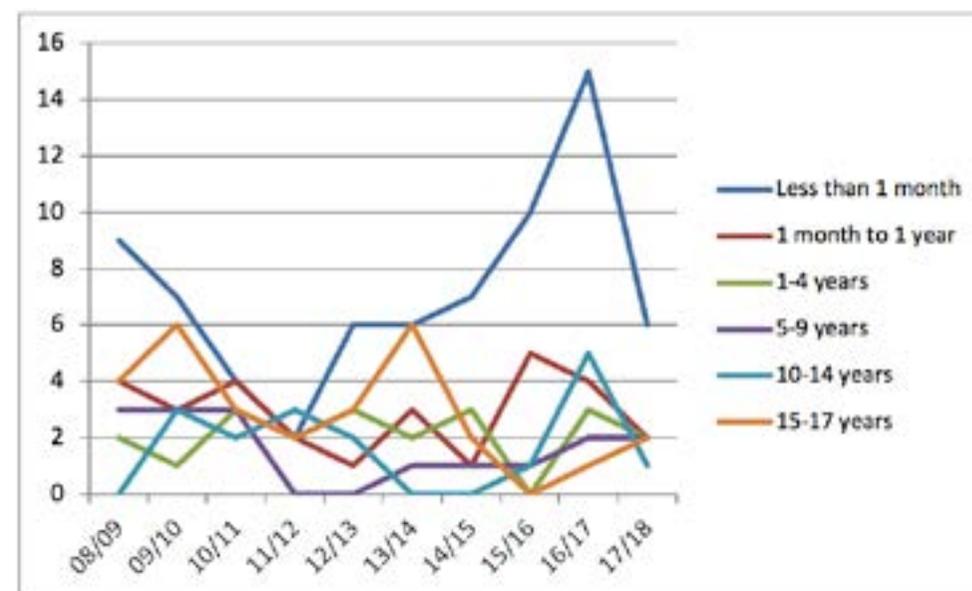


The Child Death Overview Panel (CDOP) is chaired by a Consultant in Public Health and enables the BSCB to carry out its statutory functions relating to child deaths. The CDOP Panel reports to the BSCB's SCR Sub Group.

### CDOP FACTS AND FIGURES

- A total of 184 deaths of children and young people have been reviewed since April 2008
- In 2017/18 there were 15 deaths of children and young people who lived in Bromley (a decrease from 30 deaths in 2016/17). The number of child deaths in Bromley had increased significantly last year but is now similar to previous years. This change was mostly due to the effect of categorising even very premature babies who show signs of life as neonatal deaths rather than stillbirths, although with such small numbers variation is to be expected.
- Death rates around the time of birth are lower than national rates in Bromley. This difference may reduce in future as the local neonatal services have reviewed their practices around defining child death and referral to the CDOP.
- In 17/18 there were 3 CDOP meetings. 10 cases from 2016/17 were discussed and signed off. 9 cases from 2017/18 have been signed off and these cases are included in the analysis of 2017/18 child deaths.
- The number of deaths in the first month of life (neonatal) was 6 in 2017/18. This is a decrease from 15 deaths in the first month in the previous year.
- The vast majority of those deaths were due to prematurity. Although a gestation of less than 24 weeks may be labelled "pre-viable", a tiny percentage of babies born at 23 weeks gestation do now survive. Babies born 24-28 weeks gestation also have a very high mortality rate due to prematurity. This mortality rate falls rapidly for gestations after 28 weeks, and by 37 weeks gestation mortality rate is the same as "term" babies (40 weeks).
- There are currently no deaths categorised as SUDI (Sudden Unexpected Death in Infancy) in 2017/18 although not all cases have been completed in CDOP.
- There were 8 unexpected deaths in 2017/18 and 8 Rapid Responses.
- There were 7 expected deaths in 2017/18.

### AGE AT DEATH OF BROMLEY CHILDREN, 2008-2018



The infant mortality rate, although still well below national levels at 2.7 per 1000 live births, has risen from 1.6 in 2012-14 and 2.3 in 2013-15. The trend in deaths of older children has been downward, although the changes are less marked and the rates are closer to those in London and England.

### CDOP Recommendations 2017/18

1. Urgent dissemination of advice regarding implementing of the NICE Quality Standard [QS62] for Constipation in children and young people, published in May 2014
2. Ensure Merlin reports for domestic abuse against pregnant women are routinely shared
3. Explore role of tertiary hospital prescribing governance and discharge management when discharging children with complex conditions to the community.



# Training & Development



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## CLASSROOM BASED FACE TO FACE COURSES

The training provision for 2017-18 was the final year of a three year commissioned programme. This year, the face to face classroom based programme consisted of 26 different courses run in 63 sessions, attended by a total of 714 people across the different agencies. This was an increase of 51 people compared to last year.

There were 760 bookings made for our bookable training courses in 2017-18. 89% of people who booked on a classroom based course actually attended. This maintains the excellent rate from last year. This high proportion is attributed to the 'no show/late cancellation' charge implemented by the BSCB Training Sub Group in 2015.

The new programme of Domestic Violence and Abuse courses with foundation, intermediate and advanced levels ran in 2017-18 which were commissioned by the Bromley Safeguarding Adults Board (BSAB) this year on behalf of BSAB and BSCB. This will be increased in 2018-19.

Five training sessions on 'Prevent: WRAP' ran in 2017-18 reaching 81 people from the children's workforce in Bromley. This is one additional session compared to last year. In addition to the WRAP training, BSCB commissioned ten bespoke 'train the trainer' sessions for 'Prevent' in 2017-18 in order to reach all school staff working in the borough. This was a one off offer for schools and paid for by the Public Protection department of the Local Authority. Take-up was excellent and schools evaluated the course well. This more intensive full day's training will enable those staff who attended to train all their school staff in the Prevent WRAP awareness materials. Since these 100 places were for schools only and not paid for from BSCB funds, these 100 attendees are not counted in the BSCB training figures in this report.

## Seminars, briefings, MAPEs and other multi-agency learning events

In addition to the half day and full day classroom based courses, the BSCB also ran six shorter briefing/seminar sessions in 2017-18. The topics covered included Child Sexual Exploitation (CSE) and online safety, managing allegations against professionals and learning from multi-agency audits. We do not require staff to book

for these events as they are less formal than training courses. Typically they are one or two hours. 218 people attended this year.

The Multi Agency Partnership Events (MAPE) commissioned by London Borough Bromley in partnership with key partners ran until December 2017. Rather than duplicate, the BSCB worked with the organisers of MAPE to ensure priority areas were covered. The BSCB Team presented at each MAPE and recorded a video briefing for participants to use in their team meetings after the event to expand the training opportunity. Twelve half-day sessions took place in 2017 (covering three different themes) with 383 attendees from a wide range of agencies (some of the participants attended more than one MAPE session so are double counted in the 383 figure). The MAPEs were highly evaluated and were a welcome contribution to the multi-agency training this year. Nine months of MAPEs (1st April to 31st December 2017) are shown in the table below.

The Atlas Team ran workshops to increase awareness of CSE, Missing, Trafficked children and Gangs/Serious youth Violence locally. These sessions were for Children's Social Care staff initially but were expanded so multi-agency partners could attend in 2018. These attendees are not counted in the figures in this report. BSCB has requested that these sessions remain multi-agency and continue regularly throughout 2018-19. This has been agreed and promotional materials have been circulated.





**BSCB TRAINING - UPTAKE, NUMBER OF COURSES, NUMBER OF ATTENDEES AND EVALUATIONS 2017-18**

<b>Course Title</b>	<b>No. of sessions run over the year</b>	<b>Total no. of attendees</b>
<b>Face to face classroom learning</b>		
Group 3	5	79
Group 4/5	3	32
Group 4/5 Refresher	1	13
Introduction to Safeguarding Children	3	59
Early Help: Understanding & Using Common Assessment Framework (CAF)	3	28
CAF: developing confidence chairing TAC	3	26
*What Is Sexual Violence?	2	19
CSE and Online Safety Multiagency training	1	35
*FGM	1	1
*Honour Based Violence	2	2
*Forced Marriage	2	2
*Modern Day Slavery	2	0
*Domestic Abuse Foundation	6	36
*Domestic Abuse Intermediate	3	20
*Domestic Violence Advanced	1	4
Effective Supervision - Successfully Safeguarding Children & YP	1	13
Working with complexity and risk (Engaging Hard to Reach Families)	1	19
Safeguarding Children for Designated Teachers	3	44

Safeguarding Children for Designated Teachers – refresher	3	42
Safeguarding Disabled Children	1	13
Introduction to Safeguarding Neglected Children	2	21
The Challenge of Safeguarding Neglected Children in Families with Complex Needs	3	57
Teenagers who self-harm	1	21
Parental Mental Ill Health - Working Better Together to SG the Child & Adult	2	20
Parental Substance Misuse	2	27
Prevent	5	81
<b>SUB TOTAL for face to face classroom courses</b>	<b>63</b>	<b>714</b>

**\*shared courses with Adults Safeguarding Board, commissioned by BSAB**

**Seminars, briefings, MAPEs and other multi-agency learning events**

SEMINARS: Allegations Against Professionals	3	107
BRIEFING: learning from BSCB neglect audit	2	64
WORKSHOP: Learning from BSCB Learning Review 1	1	12
MAPE 1,2 and 3 (half day each), delivered between 1/4/2017 and 31/12/2017	9	280
<b>SUB-TOTAL for lunchtime briefing/MAPEs/workshop events</b>	<b>15</b>	<b>463</b>

**TOTALS (classroom-based courses and lunchtime briefings/seminars/MAPE) 2017-18**

Capacity for each classroom based course is usually 16 people due to the size of the rooms available. Capacity for the briefings and seminars is significantly more.

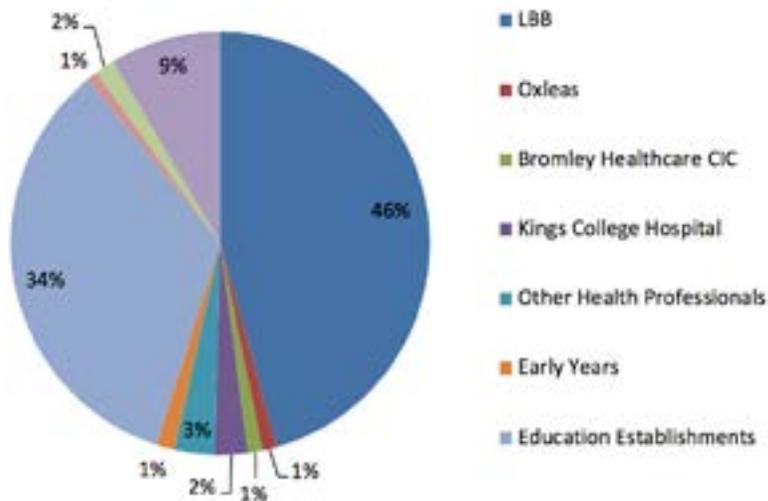
Ten days of very poor weather and heavy snow adversely affected attendance at the four new half day Violence Against Women and Girls modules in late February/



early March 2018. These were the FGM, Forced Marriage, Honour Based Violence and Modern Slavery. The BSCB actively promotes online training for these harmful cultural practices but agreed to some face to face, more advanced training towards the end of the year following demand identified in one key agency. These modules will be commissioned to run again in 2018-19 and both BSCB and BSAB will contribute financially.

BSCB aims to have a multi-agency mix of professionals at every training course as we believe this is key to fostering trust and confidence among the children’s workforce in Bromley. It is a challenge for some agencies to send their staff to our multi-agency training as their training budgets have reduced dramatically in the last two years resulting in some difficult decisions about where to prioritise their staff development. Health agencies and police have struggled with this the most as their organisations have introduced more mandatory online learning modules for children’s safeguarding. The BSCB has continued to challenge those agencies whose staff are not attending sufficient multi-agency training.

A breakdown of agencies attending our classroom based, face to face BSCB training for the year 2016-17 is below:



The BSCB consistently provides training of a high standard, with course participants agreeing that courses are useful and relevant to their needs. Each course is subject to user evaluation. Overall feedback across all courses showed that 85% of the attendees judged the courses to be Excellent. Evaluation scores have improved every year for the past four years.

	Excellent	Good	Satisfactory	Poor
<b>2014-15</b>	68%	30%		
<b>2015-16</b>	73%	25%	2%	
<b>2016-17</b>	78%	21%	1.4%	0%
<b>2017-18</b>	85%	14%	1.6%	0%

Since 2014, the BSCB has had a comprehensive evaluation process which includes pre and post training evaluation, as well as a two month follow up evaluation to identify the impact the training has had on their work and how the training has been applied. Chasing up these post-course evaluations takes a considerable amount of time and effort by the LBB Workforce Development Team on BSCB’s behalf. In 2017-18 it was agreed that one session from each course would be selected for the 8 week follow up rather than asking every participant on every course.



In 2017-18, 229 participants were invited to complete an 8 week follow up evaluation of impact and 126 completed them. They were asked to state whether they had had time to reflect on the training with colleagues and in supervision, how they'd applied the training to their work and to give examples of any impact. Evaluations were received from a wide range of agencies including educational establishments, social care, health, police, third sector, foster carers and housing. 109 of the 126 scored that there had been a significant improvement in their practice, 15 scored there was some improvement and for 2 there was no particular improvement.

Feedback was about increased confidence, assertiveness and feeling empowered to challenge, increased awareness about local and national resources available and about new types of risk. Participants had shared and cascaded learning with others, updated policies, made practical changes back in the workplace, challenged parents, better supported young people, made referrals and improved their chairing of team around the child meetings.

Each BSCB training course is allocated to a member of the Training sub group to monitor, dependent on their specialist area. Where a course consistently has a low score, indicating low impact, attendees are contacted to obtain more specific details, which is then fed back to the trainer to amend content or delivery. Poor evaluations can lead to unsatisfactory trainers being replaced or courses decommissioned. Furthermore, certificates can be withheld if individuals do not apply the training and the BSCB also expects that this is followed up by supervisors and line managers during supervision.

All trainers are required to submit an evaluation form to evaluate how well the course went. Questions include how relevant the course was to the experience of the delegates and whether any organisational issues emerged during the training. Forms are submitted to and followed up by the Chair of the Training Sub group. The Training Sub group routinely analyses evaluation data and also carries out 'mystery shopping' of courses to ensure quality and impact.

Courses were amended during the year by trainers in agreement with BSCB to reflect learning from evaluations, new developments (for instance the introduction of a new

policy or guidance) and learning from new reviews. Our trainers were accommodating and receptive to these amendments.

## E-LEARNING COURSES

The BSCB's free e-learning courses for Group 1 and 2 training which was introduced in 2012 continues to be good value for money. The BSCB and BSAB commission a provider together with neighbouring boroughs to achieve economy of scale. This year Bromley's e-learning package consisted of 15 courses suitable for the children's workforce. These courses make up the majority of the BSCB Group 1 and 2 training offer. The advantage of online training is that delegates can learn at a time and pace that suits them. A breakdown of the number of people taking each BSCB e-learning courses for 2017-18 follows.

1864 people completed online learning modules for 'children's safeguarding' this year, which is an increase from 1489 last year.

964 people completed the Level 1 Safeguarding Children module this year compared to 279 two years ago. This is a significant improvement and ensures the 'safeguarding is everybody's business' is reaching a much broader audience. Participants included pharmacists, childcare staff, housing, adult services staff, healthcare assistants and those working as volunteers.

The use of E-learning is particularly important for those in the children's workforce who struggle to attend daytime learning sessions. 339 Early Years staff completed e-learning this year, as did 28 foster carers, 225 Bromley Healthcare staff and 450 voluntary/ charity/private agency staff.



**Online learning course (called ‘ME Learning’) April 2017 March 2018**

<b>COURSE TITLE</b>	<b>Number Completed</b>
Autism Awareness	106
Data Protection Act	136
Domestic Abuse	50
Female Genital Mutilation	57
Gangs & Youth Violence	35
Hate Crime	23
Human Trafficking and Modern Day Slavery	28
Information Sharing and Consent for people working with Children	33
Managing Conflict – Children’s Workforce	18
Online Safety - Risks to children	86
Safeguarding Awareness	37
Safeguarding Against Radicalisation - The Prevent Duty	58
Safeguarding Children - Level 1	964
Safeguarding Children - Level 2	211
Safeguarding Children with Disabilities	54
<b>TOTAL</b>	<b>1896</b>



**BSCB Challenge:** Low numbers of police attending multi agency training



**Action:** The Independent Chair wrote to the Deputy Borough Commander and discussed at Board meetings regarding raising awareness of the benefits of multi agency training. Police attendance at BSCB classroom based full day courses has increased from 0 last year to 11 this year, with many more officers attending the MAPE sessions.

**ANNUAL CONFERENCE 2017**

This year’s BSCB annual conference was entitled ‘Educating and Empowering Communities’ and was held on 15th November 2017. It was attended by 131 multi-agency attendees. There was a variety of speakers including a Care Leaver’s Perspective, Understanding Neglect in the Context of Affluence, the Children and Families Voluntary Sector Forum, Bromley Parent Voice, Bromley Youth Council and feedback from the BSCB’s Bromley Digital Footprint Survey. Feedback from the day included:

*“Speakers knew what they were talking about by backing it up with personal experiences, notable studies and statistics.”*

*“J’s speech was very heartfelt and powerful.”*

*“Thanks for a great and inspiring day.”*

*“Some good ideas given regarding internet safety. Things that can be added to our school e-safety policy and parents workshop.”*

Of the 96 attendees who filled in an evaluation form, 70% stated this year’s conference was very or extremely helpful/relevant to their job and a further 25% said it was quite useful. On the whole, attendees felt the speakers were very/extremely knowledgeable (96%).



# Priorities for next year & beyond





BSCB Vision: “Children and young people in Bromley are seen, heard and helped; they are effectively safeguarded, properly supported and their lives improved by everyone working together.”

This Business Plan for 2017-19 replaces the Business Plan 2015-18 as part of the review and reconfiguration of the BSCB following the Ofsted inspection of 2016 which graded the BSCB as ‘requires improvement’. It acknowledges the inadequacy of previous approaches which lacked strategic oversight. The BSCB is moving away from monitoring the functions of the board and will now shift our focus more firmly on the context of the lives of our children in Bromley and demonstrate a commitment to grip, pace and impact.

In the context of impending change, the structure of this Business Plan will allow us flex to meet the challenges and embrace the opportunities of the Children and Social Work Bill.

### PRIORITY 1: THE LOCAL SAFEGUARDING CONTEXT

**Outcome:** Children and young people at risk of specific vulnerabilities in Bromley are seen, heard and helped. They are effectively protected from harm by robust and coordinated multi-agency intervention and support. The BSCB and partner agencies focus on how to safeguard children and young people in the context of their lives at home, in friendship circles, health, education and public spaces including social media – context is key.

**Actions:** To monitor the ongoing effectiveness and impact of the partnership in responding to previous Business Plan priorities of CSE, Missing, Gangs, Domestic Violence, Neglect, Radicalisation and FGM. To work with partners to deliver comprehensive, multi-agency arrangements that tackle the identified safeguarding priorities set out below; and to evaluate their impact on children and young people:

- Domestic Violence (abusive relationships linked to CSE and Gangs)
- Mental Health
- Authentic voice of Children with special and educational needs
- Authentic voice of Children Looked After



### PRIORITY 2: EARLY HELP & EARLY INTERVENTION

**Outcome:** Children and young people receive effective early help and appropriate interventions when needs are identified and/or problems arise.

**Actions:** To evaluate the effectiveness of early help arrangements Bromley.

### PRIORITY 3: STRONG LEADERSHIP AND STRONG PARTNERSHIP

**Outcome:** The BSCB leads the safeguarding agenda, is professionally curious and



challenges the work of partner organisations, and commits to an approach that learns lessons, embeds good practice and is continually influenced by children, young people and their families. A key focus within Priority 3 is how the BSCB and partner agencies commit to Making the Invisible Visible. This reflects the importance that the BSCB and partner agencies apply to ALL children and young people living in Bromley being seen, heard and helped.

#### Actions:

- In the context of the Children and Social Work Bill and the proposed abolition of LSCBs, partner agencies will continue to commit to engaging in robust arrangements that coordinate and ensure the effectiveness of how children and young people are safeguarded
- The BSCB and partners successfully deliver against the Business Plan and associated work plans set for the BSCB and its sub groups / working groups
- Continue to strengthen the governance interface between the BSCB and other key strategic forums and Chairs
- Maintain the BSCB Learning & Improvement Framework; scrutinise & challenge performance; identify, disseminate and embed lessons; engage with children, young people and families and evaluate the impact on outcomes
- To communicate and raise awareness about safeguarding to individuals, organisations and communities
- To consistently promote the importance of effective and swift information sharing, promoting a culture that puts the protection of children before the protection of information

#### PRIORITY 4: A HEALTHY WORKFORCE

**Outcome:** In the context of reducing public sector funding, the BSCB listens to partners and seeks reassurance that agencies have in place effective arrangements to support their staff deliver high quality safeguarding practice.

**Actions:** The BSCB sets up a task and finish group to lead on designing and implementing a thorough health check of the organisational arrangements in place to support effective safeguarding practice.





# Technology & Social Media



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The BSCB business plan aims to develop and deliver services that meet the needs of the children they seek to safeguard. This in the context of children's lives; at home, in care, in education and health, with family and friends and in all the offline and online spaces they frequent. The BSCB recognises that children's access to technology and use of social media is not novel and distinct; rather it is fundamentally integrated in the lives of young people. We further recognise that the context within a child's offline life; neglect, emotional or physical abuse or living in the shadow of abusive relationships is often reflected in the online 'digital footprint' children, young people and many adults now create.

We have therefore discarded the development of an e-safety strategy on the basis of its singular focus on technology and have instead, developed a strategy and suite of supporting documents focused on safeguarding children and young people within the context of their real lives and their access and use of technology. In the toolkit supporting this strategy, professionals are provided with policy, guidance and checklists that will assist safeguarding professionals identify and support children and young people in need of help and protection. This is available on the [BSCB website](#).

### BSCB SAFEGUARDING APP

#### **BSCB Strategic Priority 3:** Strong Leadership and Strong Partnership

**Action 2017-19:** To communicate and raise awareness about safeguarding to individuals, organisations and communities

In addition the BSCB has developed Apps to support professionals so that they have immediate access to the guidance they need. The BSCB App includes information on subjects such as thresholds of needs, escalation, what to do if you are concerned about a professional and how to get help if you are concerned about a child. The BSCB Private Fostering App has been downloaded around 5000 times and the BSCB Safeguarding App has been downloaded around 1500 times. Short videos on CSE are also available for professionals on the [BSCB website](#).

The BSCB's annual conference in November 2017 was attended by 138 multi agency



attendees and included an overview of the findings of the BSCB Digital Footprint survey. The Digital Footprint Survey was launched for primary and secondary pupils in 2017. The survey aimed to understand the online footprints of Bromley's children and young people and their exposure to potentially harmful content or behaviour. Detailed findings gauging parent/carers' awareness of their children's online behaviour and their ability to activate the correct safety measures were also included. Over 3000 responses were received and a full report with recommendations has been published on the [BSCB website](#). Key findings were:

- Children access the internet and social media from multiple devices.
- 44.1% of parents and carers surveyed did not know how to set the parental controls for the devices their children used.



- 29% of 7-11 year olds own a mobile phone. 93.3% of 11-18 year olds own a smart phone.
- Children as young as 4-5 years are beginning to own smart phones.
- On average, 50% of children have access to additional devices owned by family.
- 74% of 7-11 year olds are accessing the internet and social media via the privacy of their bedrooms.
- Parents and carers are not fully aware of their children's membership of social media sites.
- Children as young as 4-5 years have been granted parental consent to use social media (1.7%).
- Facebook (30.8%), Snapchat (18%) and Instagram (13.4%) are the sites parents and carers are most concerned about their children using.
- 24% of 17-18 year olds admitted that their parent/carers were unaware that they had joined social media sites.
- Children's awareness of online safety needs raised. 61% of 7 year olds share their

- passwords with close friends. 3% of 7 year olds share passwords with everyone.
- 44.6% of parents and carers surveyed allow their children to access digital media prior to completion of homework.
- Parents and carers are confident (85%) in discussing online security measures and how to implement them with their children.
- Majority of parents and carers say they are aware of how to set privacy controls. 69% of parents/carers have social media privacy settings activated. However, their privacy settings differ per account.
- Parent/carers awareness of negative implications of internet and social media usage by their children is surprisingly low.
- Potential negative effects of using social media include - children's difficulty stopping games and acceptance of losing games, viewing inappropriate content/games, grooming, bullying, low self-esteem and behavioural issues, including anger and use of swear words





# What you need to know



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## THE BSCB WEBSITE

[www.bromleysafeguarding.org](http://www.bromleysafeguarding.org)

[www.twitter.com/bromleyscb](https://www.twitter.com/bromleyscb)

## CHILDREN AND YOUNG PEOPLE

- Nothing is more important than making sure you are safe and well cared for
- As adults, sometimes we think we always know best...we don't..... and that's why your voice is so important
- This is about you and we want to know more about how you think children and young people can be better protected
- We want to talk to you more often and we want to know the best way to do this..... please help
- If you are worried about your own safety or that of a friend, speak to a professional you trust or speak to ChildLine on **0800 1111**

## PARENTS AND CARERS

- Public agencies are there to support you and prevent any problems you are having getting worse...Don't be afraid to ask for help
- Tell us what works and what doesn't when professionals are trying to help you and your children
- Make sure you know about the best way to protect your child and take time to understand some of the risks they can face
- You'll never get ahead of your child when it comes to understanding social media and IT – but make yourself aware of the risks that children and young people can face

## THE COMMUNITY

- You are in the best place to look out for children and young people and to raise

the alarm if something is going wrong for them.

- We all share responsibility for protecting children. Don't turn a blind eye. **If you see something, say something.**
- If the child lives in Bromley, call the Multi Agency Safeguarding Hub (MASH) on **0208 461 7373/7379 7026** during working hours
- If you need to speak to someone out of office hours contact the Out of Hours Duty Service on **030 0303 8671**
- You can also call the NSPCC Child Protection helpline on **0808 800 5000**

## FRONT-LINE STAFF AND VOLUNTEERS WORKING WITH CHILDREN OR ADULTS

- Make sure children and young people are seen, heard and helped... whatever your role
- Your professional judgement is what ultimately makes a difference and you must invest in developing the knowledge, skills and experiences needed to effectively safeguard children and young people. Attend all training required for your role
- Understand the importance of talking with colleagues and don't be afraid to share information. If in doubt, speak to your manager
- Escalate your concerns if you do not believe a child or young person is being safeguarded
- Use your representative on the BSCB to make sure that your voice and that of the children and young people you work with are heard
- If your work is mainly with adults, make sure you consider the needs of any children if those adults are parents

## LOCAL POLITICIANS

- You are leaders in your local area. Do not underestimate the importance of your role in advocating for the most vulnerable children and making sure everyone takes their safeguarding responsibilities seriously
- Councillor Peter Fortune is the Portfolio Holder for Education and Children and Families and has a key role in children's safeguarding - so does every other councillor
- You can be the eyes and ears of vulnerable children and families... Keep the protection of children at the front of your mind





## CHIEF EXECUTIVES AND DIRECTORS

- You set the tone for the culture of your organisation. When you talk, people listen - talk about children and young people
- Your leadership is vital if children and young people are to be safeguarded
- Understand the capability and capacity of your front-line services to protect children and young people - make sure both are robust
- Ensure your workforce attend relevant BSCB training courses and learning events
- Ensure your agency contributes to the work of BSCB and give this the highest priority. Be Section 11 compliant
- Advise the BSCB of any organisational restructures and how these might affect your capacity to safeguard children and young people
- Keep engaged with the safeguarding process and continue to identify children who need early help and protection

## THE POLICE

- Robustly pursue offenders and disrupt their attempts to abuse children
- Ensure officers and police staff have the opportunity to train with their colleagues in partner agencies
- Ensure that the voices of all child victims are heard, particularly in relation to listening to evidence where children disclose abuse
- Ensure a strong focus on MAPPA and MARAC arrangements

## HEAD TEACHERS AND GOVERNORS OF SCHOOLS

- Ensure that your school / academy/ educational establishment is compliant with 'Keeping Children Safe in Education' (DfE, 2018)
- You see children more than any other profession and develop some of the most meaningful relationships with them

## CLINICAL COMMISSIONING GROUPS

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

## THE LOCAL MEDIA

- Safeguarding children and young people is a tough job
- Communicating the message that safeguarding is everyone's responsibility is crucial - you can help do this positively.
- Hundreds of children and young people are effectively safeguarded every year across the borough of Bromley





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(AS AT MAY 2018)



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### Independent Chair

Jim Gamble QPM

### Independent Chair

Kerry Davies Board Business Manager (Job Share)  
Joanna Gambhir Board Business Manager (Job Share)  
Hazel Blackman Business Support Officer

Jenny Selway	Consultant Public Health Medicine (Chair of CDOP)
Lucien Spencer	Area Manager, London CRC
Antoinette Thorne	Learning and Development Manager, LBB
Paul Warnett	Detective Superintendent, Borough Police
Jane Wells	Director of Nursing and Safeguarding, Oxleas NHS Trust
Jonathan Williams	Manager, Change, Grow, Live

### Board Members

Ade Adetosoye	Deputy Chief Executive and Executive Director Education, Care and Health Services (statutory DCS), LBB
Janet Bailey	Interim Director Children's Social Care, LBB
Valerie Burton	Lay Member
Khalil Campbell	Senior Service Manager CAF/CASS
Deborah Carter	Deputy Head Teacher, Bullers Wood School
Jane Clegg	Director of Nursing, NHS England
Sonia Colwill	Director of Quality Governance and Patient Safety, CCG
Penny Davies	Interim Head of Service Quality Assurance, LBB
Helen Dyer	Bromley CFV/SF Chair (third sector)
Janet Ettridge	Director of Operations, Bromley Healthcare
Jenny Flavill	Designated Dr, Consultant Community Paediatrician, Bromley Clinical Commissioning Group
Peter Fortune	Portfolio Holder, Education, Children and Families Services
Debbie Hutchinson	Deputy Director Nursing, Kings College Hospital
Marina Laurie	Lay Member
Fiona Martin	DCI Child Abuse Investigation Team (CAIT)
Sadie McClue	Head of Safeguarding (Designated Nurse), Bromley Clinical Commissioning Group
Betty McDonald	Head of Youth Offending Service, LBB
Katie Nash	Head of Service, National Probation Service
Gillian Palmer	Interim Director of Education, LBB



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