



Dudley Safeguarding Children's Board

Annual Report

2014-2015



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This report has been prepared by the Independent Chair in conjunction with the Business Manager, and was approved by the Dudley Safeguarding Children Board (DSCB) in November 2015. Sources include annual reports, performance data, information presented to the Board throughout the year, and feedback from Sub-Groups and other sources relevant to the Board's business. The report will be formally sent to the Chief Executive and Leader of the County Council, Chair of the Health and Wellbeing Board, and Police and Crime Commissioner as statutorily required, in addition to partner agencies and key stakeholders. It will be placed on the Board's website so it is accessible to all <http://safeguarding.dudley.gov.uk/child/>. For any further information please contact Martine McFadden Business Manager & Communications on 01384 814996

1. Independent Chair's Foreword

Welcome to the Dudley Safeguarding Children Board Annual Report for 2014/15.

There are three words that encapsulate the work of the board over the last 12 months – CHALLENGE, CHANGE and CONTRIBUTION.

The challenges faced by professionals in their efforts to safeguard children grow ever more complex and voluminous. This can be illustrated by the seemingly ever growing threat of child sexual exploitation. Media reports of the abuse of children and young people by both organised groups of men and individuals holding power or celebrity status have demanded a swift response at national, regional and local level. Here in Dudley, much has been done to raise awareness of such exploitative and harmful practice. We have worked with our colleagues across the region and positive developments include a greater understanding of the risk and a clearer and more comprehensive strategy and operational plan to respond.

Particularly worthy of note is the production of a film called Anybody's Child which helps children to recognise the signs of sexual exploitation and therefore stay safe. The film was made by Chatback, a group of young people in foster care in Dudley and I recommend it to you. Another positive development is the creation of a dedicated CSE team which will go live in the coming months and will spearhead our efforts to both support victims and bring perpetrators to justice.

Despite the critical importance of addressing CSE, it must be recognised that it is not the only challenge we face and our response to other forms of abuse and neglect must not and will not be diluted as a consequence. In another sense of the word, challenge means to hold to account, to seek evidence that agencies are delivering effective safeguarding services. This process is a fundamental duty of a safeguarding board and one which the Dudley Safeguarding Board is increasingly successful at undertaking. One example was the report into allegations of unlawful restraint at Russell's Hall Hospital which was published in September 2014. Although the allegations were ultimately proved to be unfounded, the robust nature of the investigation, the transparent response of the Hospital Trust and the learning uncovered more than vindicated the measures taken.

There has been considerable change throughout the year both in respect of the board and its constituent agencies. Most of the partners have undergone radical restructure as they seek to improve effectiveness in order to meet increased demand with reduced resources consequent to economic austerity. Police and Probation services underwent major change throughout the year and the restructure of Children's Services along with other areas of the Local Authority continues. Such change will always carry a risk and must be monitored and confronted if necessary. Dudley Safeguarding Children Board has also undergone significant change. A root and branch review has rationalised our membership, reshaped our structure and shared

responsibility more equitably amongst the stakeholders. This in turn has resulted in greater ownership and contribution by all. Effective contribution is a key element of a successful partnership. Properly coordinated it will result in both increased trust and improved outcomes. The participation of children and young people must be considered as the most important contribution of all and the community and voluntary sector are now charged with ensuring that the board hears and responds to the voice of those people we seek to keep safe.

The coming 12 months will again be demanding. We need to continue to support front line safeguarding practice but also improve the way we assure ourselves that service delivery is meeting required standards and to demand improvement if necessary. Our audit regime will be key to meeting this responsibility. Another way to improve multi agency working will be the development of a Multi-Agency Safeguarding Hub or MASH. This will allow for earlier identification of harm, greater information sharing opportunities and a more cohesive and informed response.

We have many aspirations for the year ahead. The simple fact of the matter however is that they will only be achieved if the board is effectively resourced both in terms of individual effort and financial funding. I call on all agencies to consider this as a priority in order to keep the children of Dudley as safe as we possibly can



Roger Clayton

Independent Chair

Dudley Safeguarding Children Board

April 2015



2. Executive Summary

The overall assessment of this report is that DSCB complied with its statutory and legal requirements throughout the year, and continued to implement changes arising from Working Together to Safeguard Children 2013. Partners have continued to work together to improve its ability to assess the effectiveness of safeguarding arrangements.

The strategic priorities set for 2013 to 2015 have been actioned and much of what the Board said it would do has been achieved. Where it was not, this was mainly because work was still in progress; outcomes were not evident from work undertaken or awareness still needed to be raised about new procedures. There continues to be multi-agency areas for improvement around consistent practice, thresholds, information sharing and communications

The Board assesses that full accounts of relevant partners' plans and strategies for keeping children safe are monitored so that planning processes and stronger links are being developed. There have been demonstrable achievements over the past year.

The new structure of the Board has yielded a more integrated approach to the Board's business and opportunities have been provided for Board development. Progress has been made on clarifying partners' roles and responsibilities and contribution to Board business, however there is still work to be done.

Good practice is evident, but this still remains inconsistent. Local data shows that the introduction of Early Help is starting to make a difference but the number of looked after children remains high. Signs of safety approach which was introduced in 2013 through DSCB has been implemented into children's centres across the Borough. This approach has made a difference in the lives of families through early intervention and the use of language which clearly defines what strengths they have, what are the areas of change required and who will support them to achieve this.

2014/15 was marked by change and challenge; however the Board worked well to fulfil its responsibilities, to challenge when and where required and to collectively work towards being able to demonstrate the effectiveness of safeguarding arrangements. The Board recognised that it could not adequately evidence a clear and shared view about the vulnerable children and young people population and measuring the impact of its actions these improvements will be taken forward into 2015/16.

This report is divided into 13 Chapters which describes the business of the DSCB, its challenges and achievements for 2014/15. The first four chapters of the report describe the context for the DSCB. The Chairs forward explains the experience of the last year as Challenge Change and Contribution for the Board and how members have embraced this. Demographic and geographical information of Dudley highlights some of the challenges within the area, importantly the levels of deprivation. Followed by an explanation of the statutory functions and objectives of DSCB, assessing whether DSCB partners are fulfilling their statutory obligations as set out in the Working Together to Safeguard Children 2015.

The effectiveness of the role of the independent chair is also examined alongside an explanation of the Board restructure and its current effectiveness including Board member attendance.

The second half of the report focuses upon the performance of the Boards functions to monitor and evaluate the effectiveness of training, including multi-agency training to safeguard and promote the welfare of children.

The report also addresses the DSCB function to quality assure practice, through audit, and identifying lessons to be learned. Also included is detailed data of safeguarding training which evaluates the impact of training on practitioner's practice, to evidence progress in developing an effective safeguarding workforce.

Over the past 12 months Dudley has been involved in two Serious Case Reviews (SCR's) both of which have involved children who previously resided in the Dudley area (but did not at the time of their deaths). Neither has been published due to ongoing criminal investigations but will be reported on in the next report. Child Death Overview Panel has identified learning from child deaths and a pathway to embed learning.

DSCB has committed to undertaking a range of audits during 2015 to 2016 to continue to assess and quality assure safeguarding arrangements within Dudley to put children at the centre of care and to listen to what they say, to make every contact count by focussing on getting it right the first time.

3. Purpose of the Annual Report

This annual report is produced to provide a rigorous and transparent assessment of the performance and effectiveness of Dudley Safeguarding Children Board. It identifies areas of weakness, the causes of those weaknesses and the action being taken to address them as well as other proposals for action. The report should include lessons from reviews undertaken within the reporting period. It is part of the way that DSCB accounts for its work, celebrates good practice and raises challenge issues for partners to address.

Working Together (2013/2015) states that the "chair of the Local Safeguarding Children's Board must publish an annual report on the effectiveness of child safeguarding and promoting the welfare of children in the local area (this is a statutory requirement under section 14A of the Children Act 2004). The annual report should be published in relation to the preceding financial year and should fit with local agencies' planning, commissioning and budget cycles. The report should be submitted to the Chief Executive, Leader of the Council, the local police and crime commissioner and the Chair of the Health and Wellbeing Board. The LSCB also has a statutory duty to present the report to Children's Trust Board (Apprenticeships, Skill, Children and Learning Act 2009).

The purpose of this report is:

- to provide an outline of the main activities of the DSCB and the achievements during 2014/ 15;
- to comment on the effectiveness of safeguarding activity and of the DSCB in supporting this;
- to provide the public and partner agencies with an overview of DSCB safeguarding

- activity;
- to identify gaps and challenges in service development in the year ahead.

In writing this report, contributions were sought from Board members and the chairs of all sub-groups as well as from other partnerships. It also drew on the monitoring reports that are reported to the DSCB on a statutory basis e.g. allegations against professionals working with children; private fostering. However, it does not seek to repeat these in full, rather to use them to inform this assessment of the effectiveness of the DSCB.

The business of the DSCB in the period under review in this report (April 2014 to March 2015) was directed by the second year of a two year DSCB strategic Business Plan 2012 to 2014 (see appendix 3 for the plan). Therefore this report seeks not to duplicate but to build upon the information shared in last year's Annual report which can be found at www.dudleysafeguarding.org.uk



4. The local context

4.1 Geography of Dudley

Dudley is a metropolitan borough formed in 1974. It is located on the edge of the West Midlands's conurbation, approximately 9 miles west of the city of Birmingham and 6 miles South of Wolverhampton. Rural Staffordshire and Worcestershire border Dudley to the West and South.

Being at the heart of the Black Country, which also includes the neighbouring boroughs of Sandwell, Walsall and Wolverhampton, Dudley has a rich cultural and economic heritage. The Borough is a predominantly urban area, but rather than having one primary centre there are five townships interspersed with urban villages. This has given rise to a very local feel that is a feature of the Borough's communities.

The main town centres are: Dudley Central and North towards the north of the borough, Stourbridge in the southwest, Halesowen in the southeast and Brierley Hill near the centre. The nationally renowned Merry Hill Shopping Centre and the Waterfront business and leisure complex now form part of Brierley Hill town centre.

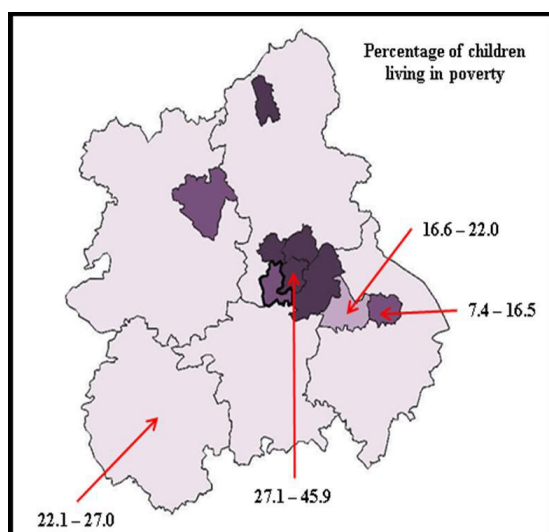
4.2 Demographics of Dudley

The latest estimates from 2013 show that Dudley Borough has a population of around

314,400 of which 75,085 are children and young people aged between 0-19. The population has been growing and people are from mixed ethnic groups, 1.5% Black ethnic groups and a further 1.5% from White groups other than British. There are 52 nationalities represented in schools in the borough with 10.5% of children in schools where English is not their first language.

In November 2014 5,880 people in Dudley Borough were claiming Jobseeker's Allowance (JSA), which is equivalent to 3.0% of the working age (16-64) population. Although the claimant rate in Dudley has been on a downward trend since February 2013, it is still above the regional (2.5%) and England (1.9%) figures. Dudley is ranked as the 104th most deprived of the 326 local authority districts in England (where 1 is most deprived), a lower ranking than five of the other six districts in the West Midlands conurbation. While this suggests Dudley is relatively affluent, it masks the disparity in levels of deprivation across the borough. The latest deprivation indices from 2010 showed that 23.9% of the population live in areas in the 20% most deprived in England. These are principally found in a zone covering Dudley, Pensnett, Netherton and Brierley Hill, but also include parts of Coseley, Lye, Halesowen and Stourbridge.

Population growth has risen at a modest but sustained rate in recent years, with 9,300 more people in the borough now compared to the 2001 estimate. Dudley is the third largest local authority



District in the West Midlands Region based on population. 19% of people are aged under 16 and 19.5% are 65 and over.

According to the 2011 Census Data; 88.5% of the Borough population are White British. Dudley has become more ethnically diverse since 2001 when the figure was 92.5%. Asian groups constitute 6.1% of the ethnic minority population, with the largest individual groups in the borough being Pakistani (3.3%) and Indian (1.8%).

Dudley residents have access to a range of Services provided by Health, Education, Police and Children Services.

There are currently 210 General Practitioners registered in Dudley working within 48 General Practitioner surgeries', medical and health centres.

There are 20 Local Authority Children Centres for families to receive support and guidance on parenting children.

In terms of Education establishments there are 79 Primary Schools, 20 Secondary schools of which 10 are academies, 7 Special provision schools and 4 Further Education colleges.

5. Statutory and legislative context for Local Safeguarding Children Boards (LSCBs)

5.1 Role of the Board

The Local Safeguarding Children Board is the key statutory mechanism for agreeing how partner organisations in the local area will co-operate to safeguard and promote the welfare of children, and for ensuring the effectiveness of what they do. Section 13 of the Children Act 2004 required each local authority to establish a Local Safeguarding Children Board

5.2 Statutory Objectives

The objectives of LSCBs, as set out in Section 14 of the Children Act 2004 are:

1. to co-ordinate what is done by each person or body represented on the Board for the purposes of and promoting the welfare of children in the area, and
2. to ensure the effectiveness of what is done by each such person or body for those purposes.

5.3 Statutory Functions

The functions of Dudley Safeguarding Children Board as set out in primary legislation and regulations are:

- a. Developing policies and procedures for safeguarding and promoting the welfare of children in the area of the authority, including policies and procedures in relation to:
 - Action to be taken where there are concerns about a child's safety or welfare, including thresholds for intervention;
 - Training of persons who work with children or in services affecting the safety and welfare of children;
 - Recruitment and supervision of persons who work with children;
 - Investigation of allegations concerning persons who work with children;
 - Safety and welfare of children who are privately fostered;
 - Cooperation with neighbouring Children's Services authorities and their Board partners;
- b. communicating to persons and bodies in the area of the authority the need to safeguard and promote the welfare of children, raising their awareness of how this can best be done and encouraging them to do so;
- c. monitoring and evaluating the effectiveness of what is done by the authority and their Board partners individually and collectively to safeguard and promote the welfare of children and advising them on ways to improve; monitoring and evaluating the effectiveness of what is done by the authority and their Board partners individually and collectively to safeguard and promote the welfare of children and advising them on ways to improve
- d. participating in the planning of services for children in the area of the authority; and
- e. undertaking reviews of serious cases and advising the authority and their Board partners on lessons to be learned.

Regulation 5 (2) which relates to the LSCB Serious Case Reviews function and regulation 6 which relates to the LSCB Child Death functions are covered in Working Together 2015.

Regulation 5 (3) provides that an LSCB may also engage in any other activity that facilitates, or is conducive to, the achievement of its objectives.

5.4 Working Together to Safeguard Children, 2015

Additionally statutory guidance is offered to LSCBs in Working Together. The period under review was subject to Working Together 2013 – at the end of the financial year, Working Together 2015 was issued. It is expected that Working Together will be complied with by all LSCBs unless exceptional circumstances arise.



Working together to safeguard children

A guide to inter-agency working to safeguard and promote the welfare of children

March 2015

6. The Independent Chair

6.1 Role of the Independent Chair

It is the role of the Independent Chair to hold all agencies to account. The current Chair Roger Clayton was appointed in April 2013. Under Working Together (2013/2015), the Independent Chair is directly accountable to the Local Authority's Chief Executive for the effective working of the Board, and works closely with the Director of Children's Services, regularly liaising with the Lead Member. The Independent Chair is a member of the Association of Independent LSCB Chairs (AILC) and attends that organisation's Annual Conference. Mr Clayton is also involved in some of the activities with peers that the Association offers. There are regular meetings with regional colleagues, and there have been efforts to rationalise and streamline work across these Boards.

In 2014-2015, LSCBs were offered Innovations Project funds by the DfE to work more effectively together – this has resulted in a series of regional collaborative projects around multi-agency training; procedures and performance frameworks for LSCBs. The DSCB chair has taken an active role in the securing of these funds and the leadership and the design of the projects, which are continuing during 2015/16.

6.2 Board Restructure

During 2014/15, the Chair's excellent leadership skills were evident during the restructure undertaken by the DSCB. The board membership was rationalised to ensure that those attending fitted the requirements set out in Working Together (2013) hence many longstanding board members were not required for the board but needed in the subgroups. The Chair managed this process sensitively to ensure that representation at both board and subgroup level had been appropriate. This process of rationalisation is not yet complete and continues in to 2015 in order to ensure effectiveness

6.3 Induction

The DSCB chair introduced an induction procedure for new DSCB members to ensure that the role & responsibilities of a board member were communicated in a formal meeting and updated induction pack. New Board members fed back that the meeting and induction pack clarified their role and understanding of the board functions enhancing their performance at Board meetings. It is hoped that this will promote more active participation in the activity of the Board – certainly the responsibility for chairing sub-groups has become evenly spread throughout partner agencies.

7. Governance arrangements and Board Effectiveness

7.1 Work with other partnerships

The Board has a scrutiny role and therefore must retain its independence in order to fulfil its functions. In terms of accountability the Board should stand alone from other structures and partnerships and should not be subordinate to nor subsumed within them. It must have a clearly articulated relationship with other agencies. In practice, DSCB has worked closely with other partnerships over the past year and remains committed to integrating activities and strategic thinking to ensure the best outcomes for children and young people. However, the recent history of the Board in terms of its' structure and strategy has meant that 2014-5 saw the necessary start of a long journey of the DSCB toward a more independent model of monitoring and co-ordinating safeguarding children work in Dudley.

Whilst the relationship between the DSCB and the Dudley Adult's Safeguarding Partnership has been robust, it could be conceded that the connectivity between DSCB and the Children and Young People's Partnership (CYPP) has been compromised by a lack of articulation of the strategic role of each. This was further compounded by the independent chair's absence from the CYPP partnership. Early in 2015 this gap in strategic communication was recognised and rectified. The CYPP has now been re-launched as the Dudley Children and Young Person's Alliance and work will continue to shape how the DSCB and Alliance work together and ensure mutual communication and dissemination of information.

The independent chair of the Board has been a corresponding member of the Health and Well-being Board in 2014-5 and further work will take place to work collaboratively. The work of the DSCB and of the Safe and Sound Partnership (supporting the co-ordination of domestic abuse work and E-safety) is well-aligned – the Community Safety Lead sits on the Board and supports the work in this area and the training offer around these issues is integrated in to the DSCB training programme.

7.2 The Effectiveness of Board arrangements during 2014/15

A priority during the year under review was to improve Board effectiveness. In order to maximise the time and resources so that the statutory functions of the Board can be fulfilled. A task and finish group worked throughout 2014 to develop a structure that was fit for purpose, to ensure that responsibility for active contribution across the partnership was shared more equally. This was necessary in order to make the DSCB more multi-agency focussed and less driven by the Local Authority.

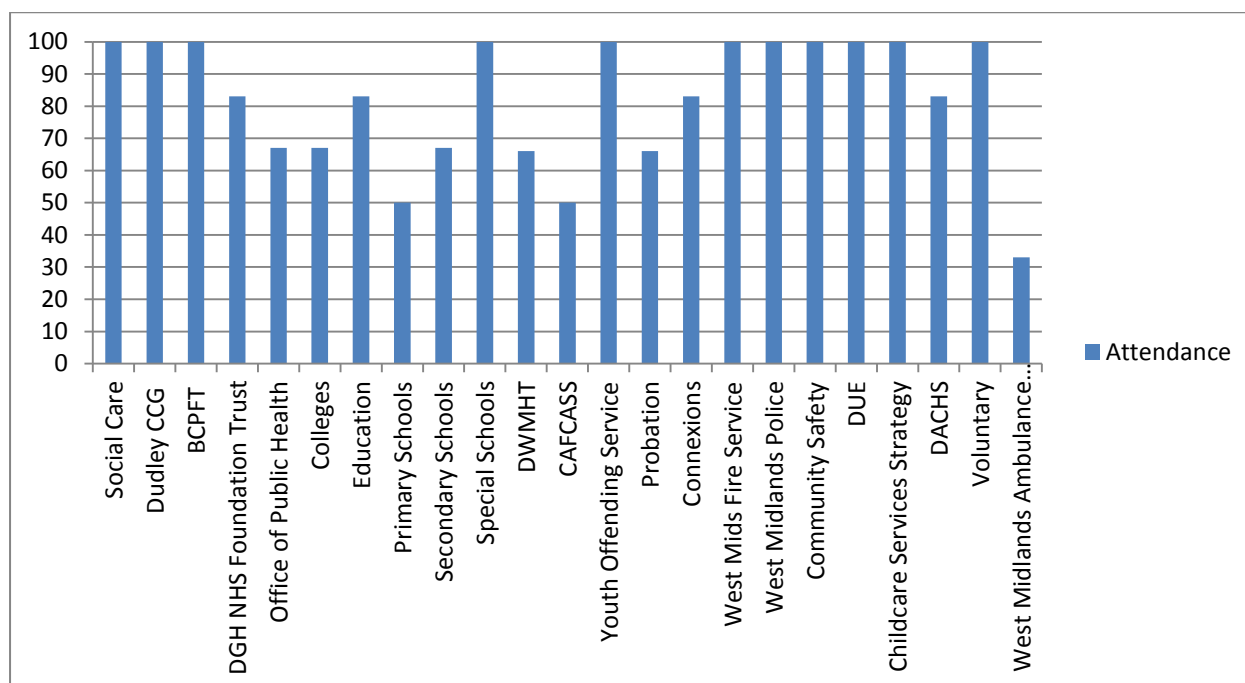
This resulted in some of the longstanding task & finish groups being subsumed into the newly created subgroups in order to streamline communication and Board business. A key change was to create a Quality Assurance & Communication sub group to support the work of the subgroups and act as a conduit between the subgroups and the DSCB. The Quality Assurance & Communications sub group began to meet bi-monthly and comprised of representatives with operational management roles from a wider group of agencies than the Board. Its role ensured effective implementation of the Annual Business Plan which had been informed by 3 year Strategic Plan. Sub groups and task and finish groups complete the day to day work of the Board and each one works to specific Terms of Reference, with clear lines of reporting and accountability to the Board.

The Board met every two months, and established its priorities and key strategic objectives identified in the already existing rolling three year Strategic Plan 2012 to 2015. In January 2015 it held a Development Day that agreed the three Strategic Priorities for 2015 to 2018. This process was positively influenced by the views of young people. A clear outcome was the re-framing of perceived risk by the children and young people who clearly outlined that they were most scared and felt at risk in public places such as in parks or on public transport. This led to the issues being integrated and specifically articulated in to the new Business Plan and work taking place in the Community Safety partnership.

It was also recognised at this point that the many and varied aspirations of the DSCB and partnership agencies would not be met within the current funding formula. A funding report was presented to the Board on 13th March 2015 which outlined the stark choices of further investment or curtailing aspiration. The Board identified that they would prefer to dedicate resources to fulfil their aspirations rather than compromising them in a reduced agenda.

In summary, DSCB embarked upon a journey of change during 2014/15 which is still underway due to the significant changes in key agencies, especially in the Local Authority. During 2015/16 the DSCB must ensure that all agencies manage change effectively whilst ensuring children are kept safe, and in order to do so, must ensure that it runs effectively as a Board so that it can continue to monitor the efforts of partner agencies in doing so.

7.3 Board membership and attendance 2014-2015



The Board is comprised of senior strategic managers across a range of agencies. Membership was compliant with Working Together 2013.

Throughout 2014/15 Board attendance was variable (see graph above) and the year saw the departure of several long-standing representatives. Partner agencies whose attendance was variable were challenged by the Chair – this made a difference to attendance immediately and agencies responded to this positively by maintaining a commitment to attendance.



Another development which tackled agency attendance was to challenge a lack of understanding of purpose rather than lack of commitment. The Chair sought to rectify this with the introduction of an induction pack and memorandum of understanding for new members.

Some of the members demonstrated active participation at the Board, bringing papers for Board scrutiny. Particularly noticeable are Community Safety; Probation; Voluntary Sector and the Clinical Commissioning Group.

In the next Annual report there will be more in-depth analysis of attendance and participation not only at the Board but in sub-groups.

8. Co-ordination of Safeguarding: Key Challenges and Achievements

A major challenge exercise which began in January 2014 was successfully concluded in September 2014. Allegations were made in the national press of widespread unlawful restraint at Dudley's Russell's Hall Hospital. The suggestion that both children and vulnerable adults had been subjected to such practices necessitated a joint response from both safeguarding boards. A pan board reassurance group was formed and the Hospital Trust was required to provide evidence to refute the allegations and to reassure that safeguarding arrangements were fit for purpose. The process was further complicated in that it had to be coordinated with CCG and CQC enquiries and a criminal investigation by West Midlands Police.

Whilst often both difficult and sensitive, the 9 month process finally concluded that there was no evidence of unlawful restraint. The agency under the spotlight responded in an open and transparent manner and the covering report can be found on the DSCB / DSAB websites. Whilst having the potential to be divisive, holding a constituent agency to account in such a comprehensive and robust manner actually strengthened both boards.

8.1 Highlights from the Lay persons report

All LSCBs are required to have lay representation on the Board – the DSCB has a very active lay member who participates on many sub-groups. In contributing to this report she outlined the following achievements and challenges during 2014-5:

- The decision made to create a CSE Co-ordinator post and specialist team in order to promote an improved response to CSE in Dudley. The DSCB has supported the raising of awareness around CSE amongst the public and hoteliers – during 2014/15 this was demonstrated as highly effective through the actions of a member of staff at a hotel: a young girl was accompanied by an older male to the hotel and whilst he attempted to book a room his behaviour aroused suspicion. The receptionist refused this request, as following Safeguarding Training she recognised instinctively that something wasn't right. When they left the receptionist immediately contacted the police, and provided good intelligence to them. This man was subsequently arrested at another hotel trying to book yet another room. The receptionist was later presented with a letter of thanks on behalf of the Safeguarding Board by the Independent Chair. This invaluable training to local hoteliers in Dudley was recently commended at a Conference chaired by Stephen Rimmer on Engaging with Communities.
- The chairing arrangements of the sub-groups are far more representative of partner agencies than hitherto, with clear evidence of effective challenge on issues of pathways, protocols and funding. An example of this related to the funding of the recently advertised CSE Co-ordinator post, joint funded by both the Police and Local Authority. The Police funding was available much earlier than the Local Authority who was rather slow moving and this was eventually challenged.
- A review by the Board revealed inequitable funding across the Partnership, and noted that there had been no increase in contributions during the past 5 years. There has been no outcome to the review as yet and this issue continues during 2015/16.

- In November 2014, there was a young people's highly successful takeover day when the Safeguarding Board was joined by a small group of young people, and was co-chaired. The young person who performed this task was very skilled, even though she had never undertaken it before. Some of those young people remained for the Business Planning meeting later in the day, and were joined by other young pupils from several secondary schools in the Borough. They gained insight into the work of the Board, and equally provided very useful feedback, together with other data collected by the Youth Officer for the Police. Collectively, this influenced the Board's priorities. Some of this information certainly pertaining to safety, in towns and parks actually fed into a regional See-Me-Hear-Me campaign on buses
- In October 2014, the premiere of Anybody's Child was successfully held at Castle Gate Cinema, produced by Chatback and featuring a group of young people in Dudley aged 11-18 years, some of whom are Looked After Children or birth children of foster families who want to help young people in the care system to "have a voice". This film focuses on sexual exploitation, exposing the vulnerability of young people and clearly emphasises the impact of effective grooming. The film delivers short, sharp messages for parents, carers, and peers. It has subsequently been distributed to Secondary schools in the Borough for use in PHSE.
- Whilst Education is well represented on the Board itself, this is not reflected within the sub-groups as only E-safety has representation. Continuous efforts have been made to improve this situation. (NB this is improving during 2015-6).

8.2 Review of the DSCB Business plan 2014/15

The following outlines the outcomes from the Business Plan 2014/15 from actions against each priority.

PRIORITY ONE: Improve the protection of children from abuse and neglect, through more effective inter-agency working and consistent approaches to minimising risk and strengthening resilience within families.

- Highlighted gaps in data and practice issues enabling Board members to have a better understanding of the issues.
- Identified areas for improvement including how agencies address emotional well-being issues for children and young people with mental health issues.

PRIORITY TWO Improve the effectiveness of early help and intervention for children and young people who are vulnerable.

- Developed pathway for embedding Signs of Safety.
- Oversight of single agency assessment.

PRIORITY THREE Strengthen the effectiveness of support and challenge provided by partners of the Board to improve safeguarding outcomes for children, young people and their families.

- Introduced Risk Register
- Identified the need for Board Restructure
- Implemented Board Induction for new members
- Introduced DSCB constitution
- The development of the Quality Assurance & Communications sub group
- Introduced Annual Board Member Review
- Developed self assessment tool
- DSCB Priorities and work plan set for 2015/2016
- Worked in partnership with young people in Dudley to set Board priorities for 2015/2016

Priority 4 Improve inter-agency responses to young people who are at risk of, or who have suffered, sexual abuse or exploitation.

- Identified priority areas for development in protecting young people from Child Sexual Exploitation (CSE)
- Embedded a multi-agency response to CSE
- Implemented the CSE pathway and panel process;
- delivered and evaluated CSE training to safeguarding leads across the partnership and Hotels]
- undertook CSE self assessment against findings of Jay report and SEE Me, Hear Me Framework
- Finalised CSE Strategy & Action Plan for 2013 to 2015

PRIORITY 5 Improve the safeguarding and protection of children and young people who are living in households where there is domestic abuse, parental mental health and parental substance misuse

- Embedding a 'Think Family' approach across the children's and adults workforce
- Improved interagency screening and risk management of domestic abuse



8.3 Development of Policies and Procedures

The Policy and Procedures sub group of DSCB Group oversaw the development of local practice guidance in response to legislation and government guidance, as well as specific circumstances. It also co-ordinates the maintenance and updating of the Interagency safeguarding procedures which are managed by TriX and added to the Dudley safeguarding website. The sub group worked tirelessly to ensure that the procedures were uploaded correctly and accessible to all practitioners. This was further embedded by a communication strategy to make practitioners aware of how to access and navigate the procedures.

During 2014/15 the following key guidance documents were formally approved:

- Use of Images Guidance
- Children from Abroad
- Children Missing from Education
- Children Moving Across Local Authority Boundaries
- Children of Parents with Learning Difficulties
- Children of Parents with Mental Health Problems
- Children of Parents who Misuse Substances
- Faltering Growth

Whilst the review of the DSCB procedures is welcome, there is work outstanding to understand their implementation in practice – i.e. have they made a difference? In the forthcoming year the DSCB will ensure that these policies are embedded in practice through audit and Quality Assurance work.



8.4 Communications

During the past year the Board has undertaken a range of communication activities to raise the profile of the Board, promote engagement and strengthen existing means of communication with members of the public, parents and carers, children and young people and practitioners from all agencies. A communication strategy was developed and ratified by the Board – this will provide the direction for the communication activities undertaken in 2015/2016 – particularly of interest has been the reach to parts of the community that are not always considered in safeguarding i.e. the commercial sector.

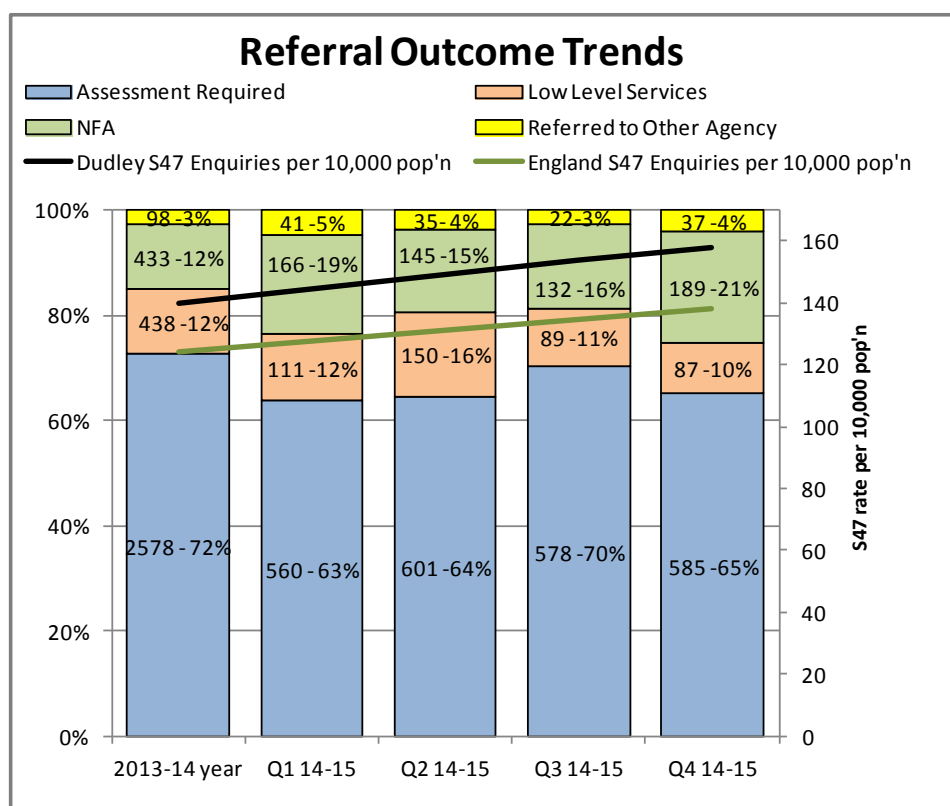
The Board published a newsletter providing a round-up of news and developments in the Safeguarding arena both locally and nationally. This also provides a mechanism to draw attention to and promote national awareness days, such as child sexual exploitation and internet safety. DSCB continued to work with groups of children and young people, to ensure that their feedback and opinions are used and taken into account when developing policy, procedures and services. A group of local young people helped to contributed to DSCB's priority work streams. They attended the Board's annual development day and facilitated a discussion regarding the key priority areas for 2015/2016.



9. Monitoring and Evaluation of Safeguarding Work

This section of the report covers the activity which took place to understand the effectiveness of the safeguarding response in Dudley.

9.1 Key data about the child protection system



The above graph offers information around referral outcome. At the end of 2013/14 off the 12151 contacts received, 3,567 were referrals into Children Services.

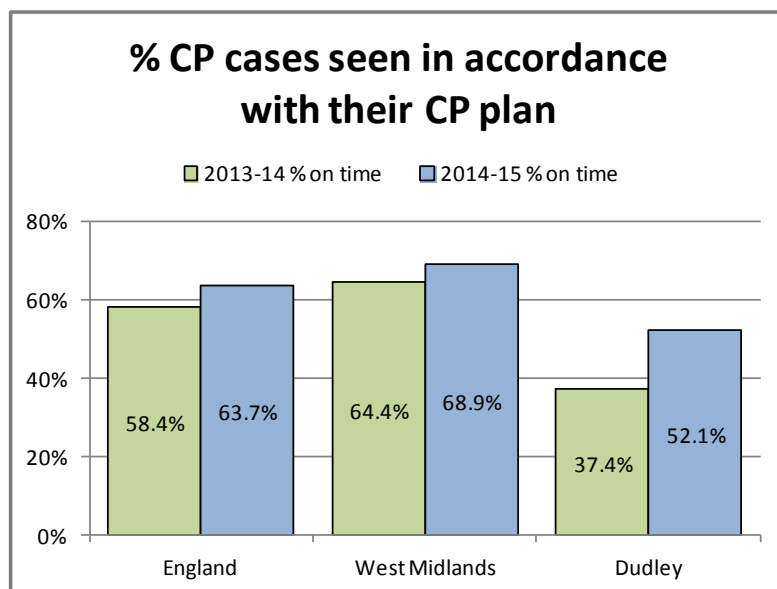
The above graph indicates that in 2013/14, 72% of the referrals required an assessment from Children Services, 12% required a low level service through early intervention and 12% received no input and returned back to universal services. 4% was referred to other agencies to offer input.

At the end of 2014/15, the graph shows a reduction in assessments and referrals to low level services. However there is an increase to referrals for early intervention provision. This indicates that there was some developments in early intervention which meant families who needed support were receiving this earlier on.

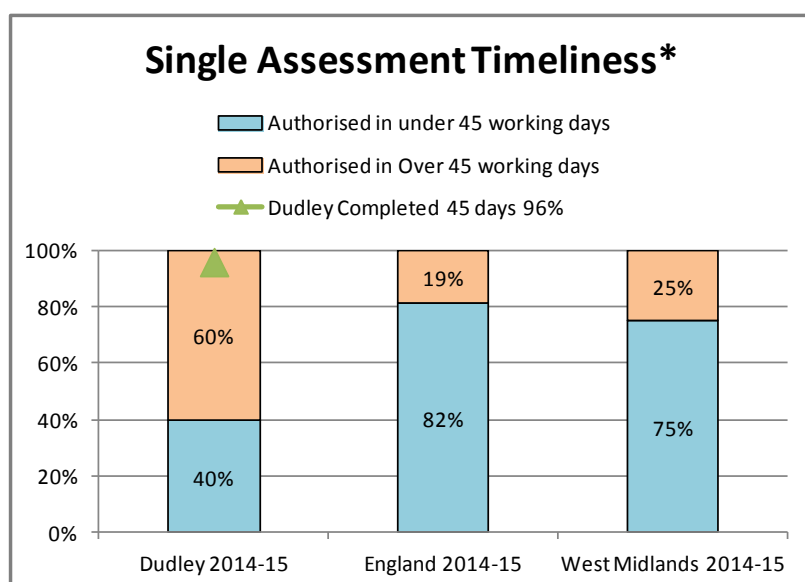
Data shown in the graph above also shows that Dudley's performance of authorised/completed assessments was poor when compared to England and West Midlands at only 40%. This means that the number of expected assessments when benchmarking against Local Authorities is low.

Dudley Children Services are consistently undertaking a higher level of section 47 child protection investigations compared to the national average. This is being reviewed in 2015 to better understand through audit activity why this is occurring at this particular level. However in 2014/15 there were 377 children subject of Child Protection Plans. They are the most vulnerable group of Children in Dudley.

During this period 97.1% of their Child Protection plans were reviewed in timescale in line with Statutory requirements.

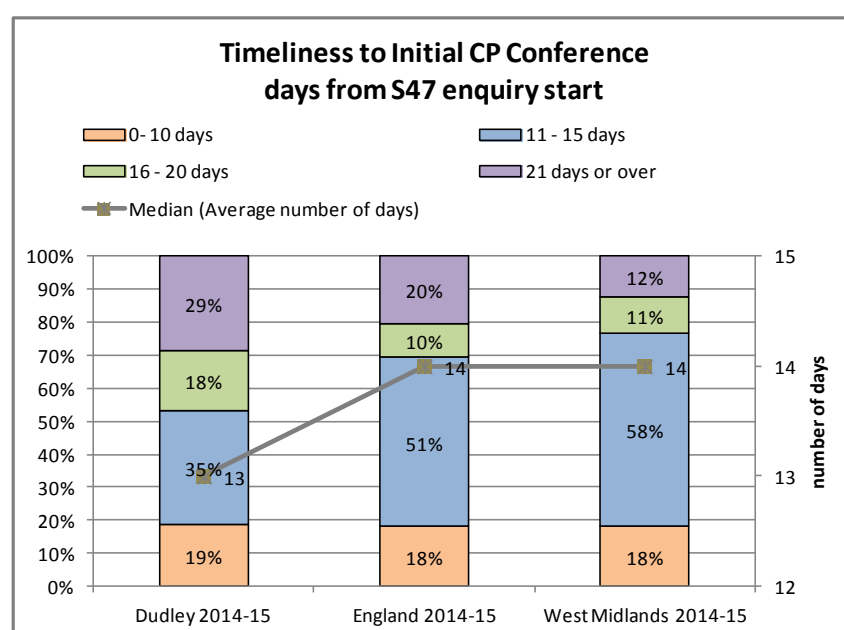


This graph details children who were subject of Child Protection plans and the % of visits in line with agreed statutory responsibility. Timeliness of visits to children in accordance with their child protection planning was a challenge in Dudley. This is partially due to data errors and timeliness of recording of visits. However where children had not been seen, this was immediately rectified in early 2015 with an independent audit of cases open to children services. The visiting frequency has been defined at a minimum of fortnightly by the allocated social worker and early indication is that the percentage of visits to children on a child protection plan has improved significantly in 2015.



This graph offers information of children and young people assessments (CYPA) completed by Children Services within timescale. CYPA's were introduced in its new format in April 2014. This was in line with Munro recommendations for assessments to be more holistic and offer rich up to date information about a child and their specific needs. Whilst timeliness of these assessments was relaxed in comparison to 10 working days Initial Assessment, it has meant that assessments have taken longer to complete but the demand and requests of assessments has not changed. The graph offers further benchmarking detail across England and West Midlands.

Dudley Children Services are aware of the gaps and have worked to address this issue in the development of single point of access in 2015 and early intervention services under the umbrella of Family Solutions. This will be reported on in 2016 Annual report.



Child Protection Case Conferences must be held within 15 working days from the date that the last strategy meeting makes a decision to undertake a child protection investigation. This is a statutory requirement and defined in Working Together 2013. Dudley Children Services have found this a challenging target over the three year period with 53% held in timescale in 2014/15. This is partially related to data errors and timeliness of recording on the system, but it is also to note that specific challenges around joint investigations have meant that some visits and lateral checks have taken longer before a decision has been made to proceed to conference.

Safeguarding data from other partner agencies	2014-2015
Number of police notifications made to children's social care involving children living within the household where a domestic abuse incident had taken place.	135% increase from 2012
The number of concerns or allegations in respect of people who work with children	103

The number of positions of trust complex strategy meetings concerning individual members of the workforce.	60
The number of Initial Child protection conferences	211
The number of children made subject of a child protection plan	377
The number of receiving in conferences	26
The number of review child protection conferences	464
The number of children reported as missing or absent to the Police	212
The number of people referred to YPSE panel and assessed at risk of sexual exploitation.	46
The number of child abuse recorded crimes by the police	281
The number of young people (under the age of 18 years) charged with drug related offences, in respect of Class B drugs	39
The number of young people (under the age of 18 years) charged with drug related offences, in respect of Class A drugs	1
The number of children (under 18 years of age) victims of recorded crime, of which 26 were victims of knife crime and 6 victims of gun crime.	989

9.2 DSCB Dataset:

The newly restructured DSCB acknowledged that its dataset was limited so could not provide a holistic picture of safeguarding activity and progress in Dudley. An effective dataset should give insight into all the safeguarding arrangements in the borough as well as information about the experiences of children and young people. A recommendation was made that the Quality Assurance and Communications subgroup develop a more robust and effective dataset throughout 2015/16.

9.3 Performance reporting

The DSCB has sight of several monitoring reports which should present key information to the Board to assure regarding the effectiveness of the safeguarding response. The data from 2014/15 is not as robust as the Board requires to do this – what is included below is the available data and analysis – with a useful analysis of the gaps and the way forward.

9.4 Managing Allegations against professionals in Dudley 2014/15

This information was provided retrospectively by a new interim postholder in the role of Local Authority Designated Officer (LADO) appointed during 2015/16. She has identified a lack of reliability in previously gathered data but has presented this as a useful summary. In reading this, we must bear in mind that the service has not had a full time LADO in post and the responsibility had rested with the Independent Reviewing officers.

Number of Allegations against Professionals

	2013/14	2014/15
Number of allegations referred	No data recorded	60
The percentage of allegations that were referred within 24 hours of the date the concern was raised (relates to actual professionals)	No data recorded	This information has not been collated
Allegations where correct procedures were followed by referrer	Data not available	This information has not been collated

Of the 60 cases which were recorded as referrals, referred through the Managing Allegation against Staff and Volunteers process, 40 (66.66%) were dealt with within one month of the referral and 15 cases (25%) were concluded within the three month target. There were some cases which were subject to criminal investigations, which contributed to a delay in outcomes; 4 cases (6%) were concluded after 6 months and one case (20%) was concluded in a nine month timescale.

Allegations by Profession

Allegations referred By profession	2014/15 (Number)	2014/15 (%)
Child Health (health visitors, school nurses)	8	13.34%
Foster Carers/Placements	6	10%
Teachers/Head teachers*	24	40%
Education (Other)	0	-
Social Workers**	0	-

Voluntary Sector	3	5%
Other Dudley Services	0	-
Health (any other health worker)	0	-
Police	0	-
Care Workers	0	-
Early Years	0	-
Residential Care	5	8.34%
Other DO/Authority	0	-
Other	14	23.34%

As can be noted, education staff account for the majority of the recorded allegations referred under the Management of Allegations Process. However it should be noted that this is not a comprehensive picture of the total referrals for the year.

Outcomes of Allegations

This data has not been collated during 2014-5

In order to consider how we keep in step with our local partners, a canvas of the numbers of referrals received by our statistical partners are as follows;

Authority	2014/2015 Total Referrals	2014/15 Of those, consultations only	2014/15 Positions of trust
Walsall	329	263	66 (21%)
Birmingham	1076	865	211 (20%)
Sandwell	431	341	90 (21%)
Shropshire	229	Improving data recording	Improving data recording
Worcestershire	887	726	161(18%)
Staffordshire	600+	300+	Info not provided

The local data analysis suggests that between 18% and 20% of the total numbers of referrals received went on to be considered by way of Positions of Trust meetings. If we use this as a tool to predict the likely numbers of referrals it would suggest that the number of referrals to the LADO in Dudley is likely to have been over the 300 mark for the period 2014 to 2015.

This of course is not an exact science, but does provide us with a picture and supports the need to improve data collection.

Whilst we know that our referrals for the period 2014/15 were recorded as 60, we now know from the new method of data collection which was implemented for the third quarter of this current year Oct-Dec 15; that the referrals received through the Management of Allegations process are currently at 65. This therefore indicates that we are not far off our regional partners.

There are now clear plans to effectively monitor the management of allegations against professionals.

9.5 Private Fostering in Dudley

The Board has been assured by the following information regarding private fostering in Dudley – although the same national issue of under-reporting of private fostering arrangements in Dudley is reflected.

The Private Fostering Social Worker (0.5FTE) has been in post four years. The role is focussed on providing a consistent response to notifications of Private Fostering, assessing and supporting Private Fostering arrangements, and undertaking awareness raising activity with statutory and non-statutory partners.

Vitally important to the social work role is the support of an administrator who has to ensure that the data we collect and report upon is accurate. We have been fortunate in being able to recruit to this role during the last 6 months, which has made a considerable difference to the management of private fostering data and the coordination of the awareness raising activity.

Main achievements:

- 100% statutory compliance (response within 7 days) responding to 16 private fostering notifications (21 last year) from a range of statutory and non statutory agencies.
- 100% statutory compliance in 3 of the 4 key performance indicators (KPI) and an improvement to 83.3% in respect of the fourth KPI which relates to scheduled visits beginning before the 1.4.14
- Maintained effective cover arrangements from within the Fostering Team, and the provision of monthly updates to the team about current Private Fostering Arrangements at the fostering team meeting;
- Achieved 91% (10 out of 11) completion of suitability assessments within 42 days. One assessment was delayed while we awaited medical information which was paramount to the assessment, as the privately fostered child had complex health needs. (16 notifications were received of which only 14 were private fostering arrangements. Of the 14 arrangements, 1 ended after 7 days and the remaining 2 assessments were not due to be completed until after 31.3.15 and will therefore be reported upon in the next annual return);
- Achieved 100% statutory compliance in conjunction with Elmfield Independent Steiner School, in terms of notifications, assessment and support;
- Achieved 100% statutory compliance in conjunction with The Glasshouse College (work skills training provision for young people up to 18 years of age with disabilities) whose young people live with host families in the borough;

- Completed risk assessments in all arrangements pending criminal records checks being returned from the Disclosure and Barring Service (DBS). Of note, has been the inconsistency in the timeliness of checks being returned by the DBS with significant delays in some instances (e.g. one check took 6 months to come back despite regular contact with the DBS from Children's Services). The problems reported in last year's Annual Report regarding process issues where individuals have not had the required documentation have now been resolved with HR providing clarity about the process to follow in respect of 'route 2' checks¹;
- Of the e11 arrangements that began during the year 31 criminal records checks were required and 27 were processed. The remaining 4 are being processed via the new route 2 checking process;
- Utilised the Child Sexual Exploitation (CSE) toolkit to identify any privately fostered young people at risk of CSE;
- Effectively safeguarded (18) children. Four existing arrangement from 2013-2014 and 14 new notified children living in private fostering arrangements during this year, through the continuous monitoring and oversight of the Private Fostering Social Worker;
- 2 additional young people who were found not to be in Private Fostering Arrangements were also provided with support and assistance from the Fostering Team after the initial assessment;
- Sought feedback from young people and their Private Foster carers on the quality of the service they received at the cessation of intervention by the PF Social Worker. Feedback from the questionnaires (Appendix 4-4e) was analysed and indicated that all responses received rated the intervention as either excellent or good;
- Our Annual Questionnaire was sent out 24.4.15 to 7 carers and 8 children. Once again all responses were overwhelmingly positive
- Ensured a robust approach to the monitoring, reporting and collation of private fostering data throughout the year (Appendix 4 & 4a);
- Following work with the school's admission unit last year ongoing communication has led to the identification and notification of 2 Private Fostering Arrangements this year;
- Continued quarterly awareness raising activity with in excess of 232 agencies identified on the database by the administrator, including community and faith groups in the borough, all of whom have been sent information directly about Private Fostering; how to notify and whom to contact (Appendix 6).
- Reviewed and updated the PF webpage (March 2015);
- Reviewed our thematic audit based on the 2012 Ofsted report of 12 regional Ofsted Inspection Reports, in order to benchmark Dudley's practice and inform service delivery locally for the year ahead (Appendix 7);
- Remained an active participant in the regional *British Association of Adoption and Fostering* (BAAF) Private Fostering Special Interest Group and took part in the BAAF Private Fostering campaign locally; focusing on health professionals;
- Achieved clarity about the outcomes for those children who were supported in private fostering arrangements with 7 remaining privately fostered at the end of the year (Appendix 8). They and their carers continue to be supported by the service;
- As last year it has been difficult to secure comparative data about the number of notifications received by neighbouring and regional authorities despite support through

the BAAF Private Fostering Special Interest Group. It appears that in some areas there is a reduction in dedicated resources to the Private Fostering task evidenced by the lack of named people responsible for this area of work and confusion by authorities as to who reports on Private Fostering. This is of particular note given that Ofsted inspection feedback continues to emphasise each LA's response to Private Fostering.



RISKS TO THE PRIVATE FOSTERING SERVICE

The main risk to the service currently is:

1. The lack of an integrated casework management system which means that all of the information is maintained in paper files in addition to an Excel spreadsheet. All information in respect of the children and young people is written in WORD format, which then has to be scanned and indexed to the Children's Casework Management (CCM) system. In effect increasing the work required to undertake what should be a simple task, whilst also potentially building in unnecessary delays in information being accessible to district teams. Furthermore there is no Carer's Module within CCM as it stands, so all of the carer's information is maintained in paper format.

The impact of this will continue to be closely monitored and representations to ICT continue to be made. The Directorate needs to consider ways to expedite the current situation.

9.6 Section 11 audits 2014-5

The DSCB has used the S11 audit toolkit from Virtual College. The last audit was completed at the end of 2013 with scrutiny of the findings commencing in January 2014. An updated audit tool was produced by virtual college in April 2014.

In July 2014 DSCB in conjunction with Virtual College re launched the audit tool with the view to undertake an audit of partners within the DSCB with a view to reporting in 2015. DSCB members were invited to attend briefing sessions with Virtual College in November 2014 with a view to commencing a new audit in January 2015 for completion within 2 months. This target date was changed to May 2015 as partners had technical difficulties with the audit tool however there has now been a 100% completion rate. Findings will be included in the Annual Report 2015-2016 which will give a clearer picture of themes and gaps to consider in the DSCB work for 2016-17.

9.7 Other audit activity

Due to capacity and a lack of an audit post, there were no audits conducted during the period under review. This will be rectified in 2015/2016.

10. Learning and Improvement in Dudley

10.1 Serious Case Reviews sub group

The key purpose of the SCR Sub group is to consider whether to hold a Serious Case Review (SCR)

A SCR should take place if abuse or neglect is known, or suspected, to have been involved and

- a child has died
- or a child has been seriously harmed and there is cause for concern about how organisations or professionals worked together to safeguard the child

or

- the child dies in custody
- or a child died by suspected suicide

This summary provides a brief update of the key areas of learning and improvement themes from the above processes. The decision of the independent chair of the DSCB will be peer reviewed in order to quality assure the decision and to demonstrate openness and transparency within the process.

Over the past 12 months there has been a change of chair due to the retirement of the former post holder. In 2015 work has taken place to formalise the process for review of cases and new terms of reference have been set and a learning and development framework is being developed. Review activity has increased due to a number of factors. The group wish to ensure that any cases which do not reach the threshold for a full SCR are undertaken expediently and that themes and learning is disseminated to frontline staff in a timely fashion. The impact of this work and the findings from the reviews conducted under this regime will be reported in the next DSCB annual report

During the period under review (2014-5) Dudley Safeguarding Children Board has

- Involvement in a SCR undertaken by Lincolnshire LSCB
- Involvement in a SCR undertaken by Birmingham LSCB
- Involvement in a SCR undertaken by Sandwell LSCB.

Whilst we are awaiting final publication of these SCR's, action plans generated from the individual management reviews (IMR's) are being reviewed and updated by the members of the subgroup.

Themes to date include:

- Long term chronic neglect and start over syndrome
- Parental rather than child focussed care and assessment
- Invisible siblings
- Clear message to practitioners about the need for 'professional curiosity' and potential for the 'rule of optimism'

10.2 Considerations for the DSCB in the forthcoming year:

- How to best work with partner agencies to ensure that lessons learned are embedded into practice in the optimal manner
- To ensure that the learning and development framework is linked to the quality assurance framework in order to improve outcomes for children, young people and their families
- Continue to support the development of a MASH and updated threshold guidance and to ensure that thresholds are correctly applied in cases of suspected abuse and neglect.
- The training strategy which is a key output from the learning and improvement framework will be regularly updated to reflect the learning arising from all reviewing activity. The DSCB will continue to monitor this via the sub groups.
- To develop innovative ways to embed lessons learned into practice in conjunction with workforce development and quality assurance sub groups

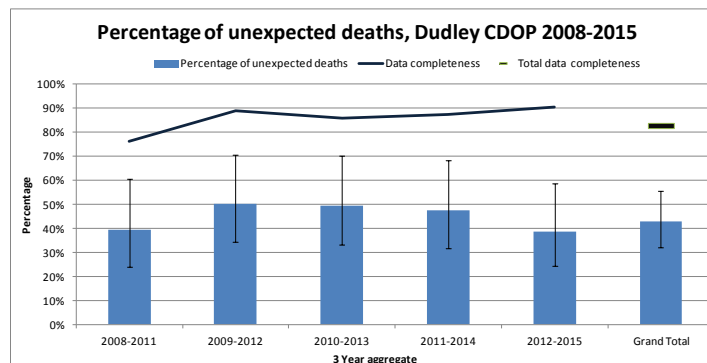
11. Child Death Overview Panel

The Child Death Overview Panel (CDOP) is made up of representatives from a range of partner agencies such as Dudley Group of Hospitals NHS Foundation Trust, Dudley Clinical Commissioning Group, Black Country Partnership Foundation NHS Trust, Children's Social Care, West Midlands Police, Public Health and Community Safety.

CDOP met 5 times during 2014-2015 on average reviewing 6 child deaths per meeting. In total child deaths were reviewed during the year.

Child death is a very sensitive issue of paramount importance. The Panel is committed to learning from every such death where possible, in order to identify modifiable factors at both national and local level and to inform action that can then be taken to reduce the number of child deaths in the future or improve our safeguarding arrangements.

Six of the 19 deaths reviewed were identified as unexpected (not expecting to die within the 24 hours preceding the death). When analysing the number of unexpected deaths as a percentage of deaths reviewed by the panel using data aggregated into three year groups there has been a downwards trend since 2009-12, with the largest fall compared to the previous 3 year period in the 2012-15 data, the confidence intervals show that this trend is not significant. Data completeness also continues to improve with the most recent time period showing the highest completeness available data



During that same period CDOP completed reviews in respect of 54 child deaths (28 male, 26 female)

Review of children death this year has identified six unexpected deaths i.e. children who were not considered to be seriously ill and were not expected to die within 24 hours.

- Two of these deaths were due to Sudden Infant Death Syndrome. There was an issue of exposure to passive smoking in one of the cases. The exact cause of Sudden Infant Death Syndrome is still unknown but certain risk factors can increase its risk; sleep environment (sleeping on stomach or side, sleeping on a soft surface and sleeping with parent) , other risk factors include low birth weight, brain abnormality , respiratory infections, prematurity and passive smoking.
- Two cases of infection were identified as unexpected; one case was in a premature child.

Learning from Child deaths in Dudley

- One case highlighted issues around issuing prescriptions at the weekend when the hospital pharmacy could be closed. Certain medication should be routinely kept on the hospital ward. The case also brought about a change in practice - any child admitted to hospital for more than 2 hours should have vital signs and temperature taken prior to discharge from hospital.
- We continue to reinforce the water safety campaign that was launched so successfully in 2013 following the drowning of a local child. We intend to extend this to campaign to safety around water in gardens. Learning around safe sleeping practices remains high

profile locally and regionally, led by Health practitioners both in the community and in our hospitals.

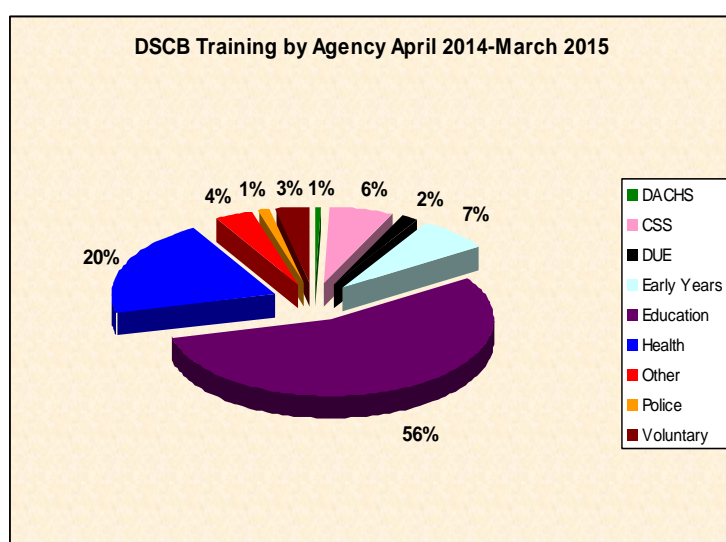
12. Developing an Effective Safeguarding Workforce

Dudley Safeguarding Children Board (DSCB) continued to deliver a programme of face to face multi-agency training which is regularly reviewed to ensure that it reflects learning from national and local Serious Case Reviews and case reviews, and encompasses current evidence based practice. Core training continues to be provided directly by DSCB. The number of courses delivered has continued to rise to meet the demands of frontline practitioners as demonstrated below.

Unfortunately there has been a real challenge to the capacity of the training unit in terms of the long-term sickness of the training manager towards the end of the year. There was also some lack of management and strategic direction of the unit in 2014/15 and the boundary between the responsibility of single agencies to provide basic safeguarding training and the DSCB to provide multi-agency training has become blurred with some agencies becoming reliant on DSCB to deliver single agency training. This clearly compromises the capacity to deliver on multi-agency training as is demonstrated in the 37% decrease in multi-agency training numbers as seen below. This is clearly a significant risk to the Board. Whilst this is being reviewed by the DSCB in 2015, this has meant that the data provided in this report reflects this in that the numbers and the evaluation detail are presented together.

12.1 DSCB Training Figures 2014-2015

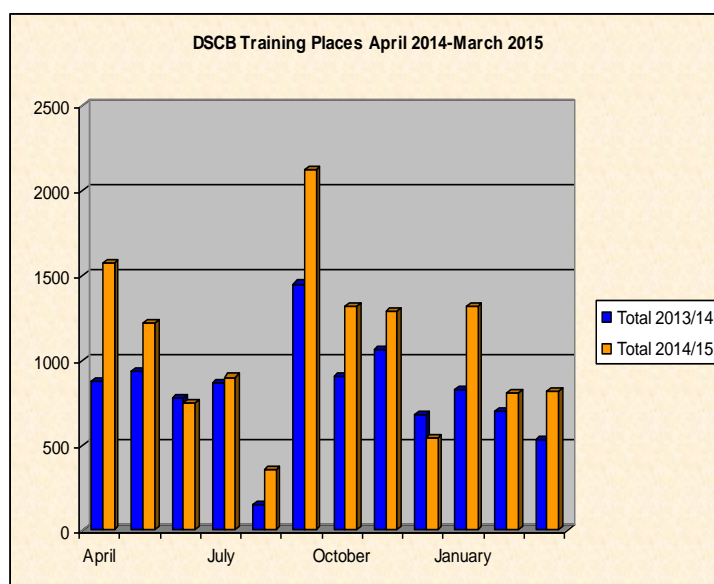
Year	April	May	June	July	August	Sept	Oct	Nov	Dec	Jan	Feb	March	TOTAL
14/15	1572	1225	748	902	361	2127	1319	1290	542	1314	804	819	13023



Single Agency: 9930 (+99%)
Multi Agency: 1661 (- 37%)
Virtual College: 876 (-20%)
Briefings: 556 (-49%)

Partnership Agency Attendance

Comparative Training Data 2013/14 & 2014/2015



Online Training

Month	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Total 2014/15	103	112	60	25	45	63	86	70	131	83	44	54	876

Briefings:

Month	Adult SSD	CSS	Early Yrs	Education	Health	Voluntary	Other	Police	DUE	TOTAL
Total 2014/15	7	158	40	109	123	31	46	41	1	556

How do we know we are making a difference to practice through training?

DSCB training courses are routinely evaluated on the day and demonstrate reports of improved knowledge and confidence in learners. A number of courses were identified at the beginning of the year for impact evaluation three/six months after the training had been delivered. The impact evaluations enable the Training sub Group to assess the effectiveness of training and findings against national data

The methodology for analysing training impact will be further refined during 2015/16 so that it is more routine and embedded in staff development and performance management

12.2 Testimonials of practitioners working with children

"I feel I am a better practitioner because of the training. I feel more confident....I am keen to attend any further training that is relevant to my working practice and that can better me as a professional" – Primary school teacher

"I intend to develop stronger links between the school and governors in relation to safeguarding."
– School Governor

"It made me think about ways we can implement better safeguarding approaches at our youth group and issues we could challenge with our young people so they are educated."
– Church youth worker

"The discussion sessions were the most effective as they are an opportunity to clarify doubts and questions where you need further advice..." – Headteacher

"...gave us the opportunity to think and consider the complex issues surrounding safeguarding."
– CAFCASS worker

"I have previously found it difficult to write the child's voice; however, during the training it was made clearer to me how to do this." – Health Visitor

"If we are unsure, we are now not afraid to ask our safeguarding nurse...." GP surgery employee

"I have learnt that domestic abuse is not just about physical injuries, but about emotional and mental abuse which can present in various ways...." – Contact worker

"I have learnt that abused people may not recognise they are being abused." – Mental Health worker

"I was able to record an incident, knowing what to do, the important bits to write and who to go to." – Primary school staff

Testimonial from practitioners not working with children

"I have worked in the hotel business for the past 15 months and never thought that CSE would be so close to home. I attended the hotel CSE awareness training about 6 months ago which was organised by DSCB. The training was an eye-opener, very interesting and telling me about CSE in a way I understood. I found the true life experiences and examples most useful.

This is how I used the training :

I was on duty at reception in the hotel I work and my gut instinct told me there was something not right about the couple trying to book in. The training signs of CSE came back to me and alarm bells rang. I noted that there was a big age difference between the couple, they were trying to pay cash with no identification and the girl wouldn't make eye contact with me. I refused to book them in (I could have lost my job but I knew there was something wrong)

When they left I phoned the police and told them my suspicions . The police checked the CCTV and followed it up.

Outcome: my actions stopped a child being abused “

3 & 6 month longitudinal evaluations

How have you used this training?

- In supervision with staff
- Shared information in staff meeting
- Re-visited our existing safe caring policy with the young people we look after
- Used on a daily basis when supervising young people
- Identified other training needs
- Used some of the information in training delivery
- Will attend the Trust's Level 3 training to better understand the perspective as we cover the 4 boroughs
- Safeguarding is on the agenda at every weekly meeting
- I question situations more than I used to
- I have more confidence
- To speak out and tell someone if there's a problem and not ignore it
- I have raised concerns about a couple of pupils and discussed these to my CP Officer
- Advised colleagues on what to do
- Arranged further training
- I have referred a child to duty team for CP issues
- The training improved my skills in acknowledging where a child should be safeguarded
- I have used this knowledge on a number of occasions with various situations, leading to referrals

DSCB has identified challenges in the delivery DSCB of training and an arrangement to address these in 2015/2016, these are set out below:

- Capacity to deliver but more importantly to evidence outcomes and develop quality and breadth of programme.
- Quantity over quality.
- Safeguarding practices in the real world – challenge from training delegates regarding practice issues
- Value/recognition of training & trainers, most of who deliver for the Board on top of their day job.
- Investment and support.
- Partnership ownership and to effectively offer joined up training.
- Administration.

12.3 Operational Safeguarding Forums in 2014/2015

The following Forums continued their commitment in meeting on a regular basis. The aim of these Forums was to share the information from sub groups and ensure that the action plan of the Board becomes an operational tool in practice. The forums also monitored the effectiveness of the work completed and fed back the findings to Sub and task groups.

- Child Protection Coordinators (Education).
- Local Forum (Social Care and Police).
- Health Safeguarding Forum.
- 14+ Safeguarding Forum.
- Directorate of Place Safeguarding Forum.
- Directorate of Children Services Safeguarding Management Board.
- Substance Misuse Services Safeguarding Forum.



13. Looking Ahead

The final section of the DSCB Annual Report outlines some of the key challenges, risks and priorities for DSCB looking ahead to the next 12 months and beyond



13.1 Key risks and Challenges

Safeguarding Risks and Challenges

- Capacity of front-line services to respond to increasing demand and complexity of child protection work, notably at a time of recession with the impact of poverty increasing pressures within some families and cuts within public sector services on the provision of early intervention and some areas of more specialist assessment and intervention. The continued impact on frontline practice of continued national and regional organisational change and reform within health and police.

Board Risks and Challenges

- Capacity to deliver key priorities and improvements identified within business plan and work programme.
- Developing clear pathways for referrals and subsequent information sharing amongst partners.

- Lack of investment for Quality Assurance coordinator post and ensuring effective resourcing and optimum processes for dealing with child sexual exploitation. Review and set a work programme for improving LSCB communications, including the development of the website in-conjunction with Dudley Safeguarding Adults Board. Review and set a work programme to improve the engagement and participation of children and young people with the DSCB.
- Reviewing internal Board effectiveness and relations with other partnerships through self-assessment and peer review
- Review and set a work programme to improve partnership engagement and leadership across the Board structure
- Supporting the development of the MASH
- Developing a greater understanding of the quality of multi-agency frontline safeguarding practice
- Developing an equitable and realistic funding / resourcing model to sustain DSCB activity



Appendix 1

Board Membership at end March 2015

Agency	Web address	Board member	Job title
Independent		Roger Clayton	Independent chair
Directorate of Children's Services, Dudley Council	www.dudley.gov.uk	Pauline Sharratt	Interim Director of Children's Services
Directorate of Children's Services, Quality & Performance Dudley Council	www.dudley.gov.uk	Ian McGuff	Assistant Director – Quality & Partnership
Children's Social Care, Directorate of Children's Services, Dudley Council	www.dudley.gov.uk	Christine Ballinger	Divisional Lead – Social Work
Safeguarding & Review Service, Quality & Partner Directorate of Children's Services, Dudley Council	www.dudley.gov.uk	Jasvinder Broadmeadow	Divisional Lead – Safeguarding & Review
Safeguarding & Review Service, Quality & Partnership Directorate of Children's Services, Dudley Council	www.dudley.gov.uk	Jackie Jennings	Safeguarding Development Manager
Safeguarding & Review Service, Quality & Partnership Directorate of Children's Services, Dudley Council	www.dudley.gov.uk	Martine McFadden	Business & Communication Manager
Dudley Clinical Commissioning Group	www.dudleyccg.nhs.uk	Susan Vincent	Designated Lead Nurse for Safeguarding
Dudley Clinical Commissioning Group	www.dudleyccg.nhs.uk	Rebecca Bartholomew	Chief Quality & Nursing Officer (Director of Nursing (Safeguarding Lead))
Dudley Group NHS Foundation Trust	www.dgh.nhs.uk	Yvonne O'Connor	Deputy Director of Nursing
Dudley Group NHS Foundation Trust	www.dgh.nhs.uk	Zala Ibrahim	Consultant Paediatrician (Designated Dr for Safeguarding)
Dudley Group NHS Foundation Trust	www.dgh.nhs.uk	Pamela Smith	Safeguarding Lead
Dudley Group NHS Foundation Trust	www.dgh.nhs.uk	Carol Weston	Named Nurse for Safeguarding Children
West Midlands Probation Service	www.swmprobation.gov.uk	Viv Townsend	Head of Dudley Probation
Black Country Partnership Foundation Trust	www.bcpft.nhs.uk	Jayne Clarke	Safeguarding Children Service Lead

Community Safety Team, Dudley Council	www.dudley.gov.uk	Anne Boden	Domestic Abuse Coordinator
Community Safety/DAAT, Dudley Council	www.dudley.gov.uk	Sue Haywood	Head of Community Safety
Directorate of Adults, Community & Housing Services, Dudley MBC	www.dudley.gov.uk	Anne Harris	Head of Safeguarding (Adults)
Public Protection Unit, West Midlands Police	www.west-midlands.police.uk	ADCI J Skyrme	Acting Detective Chief Inspector
West Midlands Fire Service	www.wmfs.net	Julie Winpenny	Partnership Officer
Special School (Special Schools Forum representative)	www.halesbury.dudley.sch.uk	Marie Hunter	Head Teacher
Castle High School (Secondary Schools Forum)	www.castle.dudley.sch.uk	Michelle King	Head Teacher
FE Colleges		Gill Coldicott	Assistant Principal – Student Support Services, Recruitment & Safeguarding
Dudley & Walsall Mental Health Trust	www.dwmh.nhs.uk	Rosie Musson	Head of Nursing, Quality & Innovation
Connexions Service, Dudley Council	www.connexionsdudley.org	Helen Ellis	Commissioning Manager
NHS England	www.england.nhs.uk	Angela Young	Nursing & Quality Manager
The Phase Trust, Children, Young People's & Families Voluntary Sector Forum	www.phasetrust.org.uk	Jayne Sargeant	Manager
Dudley Council for Voluntary Services	www.dudleycvs.org.uk	Nicki Burrows	Children Young People & Families Development Officer
Lay Advisor		Karen Palk	Lay Advisor
Youth Offending Services, Dudley Council	www.dudley.gov.uk	Mike Galikowski	Divisional Lead
Directorate of Urban Environment, Dudley Council	www.dudley.gov.uk	Rachael Doyle	Principal Sport & Physical Activity Manager
Dudley Children & Young People's Partnership	www.dudley.gov.uk	Mike Wood	Head of Children & Young People's Partnership Support
Legal Services, Dudley Council	www.dudley.gov.uk	Richard Clark	Principal Solicitor (Legal Advisor)
CAFCASS	www.cafcass.gov.uk	Nicky Campbell	Service Manager
Cabinet Member – Children's Services, Dudley Council		Cllr Tim Crumpton	Lead Member for Children's Services (Advisor)

App 1

