

<p align="center">London Borough of Hammersmith & Fulham</p> <p align="center">CHILDREN AND EDUCATION POLICY AND ACCOUNTABILITY COMMITTEE</p> <p align="center">23 November 2015</p>	
<p>CHILD PROTECTION AND SAFEGUARDING</p>	
<p>Report of the Director of Family Services, Steve Miley</p>	
<p>Open Report</p>	
<p>Classification: For Information and Review Key Decision: No</p>	
<p>Wards Affected: All</p>	
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1. EXECUTIVE SUMMARY

1.1. This report highlights the following issues:

- Safeguarding training and professional development across the professional network.
- Child protection activity rose significantly during the year with the number of children subject to plans peaking at 196 in February 2015. A focused strategy has been implemented to safely manage demands and reduce activity. Child Protection numbers are now back down to levels consistent with our statistical neighbours.
- Safeguarding practice themes:
 - Strengthening Families Conference Model
 - Thresholds
 - Quality of Child Protection Plans
 - Child Sexual Exploitation (CSE)
 - Community Engagement
 - Allegations Against Professionals - LADO

2. RECOMMENDATIONS

2.1 The Committee is asked to review and comment on the report and make recommendations as appropriate.

3. INTRODUCTION AND BACKGROUND

- 3.1. This report details information about child protection activity in the Borough from April 2014 through to the end of February 2015 and provides a shared services perspective where this information is available.
- 3.2. It is a fact that in society, children may be harmed and seriously injured by their parents and carers. This may take the form of physical injury, sexual abuse, developmental impairment, neglect or emotional abuse. The increasing prevalence of drug and alcohol misuse by parents significantly impacts on child protection numbers. Increased awareness of the impact of domestic violence on children's self-image and confidence has widened the scope of child protection to include those children affected. Domestic violence is one of the most common reasons for cases being brought to conference. However, the number of children in need of protection relative to the total child population remains very small.
- 3.3. Child protection involves the identification and multi-agency assessment of the care provided to children who may be at risk of harm from their parents/carers, together with the development of a plan to reduce the risk of harm to those children by the coordination and provision of services. Child protection also requires continuous monitoring of the effectiveness of this plan, and prompt action to seek a court order to remove children in those circumstances where the level of risk cannot be satisfactorily mitigated.

4. PROFESSIONAL DEVELOPMENT & SAFEGUARDING TRAINING ACROSS THE PROFESSIONAL NETWORK

Professional Development Within Children's Services

- 4.1 Staff working within children's services have access to a wide range of learning and professional development opportunities provided by: The Local Safeguarding Children Board, corporate learning and development programmes, the west London social work programme and the children's services programme.
- 4.2 Each year a training needs analysis is carried out by the workforce development team; this involves talking to managers, social workers, Children in Care Councils, youth forums and partner agencies.
- 4.3 The following are key contributing factors to the programme design:
 - Needs identified by Directors, Service Managers, Team Managers, Social Workers and other staff – these will be captured via the annual training needs analysis meetings and through the results of the annual your voice staff survey.
 - Responding to recommendations from serious case reviews (SCR), case audits and action plans.
 - Learning from Complaints
 - Responding to changes in legislation and guidance and national reports and reviews.

- 4.4 Programme Elements / Design Principles - The programme is designed to incorporate all learning styles and to support the workforce in developing the skills and knowledge required to work competently and confidently within their role.
- 4.5 Core Training Programme for Frontline Practitioners programme has been designed to complement the modules that are offered in the west London and LSCB training programmes. Sessions are commissioned based on the training needs analysis and will complement the range of other options outlined to enable staff to access development opportunities which will help to enhance practice and service delivery.
- 4.6 Assessed and Supported Year in Practice (ASYE) - All newly qualified social workers (NQSWS) are expected to complete the ASYE. The same programme is delivered consistently by all boroughs in west London. The focus of the programme is to enable a year of transition from student to qualified social worker involving a holistic assessment in line with the professional capability framework (PCF).
- 4.7 Post Qualifying (PQ) Awards - All social workers are eligible to continue their learning by studying for a post-qualifying award. The post qualifying framework allows social workers and managers to continue their education and training in a flexible and modular way. They build on social work qualifications and are relevant to all social workers once the NQSW year has been completed. We are committed to ensuring that all social workers have the opportunity to complete the consolidation and enabling others modules.
- 4.8 In addition to the above all staff have access to a range of research resources to assist them in carrying out their work. Each team has a CC inform license this resource makes professionally-critical information available. A wealth of expert-written content is available to help practitioners expand their knowledge base and evidence their decisions. We also have membership to Making Research Count a network comprising the social work departments of 10 English universities. Membership includes access to a continuing programme of conferences, seminars and workshops.

Focus on Practice: Developing our front-line social workers and practitioners

- 4.9 Focus on Practice is our project funded by the Department for Education (DfE) Innovation Fund for the development of more purposeful practice and effective interventions with families.
- 4.10 Launched in October 2014, the programme covers our work with children and families in all areas of children's social care, and includes both social workers and other allied practitioners who work within early help, with children in need, in child protection, with looked after children or those leaving care, with disabled children and with teenagers and young offenders. The core objective of Focus on Practice is for social workers and other practitioners to use their professional expertise to help create positive change for families and better outcomes for children and young people. Over the next three years, we expect to see a reduction in the number of children looked after and those

subject to child protection plans, and more effective interventions with families resulting in fewer re-referrals to our services.

- 4.11 In order to achieve this, we are building on the knowledge, confidence and expertise of practitioners and managers in order that they are more effective in creating changes for families, mobilising the strengths within families, and moving away from a model of case management and ‘watching and waiting.’ Practitioners will work intensively with families to solve problems and change behaviours, rather than referring out to others unnecessarily.
- 4.12 From 2015 evidence based programmes, around four key methodologies (systemic thinking, Motivational Interviewing, Signs of Safety and parenting programmes) are providing the foundation for the in-house training provision for social workers and frontline practitioners. Practitioners will have a “tool-kit” of interventions which they can draw on and use to ensure that they are able to intervene effectively with the children and families in their caseloads.
- 4.13 The table below details the number of practitioners, managers and leaders from Family Services in Hammersmith and Fulham who have undertaken the systemic element of the Focus on Practice skills programme in 2015.

Programme Title	Number Started in 2015
Systemic Practice	95
Systemic Supervision	14
Systemic Leadership	7

Feedback From Staff

- 4.14 “I started in H&F as a locum team manager [in the Contact and assessment Service] and I had come with some prior experience of systemic learning. I was quite excited from the start with the plans to move towards a more systemic approach to practice and the training opportunities that this would provide. I really wanted to be a part of this journey as I strongly believe that developing this approach would enable workers to strengthen their practice and build better relationships with families from the first point of contact. The shift towards this way of practice and H&F’s commitment to this was an important part in my decision to apply to become a permanent member of the management team.

Case Study

- 4.15 Billy (not his real name) is a 14 year old boy came into care aged 8 following chronic neglect relating to parental alcohol drug issues. He has had Multiple placement breakdowns (10+) and placements in specialist residential units – consideration was given to secure accommodation. Billy’s mother has addressed her alcohol issues and despite a difficult relationship has remained in constant contact with Billy – both have expressed they want to resume living together, but difficulties arose because of how far away Billy’s mother lives. Billy’s social worker has sought support from the clinical team in LBHF. Together, an intensive 10 week intervention was devised, comprising joint sessions with social worker and family, individual sessions with a clinical psychologist and mother, telephone/ skype contact with mother in between session consultations and therapeutic letters to Billy between sessions. By

offering this intervention we can allow Billy and his mum a chance to reconnect in a supportive context and think together about managing difficulties and distress, thereby reducing the likelihood of further placement disruptions.

Feedback from a mother in LBHF

- 4.16 “I have had involvement on and off with Social Services for a number of years. It never felt as if they had any understanding or empathy of where I was coming from or the situation my family was in. They seemed very quick to see my failings but rarely did they see anything that I did well. Social Services were people I had to fight against to survive. I felt like a complete failure as a parent and as a human being.
- 4.17 Since the systemic family therapists have been working alongside Social Services things seem to have changed a great deal for the better. They are more able to think outside the box, are less rigid and now realise that a ‘one solution fits all’ approach is ineffective in achieving any kind of lasting change. They praise me for the progress I have made and I leave our meetings feeling as if I am getting somewhere.
- 4.18 The social workers feel more approachable and I am working with them rather than against them. I am given practical solutions which we work out together. We still have difficult days but I now live with a sense of hope that things are improving and will continue to do so. I now believe in my abilities as a parent and feel I am being treated with dignity and respect. I feel supported and cared for and no longer feel alone.”

Safeguarding Training in Schools and Education

- 4.19 As part of the Continuous Professional Development Programme for 2014/15 two ‘Training the Trainers’ safeguarding and child protection courses were made available in October and December 2014, with the aim of supporting schools to begin developing the capacity to deliver their own annual refresher safeguarding and child protection training to all staff through the Designated Safeguarding Leads. The sessions were designed to both equip and enable Designated Safeguarding Leads to deliver safeguarding and child protection training directly to teaching and non-teaching colleagues within the school context – in line with the DfE statutory guidance “Keeping Children Safe in Education” which states that it is acceptable for training on safeguarding and child protection to be delivered by the designated lead for safeguarding in the school. To support schools in delivering on their responsibility to ensure all staff are provided with regular training, a resource pack is being developed for schools to use where needed and helpful. Once available, the resource pack can be used/adapted/tailored accordingly by the Designated Safeguarding Leads to enable them to deliver annual refresher safeguarding and child protection training to staff (teaching and non-teaching), covering the legal and procedural framework for safeguarding pupils, effective multi-agency working practices and participation within Child Protection Conferences as well as Core Group Meetings.
- 4.20 Key school staff (Head Teachers, Designated Safeguarding Leads for safeguarding, Designated Governors and newly Qualified Teachers)

continued to have access to centralised training. Centralised training is delivered by Hilary Shaw (Tri Borough Safeguarding and Child Protection, Schools and Education) along with other select trainers to ensure that key staff continue to have access to relevant courses in order to remain totally up to date on statutory safeguarding matters and requirements. The training on offer are as follows:

- Safeguarding and Child Protection training for Designated Safeguarding Leads and Designated Governors.
- Safer Recruitment for Governors and Designated Safeguarding Leads and members of Senior Leadership Team.
- E-Safety for Designated Safeguarding Leads and Governors.

Multi-Agency Training (LSCB)

- 4.21 The LSCB offers a range of different training, in our mandatory category we have Introduction to Safeguarding Training (1/2 day) and Multi-Agency Safeguarding Training (1 day), through to specialist workshops on a variety of topics such as Child Sexual Exploitation, Domestic Abuse and Harmful Practices, as well as managerial training on Supervision and Safer Recruitment and Meet the LADO workshops.

Voluntary Sector Engagement

- 4.22 The LSCB trainer has worked closely with the LSCB Community Development Worker for Faith and Voluntary Sectors to promote increased take-up of multi-agency training by the voluntary and community sectors across all three boroughs. We promoted the LSCB training programme at the conference that the LSCB Community Development Officer led on in May 2014 and spoke with a range of participants about how accessible some of the LSCB training is to their workforce. Subsequently, further work was done to offer training on a range of days of the week and at different times, including twilight sessions and weekends in the 2015-2016 training programme.

Further Awareness Raising

- 4.23 Serious Case and other Reviews are carried out so that agencies and individuals can learn lessons to improve the way in which they work to safeguard and promote the welfare of children. The LSCB Learning Review Newsletter identifies key learning points which should inform our practice when working with vulnerable children and their families. The Newsletter is distributed to all Children's Services staff and also partner and voluntary agencies via the Hammersmith & Fulham Safeguarding Partnership Group.
- 4.24 Learning & Improvement Report brings together different sources of Quality Assurance data and information in order to provide a framework for learning about how effectively our practice and systems are working to support and protect children in Hammersmith & Fulham.

5. Activity Summary

- 5.1 Between 1st April 2014 and 31st March 2015, there were 1, 957 referrals to children's social care, which in turn led to 1,532 Child & Family Assessments being undertaken.

5.2 Where child protection concerns were identified 544 s47 investigations were undertaken. Where ongoing concerns were established this resulted in 199 Initial Child Protection Conferences (ICPC) being held within the period.

5.3 169 children were subject to child protection plans at 31st March 2015.

Referrals

5.4 Over the last three years there have been variations in the numbers of referrals received. An increase in 2012-13, a reduction in 2013-14 and increase in 2014-15. From the most recent published national data (2013-14) the Hammersmith & Fulham referral rate per 10,000 of the child population was higher than London and below the England rate.

5.5 Of the thirteen inner London boroughs Hammersmith & Fulham had the fourth highest rates. During 2014-15, 16.2% of referrals in Hammersmith & Fulham were re-referrals (within 12 months of the previous referral) this was the third highest of the of the thirteen inner London boroughs. Of our local and statistical neighbours only Kensington and Chelsea had higher re-referral rates.

	2012-13	2013-14	2014-15
LBHF Referral numbers	1881	1782	1957
LBHF Referral numbers per 10k	578.5	548.1	579.4
England Referral numbers per 10k	520.7	573.0	548.3
London Referral numbers per 10k	458.5	469.6	477.9
LBHF % Re-referrals within 12 months	17.2%	15.1%	16.2%

Local authority	2014-15 Rate per 10,000	2014-15 % within 12 months of a previous referral
Wandsworth	386.2	14.2
Westminster	411.4	8.7
Camden	470.3	15.8
Hammersmith and Fulham	579.4	16.2
Islington	634.8	12.4
Kensington and Chelsea	830.1	25.8

Assessments

5.6 Over the last three years there have been variations in the numbers of assessments completed with the highest numbers in 2014-15 and was the third highest of the London boroughs and above both the England and London rates. In comparison to our local and statistical neighbours only Islington had a higher rate of assessments.

	2012-13	2013-14	2014-15
Numbers	1603	1651	1892
Rate per 10,000 child population (LBHF)	481.4	497.3	560.1
England	N/A single assessments pilot	N/A single assessments pilot	475.2
London	N/A single	N/A single	442.3

	assessments pilot	assessments pilot	
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Local authority	2014-15 Rate per 10,000
Wandsworth	342.0
Westminster	369.8
Kensington and Chelsea	397.9
Camden	409.1
Hammersmith and Fulham	560.1
Islington	626.9

Strategy Discussions - S47's & ICPC

- 5.7 Where child protection concerns were identified 672 strategy discussions were completed during the period and this led to 544 Section 47 investigations. This is rate of S47's higher than the previous 2 years. Of the thirteen Inner London boroughs, the Hammersmith & Fulham rate of S47's was mid-range. Where ongoing concerns were established this resulted in 199 Initial Child Protection Conferences (ICPC) being held within the period. This is lower than in 2012-13 (219) but higher than the preceding 2 years.

S47 Investigations	2012-13	2013-14	2014-15
LBHF Number of Section 47 Investigations	517	501	544
LBHF Rate per 10,000 of child population	155	154	161.4
England	111.5	124.1	138.2
London	107	111.9	137.0

LBHF Number of ICPCs			
2011-12	2012-13	2013-14	2014-15
187	181	219	199

Child Protection

- 5.8 Child protection numbers increased year on year over the last three years and peaked at 194 in December 2014. Rates per 10,000 of the child population were higher than England and London. However, despite increasing numbers there were five Inner London boroughs with higher rates as at 31st March 2015. In relation to statistical neighbours only Camden had higher rates.

CP Numbers	2012-13	2013-14	2014-15
LBHF	142	161	169

CP numbers per 10,000 population	2012-13	2013-14	2014-15
LBHF	43.7	49.5	50.0
England	37.9	42.1	42.9
London	34.8	37.4	40.6

Local authority	CP Numbers per 10,000 children
Westminster	27.8
Wandsworth	32.3

Islington	43.7
Hammersmith and Fulham	50.0
Camden	51.2

CP plans last 2 or more years (of those ceasing)

- 5.9 Over the last three years there has been significant reductions in the rate of child protection plans ending which had a duration of 2 years, with rates now below both England and London and one of the lowest of the London boroughs.

CP plans last 2 or more years (of those ceasing)	2012-13	2013-14	2014-15
LBHF	13.2%	0.0%	2.2%
England	5.0%	2.6%	3.7%
London	7.0%	3.6%	4.4%

- 5.10 The end of year figures show that the majority of current CP plans had been open for 7-12 months. 76% of plans were had been open for 1 year or less. 2 plans remained open at the end of March. Those approaching the 2 year time frame are reviewed and monitored closely and where appropriate, conferences brought forward to end the plan.
- 5.11 All cases which have been subject to CP plan for 9 months plus are reviewed at the CP and Complex Cases Panel. This meeting also provides a multi-agency contribution to cases which are stuck or are complex and assists with the direction and planning of those cases. The panel is chaired jointly by the Head of Service, Family Support & Child Protection and the Service Manager, Safeguarding. Panel members are comprised of partners from Police, Health, CAMHS (when possible) Family Assist and more recently the Focus on Practice Clinical Lead. Cases are presented by Social Workers and team managers. Child Protection Advisors also attend in relation to cases where they chair the conferences.
- 5.12 This panel has been effective in identifying cases prior to conference where step down is a likely outcome as well as escalating those cases which are clearly not progressing, thereby preventing drift. The Impact of this panel can be seen in the successful reduction and sustaining of low numbers of cases approaching or going over 2 years on Child Protection Plan.

Proceedings

- 5.13 There has been a decline in the number of care applications issued in Hammersmith & Fulham over the last three years. During 2014-15 the median duration for care proceeding cases in LBHF was 29.5 weeks. This is marginally longer than the directive from the President of the Family Division that 60% - 70% of cases are to conclude in 26 weeks or less. However, reasons for delay included complex fact finding, split care planning for children, care proceedings running alongside criminal investigations and further testing of parents in the community.

2011/2012	2012/2013	2013/2014	2014/2015
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(Pre-pilot Year)	(Pilot Year)		
52	52	44 (70 children)	33 (51 children)

6. Themes

CP Numbers

- 6.1 Child protection numbers in H&F rose steadily and significantly between November 2013 (138) and February 2015 (192). This was substantially higher than the previous 2 years and considerably higher than our London neighbours.
- 6.2 In response to this significant rise in CP numbers the Service Manager, Safeguarding and Heads of Service worked together to try and understand why this had occurred. An audit of all ICPC's referrals, received during specific referral spikes, was undertaken by the Service Manager, Safeguarding and a threshold audit was completed by an external consultant. The Heads of Services were also engaged in analysing data, practice and possible influences in attempt to halt the trend. In December 2014 the Service Manager, Safeguarding completed a review and provided an analysis report which concluded that it was not possible to identify any one cause but that there were a number of influences which when combined resulted in higher numbers of CP plans.
- 6.3 Of those influences thresholds and key changes in staff – front line managers and child protection chairs were considered to be significant factors.
- 6.4 The number of plans ending was also low in comparison to previous years and suggested that the ending of plans was lagging. Analysis of RCPC's suggested that there was a need for a more robust application of the threshold criteria for CP plans. There was some evidence that cases were being maintained at CP status when there had been significant progress and where it was felt the case could be managed under a CIN framework.
- 6.5 During the period of high CP numbers strategies were identified and implemented to safely manage demands and reduce activity and it was predicted that with the ongoing implementation of strategies and a number of cases expected to reach their natural conclusion there would be a significant reduction in CP numbers by the end of March 2015.
- 6.6 At the end of March 2015 numbers had, as predicted, reduced to 169. With the downwards trajectory predicted to continue to a maintenance level of between 110 and 120.

Thresholds

- 6.7 On undertaking the CP numbers review it became apparent that there was an inconsistency in the thresholds being applied across the organisation. As a result a significant piece of work with Child Protection Advisors and front line managers was undertaken to establish consistency. The implementation of

the Strengthening Families Conference model has been significant in the application of thresholds as has Child Protection Advisors working closely with front line teams to provide safeguarding support and consultation.

- 6.8 Ensuring that our partners were brought along on this journey has been important. The Threshold of Need document has been circulated to all partner and third sector agencies and presentations have been delivered to support this in a variety of settings.

Quality of Plans

- 6.9 The quality of CP plans has been an issue for most authorities with concerns that they are too long; do not focus sufficiently on reducing risk; are too action focused and are overwhelming for parents. The implementation of the Strengthening Families conference model has brought this into greater focus and work has commenced to improve child protection plans in Hammersmith & Fulham.

Strengthening Families Conference Model

- 6.10 A child protection conference is held to consider information about children's circumstances, to decide whether they are suffering or likely to suffer significant harm and to make a plan to ensure they are safe and their welfare is promoted.
- 6.11 At Conferences information about the children and their parent's capacity to safely care for them within the context of wider family support and their environment, will be shared and analysed. Judgments will be made about the likelihood of children suffering significant harm in the future and decisions will be made about what action is needed to safeguard and promote their welfare.
- 6.12 The Strengthening Families approach is based on Signs of Safety model of practice originally developed by Steve Edwards and Andrew Turnell on 'Signs of Safety' (1999) and was implemented in Hammersmith & Fulham in September 2014.
- 6.13 The model seeks to strengthen risk assessment and maximise family participation, to improve outcomes for children. Further it assists all participants to be more engaged in the development and implementation of a Child Protection plan.
- 6.14 It requires professionals to be clear and concise in the way they gather and, present information and contribute to the conference. The overall aim is to ensure that parents, children and professionals are working positively together to ensure that the main aim is achieved, that is; the safety of children. The model brings this together into a format which maps the harm, danger, complicating factors, strengths and existing and required safety and informs the child protection intervention.
- 6.15 The approach is open and encourages transparent decision-making. Professionals have to be specific about their concerns for the child's safety and this encourages better presentation of evidence. Once set out, the risks

did not have to continually be revisited but are measured against the safety and protective factors that are identified.

- 6.16 It is consistent with developing clear, outcome, focused plans which are understood and owned by all parties. Plans are focused on outcomes that are specifically aimed at reducing risks rather than a list of actions.
- 6.17 At the conference the information shared is written up on a whiteboard under the relevant domains, by the Chair. This visual approach is helpful in highlighting the risks and safety and facilitates a better analysis of risk and harm.

Impact of the Strengthening Families Model

- 6.18 Since the implementation of the model we have noted a number of positive changes:
- Parent's understanding of the risks has improved and this impacts on their willingness to work with and engage with safeguarding plans
 - Parents say they are clearer about what is expected of them and receive more relevant support
 - Consistent thresholds have been easier to maintain
 - Children are no longer remaining subject to a CP plan longer than is necessary
 - Contributory factor in the reduction of CP numbers

Child Sexual Exploitation (CSE)

- 6.19 In Hammersmith & Fulham, a specific service for CSE has been in place since 2008. This has included the commissioning of a specialist service from Barnardo's and a multi-agency panel to oversee relevant cases.
- 6.20 A nominated Child Protection Adviser has an additional CSE Lead role, which during the year, has developed and expanded as awareness and expectations in relation to the identification and response to CSE has grown. The role includes chairing the CSE panel and CSE mapping meetings as well as providing specialist advice on individual cases. The CSE Lead also attends other relevant panels such as Tri-Borough MASE, Tri-Borough CSE data meetings, the Gangs Partnership and the YOS Deter panel, and this has led to the development of a strong and effective collaboration with services and partners.
- 6.21 This collaboration enables prompt and valuable information sharing which has facilitated the identification of potential victims and perpetrators, their profiles and networks and also locations of concern within the borough. A partnership with the West London Centre for Sexual Health has also been developed which has further enhanced our work regarding the identification of and response to CSE.

CSE Panel

- 6.22 The CSE panel is a multi-agency meeting chaired by the CSE lead and attended by the police, sexual health workers, Barnardos and Anti-Social Behaviour Unit. The panel is held on a monthly basis and using the risk

assessment tool considers new referrals, agrees plans and reviews actions and outcomes on previous cases. Based on the level of risk cases are categorised as Blue (vulnerable to CSE) or category 1, 2 or 3 (3 being the highest risk). Category Blue was introduced in 2014/15 to enable a wider degree of monitoring and tracking and provide evidence of preventative work.

Mapping Meetings

- 6.23 Mapping meetings were established in 2014 in response to a need identify links between persons of concern, their associates and victims. These meetings have become essential forums for intelligence sharing and we have been successful in identifying patterns and relationships. This information has been shared with MASE and this has in turn led to targeted interventions to disrupt offending activity, identified and protected vulnerable young people, the identification and naming of locations of concern and the exposure of a network of adolescents involved in peer on peer CSE.

Interventions

- 6.24 Hammersmith & Fulham has continued to offer a range of interventions and responses to victims of or those vulnerable to CSE. Barnardos and sexual health workers provide outreach support to young people and their parents/carers to reduce risks and vulnerabilities. CSE plans are developed with the lead practitioner working with the young person and form part of the wider planning and interventions.
- 6.25 The profile of CSE offending in Hammersmith & Fulham relates in the main to peer on peer abuse. Interventions to reduce such offending remains largely police led and is an area for development in Hammersmith & Fulham. There are very few resources available which target perpetrators of CSE, particularly those under 18, or those on the periphery of such behaviour. However, where opportunities to work with these young people exist, focused work is undertaken to address their behaviour with some success. Whilst community based resources are limited it should also be noted that as a result of strong information and intelligence sharing in Hammersmith & Fulham the police have been able to obtain a range of new Orders, which have successfully disrupted and prevented high profile individuals from re-offending.

Raising Awareness

- 6.26 Throughout 2014 – 2015 the CSE Lead has continued to raise the profile of CSE and increase the knowledge and understanding of Children's Services staff. The CSE Lead has provided "bite size" sessions for Family Services staff and training for foster carers has been developed in conjunction with Barnardos. The LSCB provides a range of courses available to all agencies including Barnardo's Be Wise to Sexual Exploitation training, a Girls, Gangs and Sexual Violence course, a course entitled Sexual Exploitation: identifying the needs and risks to children and an Advanced Skills Workshop for Supervisors on CSE. Barnardos continues to provide consultation and outreach support to schools within the borough.

CSE Case Examples

Case C – Victim

Concern

C is a 16 year old male of dual heritage of white / afro Caribbean who was living at home with his mother and three siblings. C was thrown out of the family home by mother because he is gay. He made a disclosure to family member that he had been raped by two males and during the workers engagement with C he disclosed that he met with an older male for sexual intercourse for which he was given £50 and a mobile phone. C further disclosed that he was using a sex app (on Social Media) where he met older males for sex and was receiving money and gifts in return. C was self-harming and had suicidal ideation. C was presented at MASE and deemed to be a CAT 2 risk. He was also and presented at the CSE panel where a plan of intervention was agreed.

Interventions

- Intense direct work with C was undertaken by the Family Assist Practitioner and Sexual Health Worker. As well as targeted CSE work C was provided with practical and emotional support around his emotional and mental health.
- Mediation between C's family and services.
- Mediation between C and his family.

Outcomes

- Risk of CSE reduced.
- C is no longer meeting older men and is no longer receiving gifts such as money and phones etc. from unknown men.
- C's awareness and understanding of safe and consensual sex has greatly improved, also the risks and dangers associated around unprotected sex.
- C's risk of STI's including high risk of HIV reduced.
- C's knowledge and awareness of risks and vulnerabilities has increased which includes his ability to identify and manage risky situations.
- C has returned home and relationships have improved with his family.
- C's mother's understanding of CSE has improved as well as her ability to manage and monitoring her son's mental health and general wellbeing.
- C is back in full time education and is in his second year of college.
- C's self-esteem and confidence has improved as have his physical and emotional health.
- There have been no further episodes of self-harm or disclosures of suicidal Ideation.

Case D – Perpetrator

Concern

D was involved in peer on peer CSE on victims across the three Boroughs with other well-known young people also involved in perpetrating CSE. As a result of direct allegations and his associations with high risk (CSE)

individuals D was discussed at the CSE Mapping Meeting and presented at MASE, where he was identified as a 'person of concern'. D was also involved in anti-social behaviour and known to YOS.

D's family have been involved with social care for non-attendance at school and inappropriate chastisement of the children. The family received input from the Early Help Services in relation to non-school attendance and the children were subject to CP plans under emotional abuse. As well as social work support the family received input from MST (Multi-Systemic Therapy) and the Family Coaching Service in relation to routines, boundaries and creating a stable home environment for both children.

Interventions

Targeted CSE work was undertaken with D by the social worker and mentor (family member).

Work focused on:

- The issue of consent – what it is and his understanding of consent regardless of the type of sexual act. The Social Worker was successful in engaging a male family member to act as a mentor and support the work around D's understanding of consent.
- Use of social media.
- The impact of engaging in anti-social and potential offending behaviour on his outcomes.
- The impact of his behaviours on others.

Outcomes

- D has not re-offended since the original concern came to light (just over 6 months)
- The work has been successful in developing D's understanding of consent and the impact his actions have on others
- D has developed aspirations and wants to go to university
- D has stated "he will not be going near woman until at least 65, as he does not want to prevent his chances to go to university.

Community and Voluntary Organisation Engagement

6.27 In May 2014 The Community Development Worker, in liaison with various voluntary and community organisations, coordinated an event to build links with local safeguarding leads and provide information and guidance on safeguarding issues. The event was organised around the requests and needs of the voluntary and faith organisations and focused on thresholds for safeguarding, the referral process and how concerns are managed by statutory services. The event was a great success and became a stepping stone to improved relationships with voluntary and community organisations. Following the event representatives from the umbrella organisations have become standing members of the Hammersmith & Fulham Safeguarding Partnership Group.

6.28 Together with the FGM Male Outreach Worker, The Community Development Worker has met with a group of Community Leaders from the Somalian Community and will continue to meet on a quarterly basis. The focus of these

meetings is to raise awareness around Safeguarding and provide support to them as an organisation. The work with Somali Community Group began in December 2014 and meetings have been held in Hammersmith and White City. Two work-shops on Safeguarding have also been held. A “Safeguarding Awareness Raising for Supplementary School Teachers” [including Mosques and Madrassas] was held in February 2015 and a further meeting with Somali mothers in the White City area was held at the end of March. The sessions were well received and participants will be going onto Safeguarding Level 1 Training. Safeguarding packs have been sent to all the known supplementary schools in Hammersmith & Fulham, including key safeguarding contacts. A Child Protection Advisor, who has a Faith & Culture Lead role, has supported the delivery of this work.

Management of Allegations Against Professionals – LADO

- 6.29 The LADO is responsible for managing all allegations against professionals in LBHF, who work with children or who are in a position of trust. The LADO provides specialist advice, support and consultation to all multi-agency service heads, chairs strategy meetings and oversees all investigation against professionals. The LADO also has responsibilities for safer recruitment.
- 6.30 Allegations against professionals are in the main managed locally by Hammersmith & Fulham Child Protection Advisors and overseen by the Shared Services LADO. The Service Manager, Safeguarding and the Safeguarding in Schools and Education Manager, also provide support to the management of allegations in Hammersmith & Fulham. In 2014-15 there were allegations 68 against professionals which related to both professionals and volunteers.

7. Work focus for 2015-16

- Improving the quality of child protection plans
- Continue to improve awareness, understanding and response to CSE
- Continue to strengthen the relationship between Children’s Services and local communities
- Exploring and developing alternative approaches to safeguarding adolescents at risk
- Embed learning and implement changes arising from Serious Case Reviews and other reviews to improve safeguarding.

7. EQUALITY IMPLICATIONS

- 7.1 All equalities issues (race gender, religion etc.) are taken into account when assessing and intervening in families - care is taken to ensure that children's needs are the paramount issue.

LOCAL GOVERNMENT ACT 2000 **LIST OF BACKGROUND PAPERS USED IN PREPARING THIS REPORT**

None.