

West Sussex Safeguarding Children Board

Annual Report **2016/17**

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Introduction by the Independent Chair

Elaine Coleridge Smith



I am pleased to present the West Sussex Safeguarding Children Board (WSSCB) 2016 – 2017 annual report.

This report is underpinned by the OfSTED inspection of services for children in need of help and protection; children looked after and care leavers (January 2016) in which both the West Sussex Children's Services and West Sussex Safeguarding Children Board (WSSCB) were judged to require improvement.

During the period of this report the West Sussex Safeguarding Children Board (WSSCB) has continued to carry out its statutory functions under Regulation 5 of the Local Safeguarding Children Boards Regulations 2006 to enable it to achieve its objectives under section 14 of the Children Act 2004 to:

- a) co-ordinate what is done by each person or body represented on the Board for the purposes of safeguarding and promoting the welfare of children in the area; and
- b) ensure the effectiveness of what is done by each such person or body for those purposes.

WSSCB and Partners have shown commitment to ensuring that the most vulnerable children and their families are supported. The engagement and quality of work across the partnership continues to develop, although links with schools needs to be strengthened in order to support the improvement journey being undertaken in West Sussex.

I would like to highlight three specific areas of work where partners have worked together to drive positive improvements and changes for children in West Sussex:

- **Child Sexual Exploitation** is now nationally recognised as a significant risk to the safety of children. West Sussex partners have worked well together and have developed robust services to better manage exploitation in its widest sense.
- **Integrated Prevention and Earliest Help (IPEH)** – The West Sussex Partnership Families Strategic Plan 2020 sets out detailed actions to redesign services into a model of prevention and earliest help which more effectively promotes and supports positive outcomes for children, young people and their families. West Sussex partners are all in agreement that Early Help is essential in protecting and safeguarding children.
- **The West Sussex Multi-Agency Safeguarding Hub (MASH)** is a multi-agency partnership established to significantly improve the sharing of information between agencies. MASH went live in April 2016.

This year's annual report provides you with insights into the journey of the child through the safeguarding system as well as an overview of activity against the WSSCB Business Plan priorities.

I hope you enjoy reading the report and find it an informative picture of Safeguarding across West Sussex. My thanks go to all the Chairs and members of the WSSCB groups and to all partners and practitioners within the children's workforce who work tirelessly to improve practice and protect children in West Sussex.



Elaine Coleridge Smith
Independent Chair, West Sussex
Safeguarding Children Board

Foreword

Introduction from Kim Curry Executive Director and Annie Maclver Director of Children and Families



As a new leadership team, having recently taken on oversight of the WSSCB, we join Elaine Coleridge Smith our former chair of the Board in welcoming the publication of the WSSCB 2016/17 annual report.

The content of this report provides an overview of the work of the Board and the safeguarding partnership in West Sussex. We are pleased to note that we are making good progress on the areas identified in the report that require improvement. These will be evidenced in the next Board report due for publication in November 2018.

The report outlines the achievements of and challenges for the West Sussex Safeguarding Partnership over the period. An ambitious approach to delivering early help through an integrated prevention and earliest help service (IPEH) has been implemented. The new service helps families to access advice, guidance and support at six "hubs" aligned to our district and borough areas. The West Sussex Healthy Child programme is also delivered through this new service.

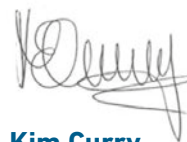
West Sussex Safeguarding Partnership's arrangements to address the safety and wellbeing of children and young people who are being exploited or at risk of being exploited, have been significantly strengthened. The report outlines the range of improvements made in order to identify and intervene with this vulnerable group of children and young people.

The launch of the Multi-agency Safeguarding Hub (MASH) also took place in the period covered by this report. As outlined, there have been some challenges in the first year of operation and specifically the permanent resourcing of key posts by safeguarding partner agencies.

We are pleased to say that these issues have largely been resolved with all partners committed to the MASH; domestic abuse services, the Local Authority Designated Officer (LADO) and housing officers are all now operating within the MASH.

In the coming year we are actively supporting the board in preparing for the implementation of the recommendations of the Wood Review and the new Working Together to Safeguard Children 2018 guidance. This will radically change the structure of the board, rationalising the membership so that the key safeguarding agencies are collaborating to achieve the best possible outcomes for children and families. The board priorities have been re-shaped and we are seeing early positive indications from new innovations. These include the 'Pause Practice' and the launch of the 'Mind of My Own' app both of which aim to make sure the voices of young people are at the heart of how we design services going forward.

Elaine Coleridge Smith Chair of the Board has left us as has Helen Donelan Board manager. We are pleased to welcome our new chair Lesley Walker and Board Manager Sally Kendal. We look forward to working together to continue to improve outcomes for our Children and Families in West Sussex



Kim Curry
Executive Director
Childrens, Adults, Families, Heath and Education



Annie Maclver
Director of Children and Family Services
Childrens, Adults, Families, Heath and Education

Introduction

The county of West Sussex sits on the south coast of England, bordering Hampshire, Surrey and East Sussex. The county covers an area of 768 square miles and is predominantly rural in character but with some large towns. West Sussex is made up of seven districts and operates under a two-tier system of local government.

The majority of the population lives in the four largest towns, Bognor Regis, Crawley, Horsham and Worthing, yet 42% of the county's resident population, and over half of its businesses are located in rural areas. 87% of the rural population live in small towns and villages, with 13% living in hamlets and dispersed farms and houses.

The population is estimated to be 836,250, with a child population of 170,439, accounting for 20.4% of the total population.

Further statistics and information on West Sussex can be found at [West Sussex Life](#) and [West Sussex JSNA](#).

'Future West Sussex' sets out the commitments and ambitions for the County, and the WSSCB is committed to support these plans.

One of the three priority outcomes concerns giving children the best start in life by:

- Improving physical and emotional wellbeing of children and their parents;
- Ensuring that families receive the support they need as early as possible with the aim of becoming resilient and self-sufficient;
- Keeping children safe and secure; and
- Making sure that children and young people are ready for school and work with good transitional support and are able to reach their potential, become active members of the community and contribute to the local economy.



About the West Sussex Safeguarding Children Board

The WSSCB is the partnership body responsible for co-ordinating and ensuring the effectiveness of the work of services in West Sussex to protect and promote the welfare of children.

The Board is made up of senior representatives from organisations in West Sussex with responsibility for keeping children safe.

We co-ordinate local work by:

- Delivering a multi-agency Business Plan, which outlines how we intend to tackle priority safeguarding issues together
- Developing robust policies and procedures
- Participating in the planning and commissioning of services for children in West Sussex
- Communicating the need to safeguard and promote the welfare of children and explaining how this can be done.

We ensure the effectiveness of local work by:

- Monitoring, scrutinising and challenging what is done by partner agencies to safeguard and promote the welfare of children
- Undertaking serious case reviews and other multi-agency case reviews, audits and qualitative reviews and sharing learning opportunities
- Collecting and analysing information about child deaths and putting in place procedures for ensuring that there is a co-ordinated response by the authority, Board partners and other relevant persons to an unexpected death
- Publishing an Annual Report on the effectiveness of local arrangements to safeguard and promote the welfare of children in West Sussex.



Following the 2016 Ofsted inspection findings WSSCB agreed an improvement plan introducing a number of significant changes. These include:

- A refreshed sub-group structure providing clarity of decision-making and accountability across the Board and its sub-groups
- A new Quality Assurance Framework to improve the Board's understanding of progress and impact, and ensure this informs the Board's priorities
- A new Learning and Development Framework to increase the level to which the voice of the child, their families, and those that work directly with them are heard across the Board
- A reconfigured WSSCB support team structure to provide targeted support to key areas of Board improvement, which are currently underway

Further information can be found on the [WSSCB website](http://www.westsussexscb.org.uk)

The journey of the child through the safeguarding system in West Sussex

Universal and Early Help

The West Sussex Partnership Families Strategic Plan 2020 sets out detailed actions to redesign services into a model of prevention and earliest help which more effectively promotes and supports positive outcomes for children, young people and their families.

During the period of this report considerable work has taken place to establish an **Integrated Prevention and Earliest Help (IPEH)** service.

IPEH is designed to provide preventative support to potentially vulnerable families and young people, as well as offering early interventions to support children and families in West Sussex. It combines a number of existing services - Early Childhood, Youth Services and Think Family, together with Worth Services (Domestic Abuse), Young Carers and the Healthy Child Programme which reflects the ambition of West Sussex to make access to early intervention easier, reducing escalation of need to the point where social care services are needed. The new service went live on the 1st April 2017.

What is working well?

- IPEH provision has been developed using the Healthy Child Programme (HCP) commissioned services¹ and IPEH Service commitments². The joining of these two key services provides a strong base for effective partnership work.
- Whilst IPEH is led by West Sussex County Council it is resourced and delivered by agencies from across the WSSCB partnership. More information on early help arrangements can be found on the [WSSC website](#).
- IPEH provides a progressive universal offer, open to all children and families, with elements of the offer that are more targeted and specialist.
- IPEH supports partners in the proactive identification of families who may need more intensive help for a period of time.
- The "Distance Travelled" Tool (DTT) is used to measure impact of interventions. For those families where two assessments have been completed, 82% of cases recorded in 2016-17 demonstrated measurable improvement in distance travelled scores.
- West Sussex schools continue to take the 'Lead worker' role for most Early Help plans, showing an 85% increase in 2016/17 from 634 to 1170. There has been a welcomed increase of 25% in the number of schools now involved in delivering these plans, with 232 schools leading on plans in 2016-17.
- During this period there was a positive increase in the number of Early Help Plans led by Health Visiting reflecting the early identification of issues that may otherwise have required a greater level of intervention.

¹ Service Specification for the provision of Healthy Child Programme (0-19/25 years) Services in West Sussex.

² Integrated Prevention and Earliest Help System - Towards transformation. A safe, connected and affordable offer that makes sense to children, young people and their families from 0-25 years.

What are we worried about?

- Governance arrangements in the local authority have been subject to review and scrutiny. This has led to the Start of Life Board not meeting as frequently as required to drive this multi-agency agenda.
- West Sussex partners face the ongoing pressure of increasing demand, high cost of statutory provision and reduction in government funding. This places financial strain on the system and can impact on early help services.

What do we want to see in 2017 – 2018?

- The establishment of one Integrated Prevention and Earliest Help Service including service redesign across the partnership and appropriate governance.
- WSSCB would like assurance that this work has led to an improvement in our ability to safeguard

children through the early identification of key areas of concern such as neglect, child sexual abuse and exploitation, mental health problems and living with domestic abuse.

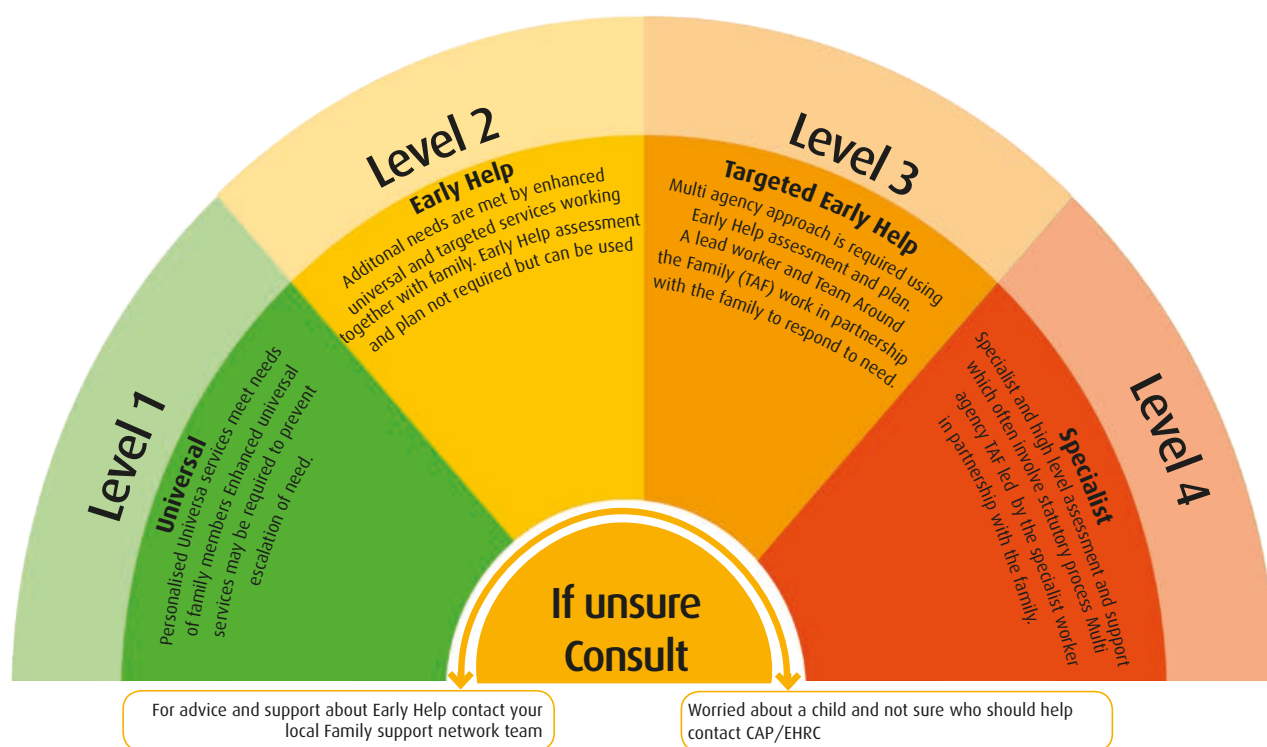
- In particular WSSCB would like to see evidence emerging of increased coherence in relationships and lines of communication across agencies and services, for example Adults Services, the Education Service, schools, districts and boroughs and voluntary organisations.
- WSSCB would like to receive robust assurance that the commissioning plans for
 - The extended 0-19 Public Health Community Nursing Service
 - The Family Nurse Partnership (FNP) as part of the Health Child Programme (HCP) and
 - the focus on the young parents' pathway beyond the immediate post-natal period are effective in achieving agreed outcomes, and that new structures, service changes and personnel changes are embedded in practice.





The West Sussex Multi-Agency Safeguarding Hub (MASH)

The West Sussex Multi-Agency Safeguarding Hub (MASH) is a multi-agency partnership established to significantly improve the sharing of information between agencies. The MASH is supported by the WSSCB partnership and staffed by representatives from West Sussex County Council, Sussex Police and Health. It acts as the 'front door' for safeguarding concerns about children. It represents a significant change to the way in which partners collectively manage and respond to concerns about children.



What is working well?

- The MASH is appropriately supporting vulnerable children using the WSSCB Continuum of Need document. The Continuum of Need document enables the MASH to make the most appropriate decision at the earliest opportunity and avoids a child/children being referred for more intensive intervention when it is unnecessary.
- During the period of this report MASH has received approximately 30,000 contacts, showing an increase on previous years.
- The number of children referred to Children's Social Care has also increased since the establishment of MASH to 478 per 10,000 child population bringing numbers above similar authorities at an average of 445 per 10,000.
- A review of MASH has been completed and demonstrated that thresholds are appropriately applied and effectively support timely decision making.
- Multi-Agency MASH audit findings show decision making on thresholds is appropriate and strategy meetings are timely and appropriate.
- During the last quarter of 2016-17, Sussex Community NHS Foundation Trust (SCFT) agreed to host-manage a specialist safeguarding nurse in the West Sussex MASH, along with 1 WTE admin support. This has further strengthened relationships between the WSSCB, SCFT and the CCGs and the local authority. By the end of the last quarter, both posts in West Sussex MASH had been recruited to and will be closely supported by the SCFT safeguarding team in the first quarter of 2017-18 and beyond.

What are we worried about?

- At the time of this report effective multi-agency performance management reports from the MASH have commenced. It is too early to assess the effectiveness of this model in safeguarding and protecting West Sussex children.
- The Health input into the MASH is currently delivered as a pilot provision. It is initially a 12 month pilot with additional funding from the CCGs. The pilot is being closely monitored by the Named Nurses from SCFT and the Designated Nurse from West Sussex, with the aim of securing further funding from the CCGs once the 12 month period is complete. The pilot will continue until the end of March 2018 and ongoing health resource has yet to be agreed by the CCGs.
- It continues to prove problematic to agree an appropriate Education representative in the MASH – this is seen as necessary to ensure relevant expertise and information from schools is shared.
- Access to a common IT system remains a challenge. The dedicated MASH individual's data (Mosaic) recording system, used by the local authority does not provide a common platform for all partners to use. This requires on-going exploration.
- A scoping activity found that in a significant number of cases, the family were not informed of the intention to contact MASH and their consent was not sought. In response WSSCB and early help training has been amended to provide increased focus on referral quality and consent.

What do we want to see in 2017 – 2018?

- The governance arrangements between the MASH operational and MASH strategic group need to be further developed.
- A robust performance data set needs to be in place, and used effectively by the strategic partnership.
- Currently WSSCB oversees the arrangements for effective delivery of MASH. This needs to be considered in line with other leadership decisions being considered in West Sussex.
- The review of business processes in MASH needs to be further enhanced by refining information sharing processes with partners.
- The investment into staffing and in the development of a dedicated MASH Mosaic recording system should effectively support efficient performance management across the partnership.
- Changes in administrative arrangements with CAPITA are due to be implemented in October. The anticipated improvement in practice should be shared with partners and WSSCB.
- The lack of involvement of teaching staff in the MASH must be addressed in 2017-18.
- The permanent health input into the MASH needs to be agreed by the CCGs.



Child Protection Services in West Sussex

Children in need and children suffering, or likely to suffer, significant harm

Under the 1989 and 2004 Children Acts, local authorities are responsible for safeguarding and promoting the welfare of all children and young people in their area. Their statutory functions include specific duties in relation to children in need and children suffering, or likely to suffer, significant harm. The Director of Children's Services and Lead Member for Children's Services in West Sussex hold professional and political accountability, with responsibility for the effective delivery of these functions.

Whilst West Sussex Children's Services are required to provide services for children in need for the purposes of safeguarding and promoting their welfare, local agencies, including the Police and Health services, also have a duty under section 11 of the Children Act 2004 to ensure that they consider the need to safeguard and promote the welfare of children when carrying out their functions. All schools, including independent schools, academies and free schools, have duties in relation to safeguarding and promoting the welfare of pupils, consistent with Keeping Children Safe in Education.

The number of children receiving services from social care teams at a Child in Need level has gradually risen during the last year. The rate per 10,000 child population has risen from 274 to 292; in actual terms a rise of 315 children. This is now above average when compared to similar authorities matched for need. The number of children with a disability receiving services in 2016-17 was 496.



Child Protection

The number of children subject of a Child Protection Plan in West Sussex rose in the last year from **25 to 34 per 10,000** child population. This brings West Sussex in line with similar authorities matched for need.

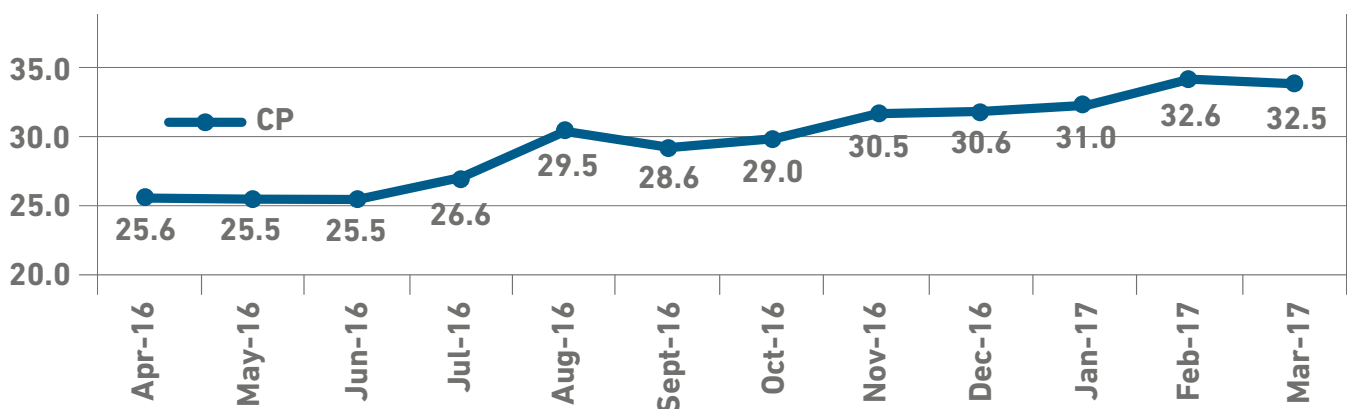
In West Sussex the dominant category for children becoming subject of a Child Protection Plan remains **neglect (318 children in May 2017)**. This is closely followed by **emotional harm (243 children in May 2017)**. Boys represent the greater cohort of children subject to Child Protection Plans in West Sussex, with 320 in May 2017; this is reflected nationally. The majority of children fall between the ages of 1-15 years, with the greatest cohort being the 1-9 year age group.

What is working well?

- Throughout the year focused effort to reduce the duration of Child in Need open cases has been successful.
- Generally Child Protection Plans last on average 18 months. There has been an increase from a very low level of plans lasting more than 2 years to the current number of 12. These children are robustly reviewed to identify if action is needed to escalate intervention.
- The majority (95% in May 2017) of Initial Child Protection Conferences (ICPC) were quorate, with at least three statutory agencies represented in each conference, allowing for a greater assessment and analysis of risk to children.
- Timeliness of Initial Child Protection Conferences has begun to improve, due to increased capacity and greater oversight and scrutiny by managers.
- Increased audit activity has focused on:
 - performance around action planning from conferences,
 - the involvement of GPs in conferences and
 - children becoming subject to a Child Protection Plan for a second or subsequent time.
 - The findings from these audits have been fed into learning and development forums such as WSSCB sub-groups and local authority manager and practitioner meetings.
- Sussex Community Foundation Trust has extended their computerised record system (SystemOne) to all their urgent care settings. Staff in these settings are now able to access information regarding children subject to a Child Protection Plan, and of the involvement of other services around the child.



Rate of Children on Child Protection Plan (per 10k 0-17 population)



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What are we worried about?

- Increase in activity levels has created significant workload pressures in social care teams. Partners ability to keep pace with rising demands at the same time as managing financial pressures will be seriously tested over the next year placing increased pressure on both statutory and universal services.
- The impact of changing pressures such as the continued increase in the number of Care Proceedings and the rise in Unaccompanied Asylum Seeking Children continues to be a challenge across the partnership.
- Completion of initial conferences in line with statutory timescales has been a significant problem in the last year due to capacity in the conferencing team and increased activity levels. Timescales are met in 52% of initial conferences and continues to improve.
- Sharing information with GPs remains a challenge. There are times when the notification of children being on a Child in Need plan are not being received expeditiously. This can result in GP's being unable to flag systems appropriately.

What do we want to see in 2017 – 2018?

- WSSCB would expect to see an increase in the use of the graded care tool where neglect is an issue to ensure core groups have an accurate picture of progress.
- WSSCB would expect to see an increase in the use of the DASH risk assessment tool where domestic abuse is an issue to assist ongoing risk assessment.
- The use of identification tools has been inconsistent, and WSSCB suggests that Child Protection Advisers (Chairs of Child Protection Conferences) monitor these supports and reports on improved use of tools by professionals.
- **2014 – 17 Children Looked After & Care Leavers strategy.** The partnership needs to improve communication regarding children on CPP and CIN plans to support appropriate information sharing. In particular a system needs to be in place to ensure that GP's are able to easily access this information.

Children Looked After

The **2014 –17 Children Looked After and Care Leavers strategy** describes how West Sussex will develop current arrangements for children looked after and care leavers at all stages of their care journey. Whenever safe and possible to achieve, West Sussex aim to keep families together and to minimise the number of children who need to be looked after. Partners want to ensure that the right support at the right time is in place for every child.

A 'Child Looked After' is a child or young person under the age of 18 who is being looked after by their local authority. They might be living:

- with foster parents;
- at home with their parents under the supervision of Children's Services;
- in residential children's homes; or
- other residential settings like schools or secure units.

The responsibility for meeting the needs of Children Looked After and Care Leavers or children at risk of coming into care rests with all areas of Children's Services, and partner agencies. All Members of West Sussex County Council have responsibility as corporate parents to ensure the wellbeing of our children in care, supported by all partners with statutory responsibility for services for children.

The numbers of children looked after in West Sussex have remained relatively stable in the last year showing an overall rise of 4%, from **640 at the end of 2015-16 to 666 at the end of 2016-17**. This increase has been driven in part by a rise in the number of Unaccompanied Asylum Seeking Children. The percentage of Children Looked after who are unaccompanied asylum seeking children has risen from 10% to 11.6%. At the end of 2015-16 there were 64 unaccompanied asylum seeking children, looked after in West Sussex, which rose to 77 at the end of 2016-17.



What is working well?

- WSSCB welcomes the focus on making timely decisions - particularly for younger children - so that they have the security of knowing where they will live safe from harm. This approach is reflected in the marked increase in numbers of children subject to child care proceedings.
- Reporting in the school self-assessment audit indicates that 75% of schools have a dedicated teacher to promote the educational achievement of Children Looked After.
- Children Looked After often require therapy for issues related to attachment or trauma. Changes to the way assessments are delivered mean that waiting time is minimal. Assessments are now available for a wider range of children and are carried out by a multidisciplinary panel that is better able to recommend the correct course of action from the outset.
- Work between statutory services and Barnardo's Charity ensures all unaccompanied asylum seeking children have a multi-agency plan at the earliest stage.
- Children Looked After are one of the key vulnerable groups likely to be affected by Child Sexual Exploitation (CSE). Partners have worked well together to improve procedures for responding to CSE cases and provide support and training for front line workers. Multi-agency arrangements have been put in place to oversee CSE planning including disruption activity against perpetrators. In September 2015, the 'Children Looked After and Care Leavers Strategy 2014-2017' was updated to reflect the need to fully address CSE and Female Genital Mutilation (FGM).

What are we worried about?

- There have been some improvements in the delivery of health care services and review health assessments have risen by 3.8% since the last reporting period, but further actions are required, including ensuring care leavers have easier access to their full health histories.
- Due to a new partnership resource over 95% of 'Strengths and Difficulties Questionnaires' (SDQs) are being completed. However, from a therapeutic viewpoint the scores provided for 'borderline cause for concern' and 'cause for concern' cases are above the national average and this needs to be explored to ensure that the right level of service is being provided.

What do we want to see in 2017 – 2018?

- Clinical Commissioning Groups (CCG's) should continue to work towards ensuring that statutory health requirements for Children Looked After are met and that each Child Looked After and Care Leaver has an up to date statutory health assessment and a plan that outlines how their physical and emotional health needs are to be met.
- Further development of the planning around long term placements is welcomed by WSSCB.
- Consideration should be given to inviting the Designated for Nurse for Children Looked After on the Corporate Parenting Panel to ensure a necessary 'Health' voice for this group of children.

Children Leaving Care

- The number of young people being offered support as care leavers has remained stable at 133 at the end of 2015-16, and 134 at the end of 2016-17. However the percentage of young people leaving care who are unaccompanied asylum seeking children has risen from 26% to 37%. At the end of 2015-16 there were 34 unaccompanied asylum seeking children leaving care, which rose to 49 at the end of 2016-17.
- For the period of this report there is currently no commissioned health service for care leavers in West Sussex meaning that Care Leavers do not receive advice and support from health services to enable the transition into adulthood.
- Health commissioners and WSCC should investigate how to develop a service for care leavers and ensure this service is provided.

Addressing our priorities through the WSSCB Business Plan 2016-19

The WSSCB 2016-19 Business Plan sets out the aspirations and plans to improve both the outcomes for children and young people in West Sussex and the quality of our support.

The priority areas identified in the 2016-19 Business plan for additional scrutiny and activity are:

Strategic priority 1:

The WSSCB improves the prevention and protection of children at risk of or experiencing **neglect**

Strategic priority 2:

The WSSCB improves the provision of **early help** to children

Strategic priority 3:

The WSSCB is effective in the prevention and protection of children from **exploitation and abuse**, including Child Sexual Exploitation, Missing Children, Trafficking, Digital Safeguarding, Female Genital Mutilation, Forced Marriage and Honour Based Abuse, Modern Slavery and radicalisation.

Strategic Priority 4:

The WSSCB ensures improvements in children's **emotional wellbeing and mental health** in West Sussex

Neglect

Working Together to Safeguard Children 2015

defines neglect as: 'The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development.'

For most children and young people West Sussex is a good place to grow up – children and young people are safe, well educated, experience good health and have good leisure and employment opportunities. However, there are groups of West Sussex children and young people who experience poorer outcomes because of abuse or neglect. The Department for Education 2015–16 Child in Need census showed that nationally abuse or neglect are the most common primary needs at assessment for children in need. **At any one time, an estimated 1,175 under 5's in West Sussex are in need of support from social services. West Sussex JSNA.**

In the 2016-19 Business Plan the WSSCB committed to tackling the roots and causes of neglect as well as the instances of neglect arising in individual families. This is a considerable challenge and requires us to honestly reflect on the effectiveness of our work and commit to those changes and improvements that need to be made.

What is working well?

- This year has seen strong partnership involvement in the efforts to tackle neglect across West Sussex. Work was led by a task and finish group chaired by a representative from Sussex Community NHS Foundation Trust.
- In 2016-17 the WSSCB produced the West Sussex **Neglect Strategy** which outlined our aims in tackling neglect:
 - The WSSCB actively monitors, promotes, co-ordinates and evaluates the work of its statutory partners and stakeholders that help and protect children at risk of neglect
 - Children experiencing neglect are identified, supported and have improved outcomes
 - Partnership Leaders understand the experiences of children living with neglect who live in West Sussex and take effective action to ensure help and support is available to them
- Throughout 2016-17 actions were put in place in support of the strategy, including:
 - Promoting the use of **Howe's four definitions of neglect** in order to build a common language across the workforce.
 - Consultation has taken place across the multi-agency workforce to inform understanding of professionals' training and support needs. This has led to a new approach to WSSCB multi-agency neglect training, which is now delivered by representatives from local health organisations.
 - Single agency neglect training has been prioritised by organisations across the partnership including WSCC, Health organisations (including GPs), Kent Surrey and Sussex CRC and voluntary providers such as Care Grow Live.

What are we worried about?

- There is a lack of consistency in the use of 'assessment tools' across the partnership. Both the Graded Care Profile for social care teams and the early help neglect assessment tool (NIMT) are endorsed by the WSSCB.
- The WSSCB is concerned to better understand how thresholds for neglect are applied to children with disabilities in West Sussex.
- The WSSCB is concerned to better understand how our partner organisations in the adult sector respond to the needs of children whose parents are struggling with issues such as offending, domestic abuse, substance misuse and mental health issues.

What do we want to see in 2017 – 2018?

- Work is underway to better understand the prevalence of neglect in West Sussex, and build a more robust picture of our effectiveness in tackling it. This includes improving the recording of neglect across case management systems and making better use of the Joint Strategic Needs Assessment (JSNA) data.
- The WSSCB will scrutinise and audit the effectiveness of the new IPEH service in delivering a positive impact on the outcomes of children experiencing neglect.
- The WSSCB will scrutinise and audit the effectiveness of the updated version of the NIMT - due to be agreed in Autumn 2017.

Exploitation

The West Sussex Safeguarding Children's Board recognises that children are vulnerable to exploitation in a number of ways and in order to work effectively together we need to ensure that we coordinate the multiagency activity focused on the various ways that vulnerable children may be being exploited in West Sussex.

The WSSCB Exploitation Strategy draws together shared partnership objectives and priorities to address the following forms of exploitation:

- Child Sexual Exploitation (CSE)
- Missing and absent children.
- Children in or at risk of Harmful Practices including Female Genital Mutilation (FGM), a Mandatory reporting duty was placed on regulated health and social care professionals and teachers in England and Wales to ensure that 'known' cases of FGM in under 18s were reported, Forced Marriage and Honour Based Abuse.
- Modern Slavery (including domestic servitude and labour exploitation).
- Trafficked Children.
- Radicalisation (both in terms of general religious, political or ideological extremism and those at risk of being drawn into terrorism).

In 2016-17 the WSSCB established the Exploitation sub-group to develop and lead on a strategy to tackle CSE and Children Missing, Harmful Practices (including FGM, Forced Marriage and Honour Based Abuse) and trafficking / Modern Slavery.

What is working well?

- Local profiles of children missing and those at risk of child sexual exploitation and female genital mutilation have been developed and are better understood by partners.
- ImKaan, an organisation dedicated to addressing violence against Black and Minority Ethnic (BME) women and girls engage with over 100 professionals from a broad range of organisations and provided WSSCB with a better understanding of prevalence, community resources and service responses to FGM across West Sussex.
- In August 2016 a Pan Sussex Harmful Practices Strategic Assessment was undertaken by Sussex Police. This aimed to determine the current nature and extent of harmful practices with Sussex. Learning from the strategic assessment has informed the strategic work of the WSSCB Exploitation group.

What are we worried about?

- The report highlighted the need for increased community awareness and for the development of responses in partnership with local community and voluntary sector groups.
- Whilst National NHS reporting indicates a low prevalence of FGM in West Sussex we remain concerned by our abilities to identify children at risk of being subjected to, or who have been subjected to, FGM.

What do we want to see in 2017 – 2018?

- The FGM work stream should progress this work as part of the broader West Sussex Community Safety work, with scrutiny from the WSSCB Exploitation group.
- Police, Health and local authority services should continue to work together to improve our identification of children at risk of being subjected to, or who have been subjected to, FGM.

Child Sexual Exploitation and Children missing

Child Sexual Exploitation (CSE) is a form of Child Sexual Abuse (CSA). It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim wants or needs, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. CSE does not always involve physical contact; it can also occur through the use of technology.

In April 2017, 96 West Sussex children were identified as at high, medium or low risk of CSE. 22% of these were boys.

What is working well?

- The WSSCB Exploitation sub-group has led the work to develop, and monitor the effectiveness of a new multi-agency exploitation strategy.
- Alongside this updated policies and procedures have been put in place to ensure the workforce understand how to deliver best practice in tackling CSE.
- A multi-agency Missing and Exploitation operational group leads on the effectiveness of operational activity, with a governance structure surrounding it to strengthen the work to ensure a robust response to any exploitation of children and young people in West Sussex.

- An updated CSE screening tool and risk assessment has been developed and disseminated to partner agencies.
- A participation group to inform future service planning has been established. This group is made up of young people aged 14-16 who have been identified at risk of CSE and have completed the “Real Love Rocks” programme.
- A programme of quarterly multi-agency auditing is in place to identify progress made and any ongoing or new themes for improvement. Audits have identified some improvements for recording and sharing of information that are being taken forward in practice improvement work.
- CSE leads have been identified in all CCG commissioned Health organisations in West Sussex and work closely with the specialist CSE Nurse who has been in post since August 2016. The Healthy Child Programme includes a newly established Healthy Futures team which will work with the most vulnerable children and young people, including those at risk of or experiencing CSE.
- Training and practice improvement programmes have been put in place across partner agencies, including Early Help, Children’s Social Care, Police, and Health organisations. The WSSCB multi-agency CSE training has been expanded to ensure it reaches more frontline staff.
- Targeted activities have included:
 - a drama performance delivered throughout 2015-17 to more than 21,000 West Sussex pupils to explore the realities of sexual exploitation called ‘Chelsea’s Choice’;
 - the development and sharing of a range of information for parents and carers about CSE (including information leaflets, spotting the signs posters and online safety guides);
 - video blogs with young people about healthy relationships and consent;
 - a County Council pledge to tackle CSE with partners by developing innovative pilots such as training licensed taxi drivers and hotel owners in the signs of sexual exploitation, and
 - delivering community based activity for staff who don’t work directly with children and young people, including those within the night time economy.
- Staff involved in the Police investigation and conviction of the perpetrators in SCR Key were awarded a certificate of merit by Sussex Police services in recognition of their partnership working.
- The West Sussex Foundation Hospitals Trust Sexual Health team developed an innovative pathway for those children identified as being in need of sexual health support during the police investigation alongside SCR Key.

What are we worried about?

- **Serious Case Review Key** looked into a case of child sexual exploitation which culminated in prosecutions against two men for charges including rape, sexual assault and sexual activity with a child, carried out against twelve girls aged between 13 and 15 at the time of the offences. The review sought to understand the strengths and weaknesses of the professional response and activity following the identification of children potentially at risk of, or being exposed to, sexual exploitation.
- The review reinforced the need for ongoing vigilance, education and support for both the public and staff. See the **WSSCB response** for more information.
- Monitoring of return home interviews for children who go missing, provided by Missing People Charity presents continued challenge in achieving engagement with all children. Children who go missing from home or care have a follow up meeting with their social worker.
- The CSE Specialist nurse is currently funded until the end of March 2018. The funding for a substantive post has yet to be agreed by the CCGs.

What do we want to see in 2017 – 2018?

- There will be a statutory requirement for schools to introduce Relationships and Sex Education into the curriculum and will focus on building resilience. Work is underway in advance of this in West Sussex to develop a robust RSE offer that will support children and young people to be resilient and to have healthy relationships.
- The multi-agency work focused on children who go missing must continue to explore ways of increasing engagement in Return to Home interviews and evidencing the work that is undertaken to decrease risk during missing episodes. This will be monitored through the WSSCB scrutiny process.

Emotional wellbeing and mental health

In 2016-17 the children and young people's mental health and emotional wellbeing commissioners worked jointly across West Sussex CC and the three NHS clinical commissioning groups (CCGs) to plan, agree and quality assure mental health and emotional and wellbeing services for children up to the age of 18.



The work we have been doing in the group has really started to improve services. We feel listened to and that our opinions are always heard.

FREE YOUR MIND MEMBER, 17



What is working well?

- A transformation plan was developed, with direct input from young people through the "Free Your Mind" action group. In 2016 a "Free Your Mind" convention was attended by over 50 young people and commissioning and service leads in order to identify improvements to services for users. "Free Your Mind" action group members also received training to enable them to play a formal role in procurement of support services.
- The "Think Family Key Worker Service" (IPEH) have an embedded CAMHS professional within the team.
- Specialist mental health workers based in Accident and Emergency departments in Chichester and Worthing gave immediate support to over 200 children in crisis over 2016-17. Children attending the emergency departments as the result of suicide attempts, self-harm or with other underlying mental health issues, receive prompt and appropriate support from the CAMHS liaison staff provided by Sussex Partnership Foundation Trust.
- A network of named emotional wellbeing leads has been established, with leads in every secondary school in the county. For schools it means that there is a single point of expertise, knowledge and resources to help inform the curriculum and support colleagues to identify issues and access other services as appropriate.
- The Youth Emotional Support (YES) service helps young people aged 11-18 with a wide range of emotional wellbeing issues, from low mood and anxiety to anger, confidence and relationship difficulties. It helps young people to make positive choices and build resilience.

What are we worried about?

- In 2017 the WSSCB Quality Assurance (QA) group reviewed the data available to us from the local authority and Health agencies in relation to self-harm. The QA group identified that available data did not provide us with sufficient understanding of the nature and prevalence of self-harm in West Sussex, or of the effectiveness of agency response. In 2017-18 we will begin our improvement work with an audit to examine the multi-agency recognition, response and organisational efficacy in relation to adolescent self-harm.

- Attendance to hospital by children with mental health issues has increased over the last year with a similar number of attendances of young people with deliberate self-harm (DSH) being seen at Western Sussex Hospital Foundation Trust (WSHFT) sites. This increase in demand has challenged the quality of the service delivered for young people who present to WSHFT with mental health issues.
- There is limited support available for children and young people out of hours at the weekends.

What do we want to see in 2017 – 2018?

- As part of integrated Healthy Child Programme delivery for the school age population, public health nursing teams will lead the development and delivery of universal (tier 1) and more targeted (up to tier 2) approaches to developing resilience and emotional wellbeing. This will include the use of data profiles to identify young people at risk of poor emotional health, a differentiated support offer to schools and out of school settings, universal health questionnaires in years 5, 7 and 10 to identify those young people requiring support, and support for schools to develop whole school approaches to emotional health and wellbeing.
- Capacity of the CAMHS Accident and Emergency liaison service and community youth emotional support and therapeutic services in the community are the subject of discussion between Sussex Partnership Foundation Trust and their commissioners, and will be the subject of scrutiny the WSSCB in 2017-18.
- Consideration of provision of services for children and young people out of hours at the weekends.

“ Previously there was a gap in what GPs could offer young people who had difficulties around their emotional well-being if they were not of a level that needed CAMHS. YES has made a real difference, providing an accessible service to meet young people’s needs and coordinate across other services and agencies”

WEST SUSSEX GP

“ YES has changed the way I think and feel about things and helped me control my anxieties.”

MALE, 17



Domestic Abuse

The Domestic Abuse (DA) service is a partnership service that is delivered through the Multi Agency Safeguarding Hub and the 6 IPEH Hubs. The team identifies, assesses and shares professional advice, information and support to victims of domestic and/or sexual abuse and their families. The DA hub in MASH provides advice around thresholds and required action on DA cases.

What is working well?

- The specialist Young Peoples team work directly with young people who have experienced DA, and also offer consultation, tools and training to other professionals enabling them to provide that support.
- The team in the IPEH hubs work directly with clients and their families who have experienced domestic abuse/sexual assault to ensure they receive the service, information and support that they require including the provision of practical intervention where appropriate, remembering that each family will have individual needs.
- Sussex Community Foundation Trust Safeguarding Children team now undertake the triaging of Police SCARFs (Single Combined Assessment of Risk Form), completed by Sussex Police officers where there are concerns regarding vulnerable adults or children. This is a significant step forward in enabling professionals to work more safely and effectively for the welfare of children, their families and in keeping staff safe.
- SCARFs are shared with both Health Visiting and School Nursing colleagues who are then able to reassess their ongoing care plans and make changes where necessary to ensure the voice of the child continues to be heard.
- Over 1768 SCARFs were triaged since implementation in September 2016.
- Questions about domestic abuse are included as part of the 5 mandated Health Care Professional (HCP) reviews (antenatal, post-natal, 6-8 weeks, 1 year and 2 year). Uptake of these reviews varies and is monitored as part of the performance of the HCP contract.

What do we want to see in 2017 – 2018?

- Relationships and sex education will become a statutory requirement in schools in September 2018 and will have a focus on building resilience and identifying factors in healthy relationships. WSSCB would like to see this work prioritised.

Safeguarding in Education

With over 300 schools and colleges in West Sussex, education providers hold a significant role in supporting children and their families at all stages of the journey of the child. School staff may be the professionals who see the child the most and know them best, and are integral to keeping children safe.

In July 2016 the Safeguarding in Education (SIE) function moved to WSSCC Education and Skills. This allowed for increased capacity across the Safeguarding in Education (SiE) work stream.

266 schools and further education settings submitted the self-assessment return, including maintained schools, academies, independent and free schools. The survey enables schools to self-assess their provision against Safeguarding in Education national guidance and statutory expectations. Returns showed a good level of adherence across schools, with 95% of responding schools reporting that staff are regularly updated with new safeguarding developments and guidance, and 86% reporting that staff have access to the latest guidance on thresholds of need and referral criteria and procedures.

The SiE team supply training to all school designated safeguarding leads (DSLs) in line with the statutory requirement that all school DSL's should be trained once every two years. During this period over 400 school DSLs have been trained.

Approximately 200 school governors have been trained in their role of holding the school to account in respect of safeguarding. Additionally the SiE team have produced a booklet to assist governors in this area.

What do we want to see in 2017 – 2018?

- Completion of West Sussex schools safeguarding self-assessment audit by the SiE team. This is due to be carried out again 2017-18.
- A stronger relationship between WSSCB, schools and school leaders to further strengthen the safeguarding agenda across West Sussex.

Designated Doctor Arrangements

The Designated Doctor for Safeguarding children is a statutory post employed to provide advice to the CCGs as a clinical expert and to take a strategic, professional lead on all aspects of the health service contribution to safeguarding children across the area. The role provides support to the Named Doctors in each provider Trust. The previous gap in provision for this post in West Sussex has now been addressed and under new arrangements there is a shared agreement of 3 days per week across West Sussex and Brighton and Hove.

Learning from Serious Case Reviews

A statutory function of Local Safeguarding Children Boards is to undertake reviews where:

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

During the period of this report five Serious Case Reviews (SCRs) were undertaken in West Sussex. This represents an increase on previous years. It is anticipated that all five SCRs will be published in 2017-18.

The SCR process is one of continuous learning and improvement overseen by an independent reviewer. All agencies involved in the care of the child identify learning and implement actions plans. These are monitored by the WSSCB sub-groups. SCRs are published and can be viewed on the [WSSCB website](#).

A number of themes and areas for learning have emerged from previous and current SCRs. These include:

Strategy meetings:

- The WSSCB undertook an audit to measure improvements in **partner involvement and attendance at strategy meetings**, following the recommendations from SCR John in 2014. The findings highlighted that there is a need to ensure the systems in place across agencies actively promote attendance by all key partners.
- A WSSCB action plan is in place to take these changes forward and a further audit is planned in autumn 2017 to measure improvement.

- Good **multi-agency participation at strategy meetings in the MASH** is supported by technology enabling workers to dial-in. The challenge is now to extend this capability to strategy meetings taking place outside of the MASH.
- Identifying and facilitating the attendance of the most **appropriate health professional** remains a challenge. In 2017-18 NHS safeguarding professionals across health organisations will continue to work in partnership with WSCC Children's Social Care to achieve a solution.

Escalation:

- SCR and audit activity, as well as practice feedback have highlighted that many professionals do not feel confident or know how to escalate concerns in situations where they feel a decision made around a child is not in that child's best interest. The WSSCB undertook to develop and promote a local **escalation policy**. This was disseminated across agencies, and the WSSCB are monitoring its use. Ensuring capacity to manage the significant workload generated by SCRs in a timely way has been a challenge for agencies.

Responding to underage sexual activity:

- Learning has indicated that professionals are not always clear on the correct response, outlined in the **Pan-Sussex procedures**, to underage sexual activity. Professionals working with children are expected to consider, in every case of sexual activity involving a child aged 13 to 15, whether there should be a discussion with other agencies and whether a referral should be made to Children's Social Care. A referral to Children's Social Care or the Police should always be made in cases involving children aged less than 13.
- In response, partner agencies including the Police, the local authority and Health organisations have now reinforced practice expectations across their workforce, and included relevant messaging in their single agency training. Relevant messaging is also now included in WSSCB multi-agency training.
- Additionally the WSSCB is overseeing an active area of work regarding the issue of consent in relation to children aged 16 and over, with the aim of improving our understanding and work with children in this age group who are being exploited by others.

Reflecting on professional pre-conceptions:

- Learning identified that pre-conceived attitudes from professionals around deprivation and affluence can act as barriers to building positive, professional relationships with young people and their families. For example, professionals' attitudes to and expectations for, young people, can vary according to where young people live.
- In response to this the WSSCB has updated all training to support practitioners to reflect on their pre-conceived attitudes.

Peer on Peer abuse:

- In 2016 the WSSCB Quality Assurance (QA) group tested learning from [SCR John](#) and delivered a staff consultation to identify knowledge and understanding of the procedures in relation to **children who harm other children**, including **children who present with sexually harmful behaviours**. The results showed that work to promote the procedures had been effective, with 85% of those surveyed knowing where to find the relevant procedures online and 87% knowing what action to take if faced with a situation where a child was abusing another child.

Child Death Overview Panel (CDOP)

The purpose of the **child death review** process is to learn lessons from child deaths in order to understand why some children die and, wherever possible, put in place interventions to prevent future deaths and to make a wider contribution to the wellbeing of children and young people.

Child death notifications in 2016-2017

Between 1st April 2016 and 31st March 2017 there were 28 deaths of children aged under 18 years notified to the West Sussex Child Death Overview Panel (CDOP). This is a 61% drop in numbers compared to the previous year. Of the 28 deaths notified to the CDOP:

- There were 9 male deaths and 19 female deaths. This differs from the overall gender distribution of young people in West Sussex where there is estimated to be just under 6000 more males than females in the 0-17 age group.
- There were 9 neonates (infants who die before reaching 28 days of age).
- A further 10 deaths occurred between a month and a year of age.

- There were 16 deaths classified as expected and 12 classified as unexpected (deaths that were not anticipated as a significant possibility 24 hours before death or where there was an unexpected collapse leading to or precipitating the events that led to the death).

The work of CDOP in 2016-2017

This year Panel members have been working closely with the West Sussex Coroner to help raise awareness of the following:

- Risks associated with the design of a particular crib, following the death of a West Sussex child. This has contributed to the crib being redesigned and modifications being made to existing second-hand cribs in circulation. Practitioners working closely with families in the community have been briefed on the risks and what to look out for and what to advise parents if one of these cribs is found in use.
- The potential risks of nappy sacks to babies were highlighted following deaths of children in other areas of the UK. A national stakeholder project was established, including manufacturers and retailers of these products, to change the way nappy sacks are packaged and to tighten quality controls so that future deaths may be prevented. The West Sussex CDOP Coordinator and West Sussex Trading Standards are also participating in this project.
- Safer Sleeping training is now delivered as part of the LSCB training and development calendar.
- Following the allergy related death of a West Sussex child whilst on holiday abroad, the WSSCB has promoted the use of allergy cards. These cards, available in a variety of languages, are intended to be used by families when travelling abroad to explain the allergy in the language of the country they are travelling in, in order to reduce the risk of accidental exposure to substances that their children are allergic to.

The specialist nurse supporting CDOP continues to provide support to bereaved families, mainly those who have had children who died unexpectedly. The specialist nurse has established a strong working relationship with Chestnut Tree Hospice and worked with them on a bereaved parents' support day in July 2016.

We are very pleased to report that the Specialist Nurse supporting CDOP, Annette Lawrence-Owen was awarded the prestigious title of Queen's Nurse in 2016, which recognises "continuing commitment to improving standards of care in the community and to learning and leadership".



Local Authority Designated Officer (LADO)

In West Sussex the Allegations Management Team and LADO function is made up of one full time LADO and one full time Assistant LADO. The Local Authority Designated Officer (LADO) oversees the allegations management process, providing consultation and advice to ensure that the response is consistent, reasonable, proportionate and in line with statutory requirements.

Allegations Management procedures are applied when an allegation or concern regarding a person working or volunteering with a child is reported and meets one of the below criteria:

- Behaved in a way that has harmed a child, or may have harmed a child
- Possibly committed a criminal offence against or related to a child; or
- Behaved towards a child or children in a way that indicates they may pose a risk to children.

Between April 2016 and March 2017 there were 131 allegations recorded against the children's workforce in West Sussex. The team has additionally managed 191 consultations during this period. Consultations, in the main, relate to employee conduct and practice issues that fall below the threshold for recording an allegation.

The largest proportion of referrals, consistent with previous years come from education and the largest proportion of allegations relate to physical harm (51%). This is not surprising given the size of the education workforce with nearly 300 schools in West Sussex. The second highest referrer group, again in line with the size of the sector, is residential providers. Of this group 72% of referrals come from independent residential providers.

Co-location within the MASH has enabled LADO participation at Strategy Meetings and this continues to have a positive impact on the quality of discussions as well as the development of professional relationships with partners.

Non-reporting of which incidents continue to be a concern and the WSSCB will work to raise further awareness of the LADO function in 2017-18.

WSSCB Training

WSSCB believes that there should be a culture of continuous learning and improvement across the West Sussex organisations that work together to safeguard and promote the welfare of children.

Professionals and organisations protecting children need to reflect on the quality of their services, learn from their own practice and that of others and identify opportunities to draw on what works and promote good practice.

What is working well?

- WSSCB offer online **training courses** which provide a basic introduction to a range of safeguarding topics.
- WSSCB also provide face to face training which is more detailed, building on the learner's existing knowledge and enabling a multi-agency learning environment. These range from general safeguarding through to specialist topics.
- Courses are run in a range of venues across the county to enable accessibility for all.
- 2016-17 saw significant improvements in the WSSCB training offer as a result of the recruitment of a permanent training lead in June 2016.
- This year saw the phasing out of the use of external training consultants in training delivery. Their use was replaced by the development and implementation of a pool of subject experts supported by health organisations, Police and the Health and local authority. The LSCB business team continue to deliver the majority of the courses on offer. This approach has significantly reduced costs.
- The WSSCB evaluates the impact of training on practice through conversations with practitioners three months after they have attended targeted training courses. In 2016-17 89% of attendees told us that WSSCB training had increased their knowledge and skills. 70%

reported increased levels of confidence in relation to the relevant area of safeguarding

- The WSSCB training manager has been testing alternative approaches to evaluation which require significantly less input and provide improved results – such as staff surveys.
- Following previous challenge, Sussex Community NHS Foundation Trust confirmed that the Level 1 and 2 safeguarding training is now included on their statutory and mandatory training programme. This move has had a positive effect in terms of greatly increasing compliance across the Trust compared to last year and also decreasing the number of separate training days staff need to attend.
- Since May 2016 over 750 professionals working with children, including GPs, Social workers, teacher and police officers have received training to increase their skills and confidence to identify and support children experiencing mental health and emotional wellbeing issues. The training is funded by commissioners and led by Coastal West Sussex Mind, in partnership with Grassroots Suicide prevention, YMCA Downlink groups and other subject experts. Over 75 open and in-house courses have already been offered covering 20 different topics including developing resilience, suicide intervention, bereavement and loss and self-harm. The new programme is funded until May 2018 and new courses are continually added in response to need.



The trainer was intelligent and practical and had a high level of knowledge and enthusiasm about her subject. The best safeguarding training I have ever been on.

**FEEDBACK ON WORKING TOGETHER
TO SAFEGUARD CHILDREN**

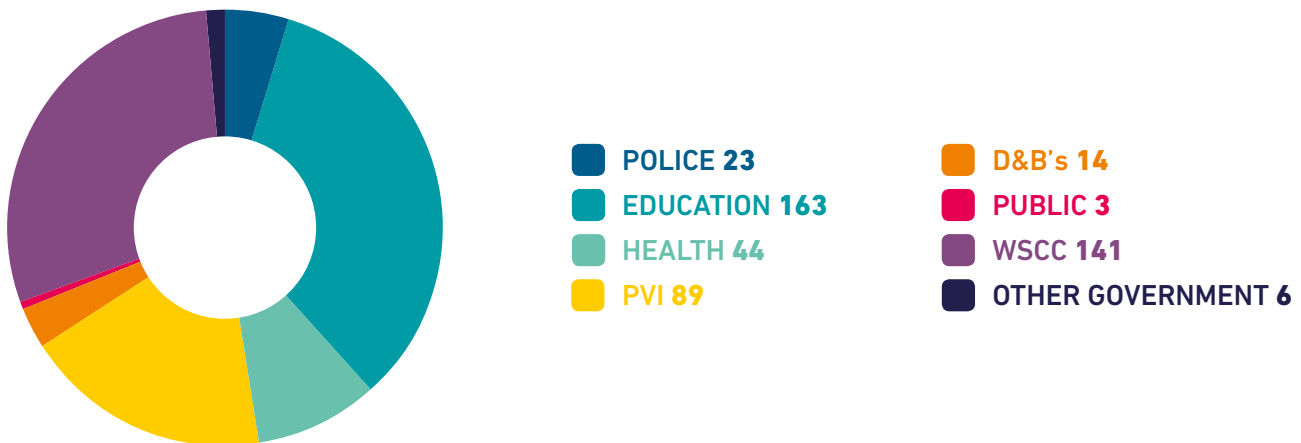




Neglect is a difficult subject to identify and evidence, this was recognised within the training. It was helpful to focus on the impact on children of all ages



Course attendance by agency in 2016-17



What are we worried about?

- The reliance on other providers may impact on the consistency of important key messages given across West Sussex.
- It is difficult to find capacity to carry out robust evaluation of the effectiveness of learning however the WSSCB manager is looking at mechanisms for quality assuring the training delivery.
- WSSCB is concerned that some key training courses including Child Protection Conferences and Core Group Training continue to have low attendance from across the partnership.
- In July 2016 a Training Needs Analysis (TNA) was sent to all key WSSCB partner agencies. Gaps in agency responses meant that we lacked a complete picture of training needs across the workforce. This was addressed in preparation for developing our training offer in 2017-18.
- Single agency training is difficult to scrutinise for effectiveness and WSSCB relies on reporting from partner agencies. Sussex Community NHS Foundation Trust has shared valuable information through their annual report.



Involvement with learners... structured well, allowing input and opinions of others. I felt the approach and structure used worked very well to keep learners intrigued and interested.

FEEDBACK ON WORKING TOGETHER TO SAFEGUARD CHILDREN



I feel more knowledgeable about escalation.

I have refreshed confidence



Conclusion

Throughout the period of this report, partners across West Sussex have continued to develop services designed to improve outcomes for children and young people. Quite often this has been difficult with leadership impacted by vacancies, changing staff, interim posts and reorganisation.

At the beginning of this period the Start of Life Partnership Board provided direction for the statutory children's services, the 'Think Family' programme, MASH and the cross-partnership early help offer.

The understandable need to rationalise the number of Boards operating across West Sussex resulted in key meetings being cancelled with the inevitable impact on the 'systems partnerships' that had begun to develop. The Start of Life Partnership Board encouraged clear partnership oversight across the entire spectrum of children's and irregular meetings had an effect on information sharing and leadership.

The sharing of information continues to be problematic for all professionals. This report has particularly highlighted the difficulties associated with keeping GPs informed about the children under their care. 2017 – 18 will see an increased focus on Information sharing, including the use of systems such as Mosaic.

For the Board to improve its understanding of the impact of partnership work there is a real need to receive relevant performance data and reports. Progress against priority areas were considered earlier in the report where it was noted that some partners, (in particular Children's Social Care), have found it difficult to provide evidence to support the outcomes described. WSSCB has been concerned by both this and the slow pace of performance data

improvement across key areas of work including MASH, IPEH and CSE. During 2016, despite regular requests, audit information was not received from Children's Social Care or IPEH. There is a need for some partners to gain confidence in sharing information on issues that may be problematical and in so doing contribute to the further development of a culture of learning. WSSCB has raised these concerns in a number of forums and is pleased to see this being actively addressed by partners.

More recently there is an increasing clarity about what actions need to be taken to continuously improve. In particular attention is being given to the development of stronger governance and a clearer sense of direction across the partnership. This is to be welcomed and encouraged. Significantly there is a growing sense of cohesion and integration across the partnership, and increased evidence of a shared drive to improve practice across all services.

The development of the Local Health System Sustainability and Transformation Plans (STPs) across Sussex and East Surrey requires a radical rethink of systems delivery. It will remain a priority for the WSSCB to continue to monitor and scrutinise the impact of this large scale change on the safety and wellbeing of West Sussex children and young people.

Importantly, the 2017 **Children and Social Work Bill** and the **Wood Review** of the role and functions of Local Safeguarding Children Boards will demand considerable attention by the partnership. At the time of writing this report changes have been made to the statutory safeguarding guidance Working Together to Safeguard Children and on draft regulations which will underpin legislation introduced by the Children and Social Work Act, 2017. Working Together to Safeguard Children is the statutory guidance which sets out what is expected of organisations, individually and jointly, in safeguarding and promoting the welfare of children. Significant

revisions have been made to Chapter 3, 4 and 5 of “Working Together”, which deal with reforming the arrangements for multi-agency safeguarding, serious case reviews and child death reviews.

These changes offer both opportunities and risks in developing the new arrangements and there will need to be a great deal of detailed partnership work locally if they are to work well. This is an opportunity for West Sussex to be ambitious and get it right for children. WSSCB intends to be influential in developing the new arrangements - ensuring that the potential disruption is justified by a robust systems approach to safeguarding West Sussex children.

The coming year will continue to demand a high level of drive and commitment. Demand for services is unlikely to lessen and financial constraint will continue across the partnership. So once again, I would like to thank everyone involved in safeguarding the children and young people in West Sussex. Your professionalism, commitment and skill is highly valued and greatly appreciated by all those who work with you or receive your care.



Elaine Coleridge Smith
Independent Chair, West Sussex
Safeguarding Children Board



Appendices

WSSCB Structure

The purpose of the child death review process is to learn lessons from child deaths in order to understand why some children die and, wherever possible, put in place interventions to prevent future deaths and to make a wider contribution to the wellbeing of children and young people.

Main Board

This is made up of representatives of the member agencies. Board members must be sufficiently senior so as to ensure they are able to speak confidently and sign up to agreements on behalf of their agency, and make sure that their agency abides by the policies, procedures and recommendations of the WSSCB. A list of [participating agencies](#) can be found on the WSSCB website.

Executive and Chairs

The Executive Committee manages the business and operations of the WSSCB, ensuring there are clear governance arrangements in place and drives forward the strategic priorities as outlined in the Business Plan.

The Chairs group is comprised of the chairs of each of the sub-groups and ensures the smooth running of the business plan, escalating issues from the sub-groups to the Executive.

Sub-groups

Membership of the sub-groups is made up of staff from bodies or agencies represented at the WSSCB who are co-opted to ensure each group has the relevant expertise and knowledge to deliver the WSSCB Business Plan. Membership of sub-groups can include Board Members themselves.

Pan-Sussex Arrangement

West Sussex, East Sussex and Brighton and Hove each has its own LSCB, but come together under the Pan-Sussex umbrella in order to share procedures and policies, skills, knowledge, resources and learning.

WSSCB Business Plan 2017-19

The WSSCB Business Plan sets out the scrutiny and coordination activity the partnership intends to undertake in order to improve children's outcomes across its three priority areas:

- Neglect
- Child Sexual Abuse and Children Missing
- Emotional Wellbeing and Mental Health

In addition the WSSCB will support the transitional arrangements required to develop the new model of three way leadership as outlined in Local safeguarding - transitional arrangements - Statutory guidance for local authorities, LSCBs, safeguarding partners, child death review partners, and the Child Safeguarding Practice Review Panel.

WSSCB Funding

Board partners continue to contribute to the WSSCB budget in addition to providing a variety of resources in kind. Contributions from partners for 2016-17 totalled £252,561.

An underspend of £36,111 was carried forward from the previous financial year, making the total income available to the Board £288,672 This has ensured that the overall cost of running the WSSCB has been met.

Staffing vacancies within the WSSCB Business team led to a considerable underspend in the 2016-17 budget. The Board has agreed to carry forward this underspend to the 2017-18 budget.

WSSCB spending in 2016-17

Staffing costs	£198,082
Serious Case Reviews	£45,844
Training and development activity	£1,199
Websites and IT resources	£3,020
General provisions	£2,176
Total:	£250,321
Underspend:	£38,351



Key Roles

Independent Chair

The WSSCB is led by an Independent Chair. Elaine Coleridge-Smith has led the Board since January 2016. The Chair is subject to an annual appraisal to ensure the role is undertaken competently and that the post holder retains the confidence of the WSSCB members. The Chief Operating Officer of West Sussex County Council appoints the Chair and holds the Chair to account for the effective working of the WSSCB.

West Sussex County Council

West Sussex County Council is responsible for establishing and maintaining the WSSCB. The Director of Children's Services is required to sit on the full Board of the WSSCB as this is a pivotal role in the provision of adult's and children's social care within the local authority. This post is held by Annie Maclver and she has the responsibility to make sure that the WSSCB functions effectively and liaises closely with the Independent Chair, who keeps her updated on progress.

Partner Agencies

All partner agencies in West Sussex are committed to ensuring the effective operation of the WSSCB. This is supported by our **Constitution**, which sets out the governance and accountability arrangements.

Leader of West Sussex County Council

The Lead Member for Children's Services should be a participating observer of the WSSCB. In practice this means routinely attending meetings as an observer and receiving all its written reports. The Leader of West Sussex County Council during the period of this report is Ms Louise Goldsmith.

Lead Member for Children's Services

Throughout 2016-17 this role was held by Stephen Hillier, a locally elected Councillor with responsibility for making sure that the local authority fulfils its legal responsibilities to safeguard children and young people. The Lead Member contributes to the WSSCB as a participating observer and is not part of the decision-making process.

West Sussex Youth Cabinet

The Youth Cabinet is responsible for representing the children and young people of West Sussex in holding the County Council to account. The West Sussex Youth Cabinet informs the priorities of the Board and holds them to account for their effectiveness in hearing the voice of children and young people.

Designated Professionals

Health commissioners should have a designated doctor and nurse to take a strategic, professional lead on all aspects of the health service contribution to safeguarding children across the local area. Designated professionals are a vital source of professional advice on safeguarding children matters to partner agencies and the WSSCB.

Lay Members

WSSCB has appointed local residents as Lay Members to support stronger public engagement in local child protection and safeguarding issues and contribute to an improved understanding of the WSSCB's work in the community. The WSSCB would like to thank John Thompson for his continued contribution to our work.

Key Relationships

The Start of Life Partnership Board and the Families Plan

The West Sussex Start of Life Partnership is a partnership of agencies committed to working together to improve outcomes for children. The Trust is governed by a Board with formal responsibility for strategic planning, commissioning services and promoting effective integrated working. The Start of Life Partnership is responsible for producing the Families Plan, which outlines how improvements in service delivery and design will be made.

During the period of this report the local authority has been reviewing its Board and governance arrangements. As a result the Start of Life Partnership has not been meeting with sufficient regularity. This is of concern because this meeting provides a valuable forum for partners to agree on the delivery of the Families plan, and other initiatives such as MASH and IPEH.

This has been discussed with the lead member and the WSSCB is assured that new arrangements will be in place for 2018.

Local Safeguarding Adult Board (SAB)

The SAB leads adult safeguarding arrangements across its locality and oversees and coordinates the effectiveness of the safeguarding work of its member and partner agencies. The Board is made up of local and national agencies involved in providing care and support to adults.

Health and Wellbeing Board

This Board brings together leaders from the County Council, NHS and partner agencies to develop a shared understanding of local needs, priorities and service developments. The WSSCB reports annually to the Health and Wellbeing Board and will hold it to account to ensure that it tackles the key safeguarding issues for children in West Sussex. The WSSCB and the Health and Wellbeing Board have established a Memorandum of Agreement outlining the working relationship between the two Boards

Members Agencies' Management Boards

WSSCB Board members are senior officers within their own agencies providing a direct link between the WSSCB and their agencies' boards.

Safer West Sussex Partnership

The Safer West Sussex Partnership brings together Community Safety Partnerships along with other key agencies, providing a coordinated approach to reducing crime and anti-social behaviour in West Sussex.

Clinical Commissioning Groups

The Clinical Commissioning Group, NHS England and Health Services across West Sussex have been important contributors to the WSSCB throughout 2016-17.

Police and Crime Commissioner

The Police and Crime Commissioner (PCC), Katy Bourne is elected by residents of Sussex and charged with securing efficient and effective policing across the county. On behalf of the public she sets policing priorities for Sussex Police and holds the Chief Constable to account for the quality of policing service offered to the community. The PCC is committed to enabling good community cohesion and effective multi-agency relationships wherever policing and crime prevention have a role to play.

West Sussex Voluntary and Community Sector Safeguarding Forum

This forum represents the safeguarding leads of 24 voluntary and community sector groups working in West Sussex. It seeks to work with and influence the WSSCB, disseminating information to its members and ensuring links are both meaningful and relevant.



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