



# Bedford Borough Safeguarding Children Board

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Annual Report 2017 - 2018

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# Contents



*This annual report has been written with contributions from the Bedford Borough Safeguarding Children Board (BBSCB) members, who were asked to demonstrate how they have contributed to safeguarding and the work of the BBSCB during 2017 - 2018. Jenny Myers, BBSCB Independent Chair and Sally Stocker, BBSCB Business Manager have also written some sections of the report and have edited the final document. This report was signed off by the BBSCB in August 2018 and is available on the BBSCB website at [www.bedford.gov.uk/lscb](http://www.bedford.gov.uk/lscb). This gives an opportunity for strategic partners at all levels and the public to assess whether the BBSCB is fulfilling its statutory responsibilities effectively and priorities are according to local issues and demands.*

*Any comments about this report can be made to the BBSCB on [LSCB@bedford.gov.uk](mailto:LSCB@bedford.gov.uk)*

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# Foreword from the Independent Chair

## Jenny Myers



### Welcome to the Bedford Borough Safeguarding Children Board's Annual Report.

It is my pleasure to welcome you to this year's Annual Report which I hope you will find an informative summary of the significant amount of multi-agency work that has been undertaken across the partnership both in Bedford Borough and where appropriate Pan Bedfordshire. At the end of March 2018 both the BBSCB and Bedford Borough Council's Children's Services had received Ofsted inspections. This year the improvement work has continued with positive progress being made, though with significant challenges and issues still to overcome with the regulators across Police, health and social care increasing pressure to perform and meet targets in a time of austerity, cuts and workforce issues. Despite this I am proud of the partnership approach to work together to keep children and young people safe.

The BBSCB assurance work has been around the key priority areas we previously identified. We have been more thematic into how we have assured ourselves that the work is making a difference and having an impact on children and young people. We have particularly focused on:

1. Understanding more about the quality of responses to children and young people with emotional well-being and mental health issues. More information about this work can be found on page 38.
2. Child sexual exploitation (CSE) and missing children and young people, how to empower children and young people to recognise abuse, feel confident to report concerns. A continued improvement to partner's response to missing children and young people and the number of return interviews carried out once they return home. More information about this work can be found on page 31.

3. Early Help and neglect, obtaining evidence that learning and improvement is being embedded in frontline practice and there is an increase in Early Help Assessments (EHAs). More information about this work can be found on page 17.
4. Enabling change and being assured that lessons are being learnt from Serious Case Reviews (SCRs), reviews and audits and that practice and outcomes are improving as a result. More information about this work can be found on pages 49 and 55-59.

Two other areas we have focused on are:

- The partnership response to and the critical role of the Bedfordshire Youth Offending Service (BYOS) regarding identified issues of serious youth violence and 'gang' /group risk activity and offending. This is an area where there appears to be an increase in concern linked also to issues of County Lines (drug-dealing); CSE and Missing.
- A national and local issue;
  - (i) Ensuring that no child under the age of 18 is detained overnight in Police custody post charge where they met the conditions for transfer under PACE to 'appropriate' accommodation.
  - (ii) The safety and well-being of children and young people in custody within the Criminal Justice Secure Estate. Children and young people from Bedford may be placed far from home in an institution as well as with a population that are highly vulnerable. There remains a challenge about how BYOS and Children's Services work well in ensuring joint decision making with custodial establishments whilst Bedford Borough children and young people are in them. The Board has requested assurance reports on these issues in the next 12 months.

**Many thanks for taking time to read our report.**

**Jenny Myers**  
BBSCB Independent Chair

# Introduction

## What is the BBSCB?

The BBSCB is a multi-agency body whose role is to oversee, coordinate, challenge, and scrutinise the work of all professionals and organisations in Bedford Borough to protect children and young people in the Borough from abuse and neglect, and to help all children and young people to grow up safe, happy, and with the maximum opportunity to realise their potential. It is a statutory body established under the Children Act 2004. Under the Act, every Local Authority in England is required to establish a Local Safeguarding Children Board (LSCB) with two primary purposes:

- To co-ordinate what is done by each person or body represented on the Board to safeguard and promote the welfare of children in the Local Authority area; and
- To ensure the effectiveness of what is done by each such person or body for those purposes.

Every LSCB is required to publish an Annual Report to provide a rigorous and transparent assessment of the performance and effectiveness of local services. Legislation, regulations, and guidance set out the minimum requirements of LSCBs. However, Bedford Borough Safeguarding Children Board (BBSCB) is ambitious to go beyond minimum requirements, in order to ensure that safeguarding services in Bedford Borough achieve the highest standards and that all children in Bedford have the best possible life chances and opportunities.

## Governance and Accountability Arrangements

Appropriate arrangements remained in place to ensure that the BBSCB meets its statutory functions as outlined in Working Together 2015, the Local Safeguarding Children Board Regulations 2006 and the Children Act 2004. The role of the BBSCB is to co-ordinate local multi-agency safeguarding arrangements and evaluates the effectiveness of these arrangements. Over the last year we have strengthened our governance arrangements and restructured some of the sub groups to ensure better join up with the wider strategic partnership both in Bedford Borough and across the county including Central Bedfordshire and Luton LSCBs. Our structure chart is on page 13 and shows our current formation and link to other strategic groups across the partnership and in Bedfordshire. The BBSCB includes senior members of staff from Local Authority Children's and Adults' Services, Police, Health Services, Education, Voluntary Sector, Probation and Lay Members. Adult Services attend the BBSCB on a regular basis and work has begun to strengthen those relationships and working practices. An attendance chart is in appendix 2 on page 74.

For more information in regards to the role and function of LSCBs please visit [www.workingtogetheronline.co.uk](http://www.workingtogetheronline.co.uk)

# What does Bedford Borough look like?

## What does Bedford Borough look like?

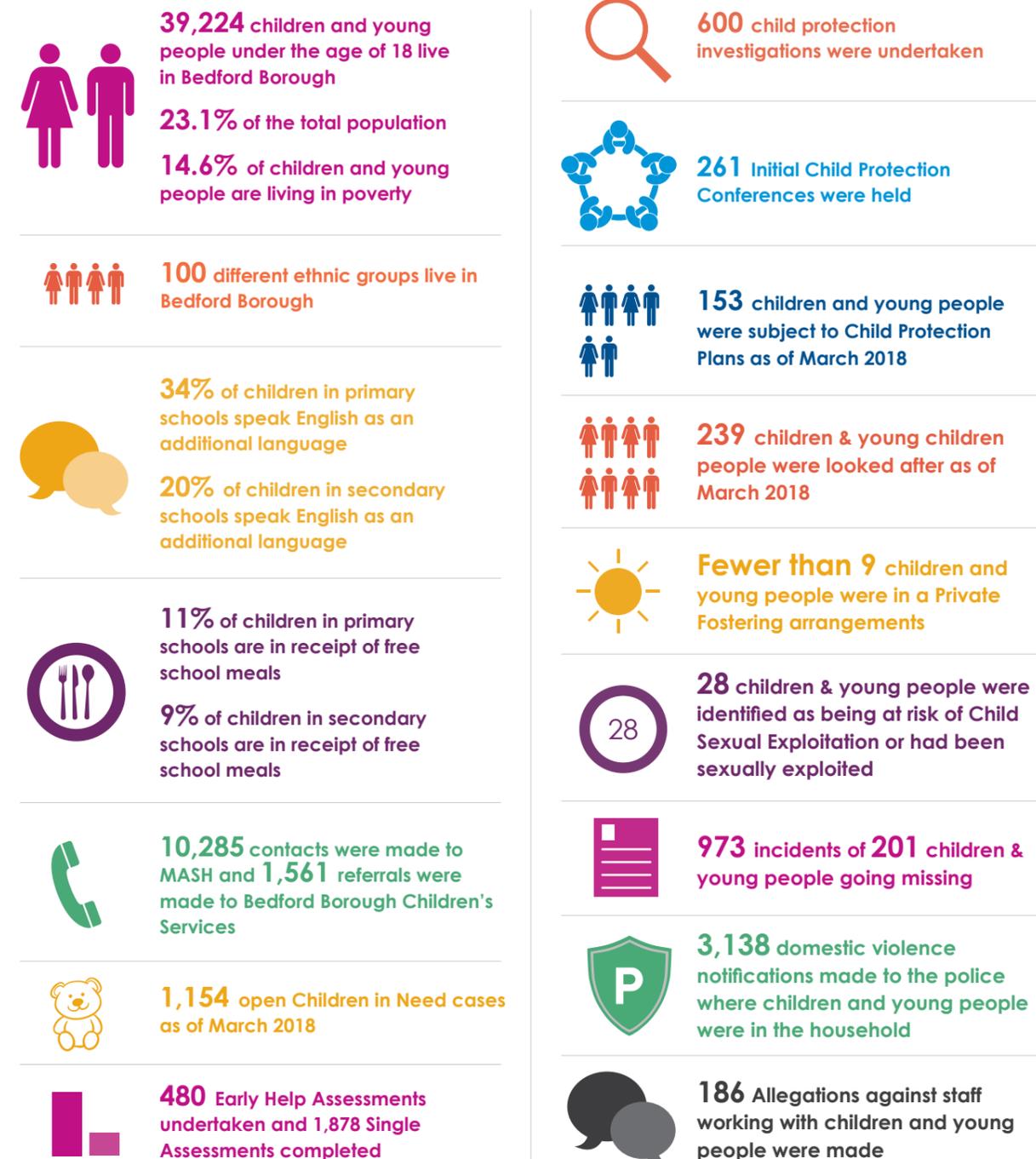
Bedford Borough is situated within the geographical county of Bedfordshire and covers an area of 476 sq. km. It lies within the East of England Region but enjoys close geographical proximity and economic links with the South East, London, and the Midlands. Within Bedford Borough there is a mix of urban and rural areas, with Bedford being the central urban town and largest area of population. 169,912 people live in Bedford Borough (2017) with approximately two-thirds of the population living in the urban areas of Bedford and Kempston and one-third living in the surrounding rural areas.

The Borough ranks in the Top 100 of 348 English local authorities in the proportion of its population in 15 of the 17 minority ethnic groupings. Up to 100 different ethnic groups live in Bedford Borough with more than 1 in 3 people in Bedford and Kempston from minority ethnic groups, compared to less than 1 in 8 in rural areas. Bedford Borough has a very ethnically diverse population, with up to 100 different ethnic groups living within its boundaries. The 2011 Census indicates that 28.5% of the population was from minority ethnic groups (BME), compared to 20.2% nationally (only 13.9% when London Boroughs are excluded). The BME population increased by 16,400 between 2001 and 2011, whereas the White British population declined by 6,900. The languages most commonly spoken in the Borough as a first language other than English are Polish, Panjabi, Bengali and Italian.

Nationally, Bedford Borough ranks 148 out of 326 local authorities in England for deprivation. However, this average ranking masks pockets of significant deprivation that fall into within the 30% most deprived areas in the country. All 25 of these Lower Super Output Areas. (LSOAs) are in Bedford or Kempston Towns, with the greatest deprivation centred on Castle, Cauldwell, Goldington, Kingsbrook and Queens Park wards.

Here is a snapshot of safeguarding data that has been provided to the BBSCB over the last year. This report will provide some context and analysis of that data and demonstrate what challenges have been made and how effective services and support to children, young people and their families has been during 2017/18.

# Bedford Borough Safeguarding Snapshot 2017/2018



# What have children and young people told us?

BBSCB recognises the importance of listening to children and young people, and taking their views into account this being one of the agreed BBSCB values. Their voice was heard through the commissioning of 'Chelsea's Choice' and 'Crashing' again in 2017. The BBSCB has also joined forces and there is now a Pan Bedfordshire Voice of the Child group initially set up by Central Bedfordshire LSCB (CBSCB). The group will review, create, action and recommend processes for ensuring that the Voice of the Child is heard in a timely, effective and appropriate manner. The work of this group will help in delivering the Board's key strategies and plans.

Young people tell us that information, communication and relationships are important to them. A young person shared that "my social worker has my back; she is there for me and sticks up for me. I can trust her and that is important to me." Another young person shared that "my social worker's support has made it better." Children's Services has begun systematically requesting feedback from children and young people where appropriate as part of our audits. All young people spoken to stated that they felt listened to and supported by their social worker.

The Engagement and Development Team are based within the Safeguarding and Quality Assurance Team in Children's Services. The main focus of the team is to focus on the voice, views, opinions and ideas of children and young people and how these can be used to bring about positive change. The Engagement and Development Team work across three key levels;

- Level One: the support and facilitation of projects and forums for children and young people to have their say.
- Level Two: support and guidance to staff, teams and services to improve their practise and how the voice of the child can influence change.
- Level Three: offering strategic guidance and ensuring the implementation of children's and young people's voices.

The Children in Care Council (CiCC) re-launched in January 2018 with two new age groups (junior; 8-12 and senior 12-16). The Children in Care Council now meet as a youth group each month to

allow the children and young people to attend a safe space to build a peer support network with children and young people who are in the same situation as them. The CiCC have monthly themes based on the issues that are important to them. Membership has increased and some of the children and young people were recently involved in a drama project, resulting in a performance at the Place Theatre in Bedford. Members of the CiCC have re-designed the questions given to potential foster carers as well as giving GOLD-SILVER-BRONZE in expected answers to panel. Four members of the CiCC have delivered training to new foster carers as part of the Skills to Foster training package and two members of the Senior CiCC co-delivered voice of the child training to Elected Members and Directors of Services of BBC.



The Youth Cabinet continues to grow with new members joining every session. A very successful Make your Mark campaign (on the next page) saw three campaign issues identified; mental health, tackling racial and religious discrimination and improving transport. The Youth Cabinet committee undertook Borough wide consultation with over 1200 responses highlighting what the key issues are. The Youth Cabinet have launched 'Operation Soapbox' in which they invite children and young people to hop on a specially made soapbox to have their say about any issue that is important to them. The soapbox made an appearance at the 2018 River Festival where over 200 children and young people visited their stall.



The Member of Youth Parliament for Bedford Borough changed in March 2018, the Deputy Member of Youth Parliament stepped into the role. 17 year old Ethan Barnett attends Sharnbrook Upper School and will hold the post until January 2019. In September 2017 a remarkable 4720 (29%) children and young people across Bedford voted in the British Youth Council – Make your Mark Campaign to pick the most important National issue. The top three issues for young people in Bedford Borough were:

- 1 – Work experience hubs for 11 to 18 year old = 740 votes
- 2 – Improved transport = 662 votes
- 3 – A curriculum for life = 659 votes



Young inspectors, young recruiters and young commissioners continue to grow with a further 20 children and young people attending residential training. This brings the total number of young people trained to 37. In 2018 Members of LINK supported the recruitment and selection of staff within Early Help Services, NQSW (Newly Qualified Social Workers) Academy Team, Children's Services and Engagement and Development Business. Inspected Swan contact centre and provided an R-A-G rated report for them.



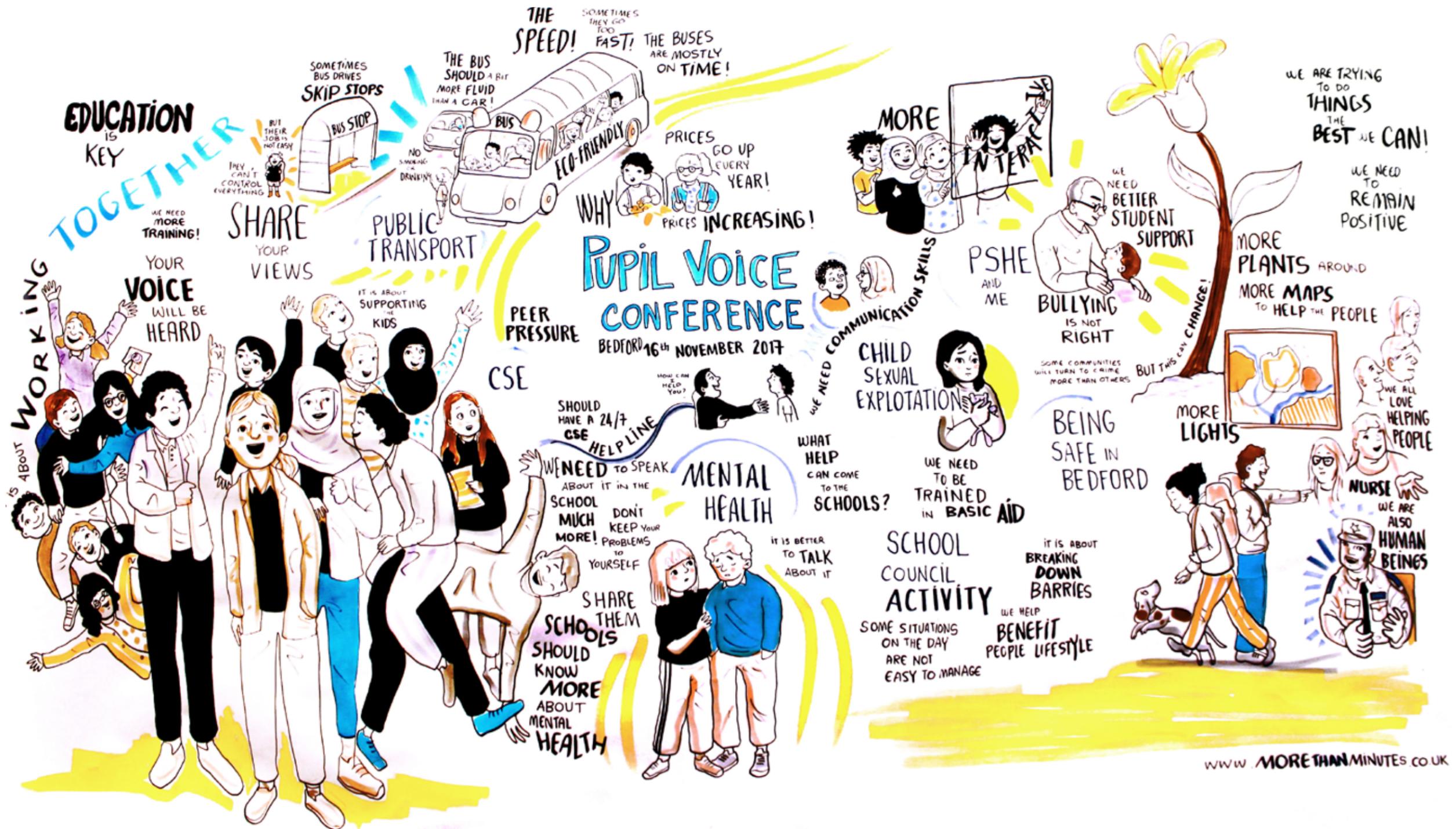
MOMO is a digital platform designed to make it easier for children and young people to keep in touch with their workers and share information that is important to them. Bedford Borough Council launched MOMO on April 2017, since then 141 children and young people have signed up for an account and 143 workers have attended the training and registered for an account. We have received a total of 227 statements; 25% were to prepare for a meeting or conference, 21% were to prepare for a worker visit and 15% of them were to share good news. 10% of statements received were to report a problem, these have been dealt with via the corporate complaints system (where appropriate) and themes from the complaints have been discussed at the Quality Assurance Board. MOMO has also been introduced for use in the Children with Disabilities team and this has been used with some disabled children/young people to elicit their wishes, feelings and views.



The Pupil Voice Network is a project to bring together and support School Councils and the staff that support them. The Pupil Voice Network aims to:

- Provide support for Pupil Voice / School Council leads or coordinators in schools.
- Offer training for staff on engagement and the best ways for children and young people to be involved throughout school and school systems.
- Training for pupils on the role of School Council Member and being representative and inclusive.
- Access to resources, information, advice and guidance.
- Coordinated Bedford wide projects and partnership working i.e. United Kingdom Youth Parliament.

In November 2017, the Engagement and Development Team, alongside young people hosted the second Pupil Voice Conference. 87 children and young people from 15 schools across Bedford Borough attended and discussed key issues including; CSE, transport, mental health and how safe children and young people feel in Bedford Borough. The afternoon session included a Q&A panel debate with colleagues from Bedfordshire Clinical Commissioning Group (BCCG), Bedfordshire Police, local transport companies and the office of the Police and Crime Commissioner (OPCC). They worked in partnership with an organisation called More Than Minutes to produce a pictorial report of the day.



WWW.MORETHANMINUTES.CO.UK



This is a brand new group for children and young people on a Child Protection (CP) or Child in Need (CiN) plan to meet bi-monthly and the aim of the group is to provide children and young people with a safe space to meet new people, learn new skills and share their views on the support they receive from Bedford Borough Council. The first project of this new group is to design a pledge for children and young people on a CP or CiN plan.



Care Leavers and Unaccompanied Asylum Seeking Children (UASC) is a new group for young people supported by the Leaving and After Care Team. This group meet bi-monthly and the young people have so far supported the writing of a new design Pathway Plan and discussed the current finance policy. The group would like to develop a peer mentor scheme and design a Leaving Care Passport. The UASC young people are focused on trips and visits to support them to have new experiences; this year we visited Box End Water Park and Indoor Surfing. They have provided the Engagement and Development Team with some helpful information as to the support they need and an insight to their experiences.



This is a new group for the birth children of Bedford Borough's Foster Carers who meet in the school holidays. The aim of this group is to provide training and peer-support to these children and young people and give them an opportunity to have their say about the support they need. A long term aim for this group is to develop a training course (similar to Skills to Foster) for young people; co-delivered by young people.



The Engagement and Development Team have created a brand new Participation and Engagement Strategy for 2018-2021. The new strategy sits across the whole of Children's Services and sets out a new united vision, principles, a participation model and three year action plan.

Relaunch of tea with a twist themed sessions held fortnightly to introduce social workers to tools and methods for direct work with children and young people. Build confidence, discuss tricky cases and develop new ways of working. Every month a different team within Children's Services leads a tea with a twist session to further share learning. Team champions: nominated representatives from each team to lead on 'voice of the child'. The team champions will be the link between Engagement and Development Team and their teams; sharing practise, developing policy and practise and considering legislation and guidance. Resources: Fully stocked resource library with direct working tools, games, activity material, books, guidance and journals. Training: multiple training packages are being created to support staff to understand participation and why it is important, alongside the benefits of positive engagement and methods of effective direct working with children and young people.

Audits and reviews of Early Help Assessments show the visibility of the voice of the child has improved significantly within Early Help, at all stages of the journey from assessment through to closure. A young person said at the conclusion of their Solution Focused sessions "I have learnt that I can do it and I am not a failure; that there are ways to deal with things that don't include self-harm or hatred: That things do get better if I believe in myself and I am not annoying other people because they do care" "Thank you so much - it has helped immensely"

Students continue to tell Bedford College that they feel safe in the College through their student satisfaction surveys. No safeguarding concerns were raised at student council meetings nor at their 'Question Time' event with the senior management team, student reps confirmed that they felt safe in College, that the College used their anti-bullying policy when necessary and that they knew what to do if they had safeguarding concerns.

The School Nursing (5-19) service produces regular case studies regarding their work and collect user feedback on their experiences. Some of these are:

Dad was surprised that the young person had disclosed so much information at the drop in. Dad expressed that this was the most that the young person has ever told a health professional in one session. He appreciated the support.	Child commented that he found it good to share his worries and was happy that his Mum now knew about them. He enjoyed the practical activities.	The young person fed back to me that he had enjoyed talking to a different person in school and discussing his worries.
The student told me that she was happy, that she had wanted to tell her mum but did not know how to. She has continued to engage with the school nurse drop in.	The young man found it useful to talk to someone who could help him work through issues and help him identify solutions.	The young person would not have attended the GP without School Nurse support.

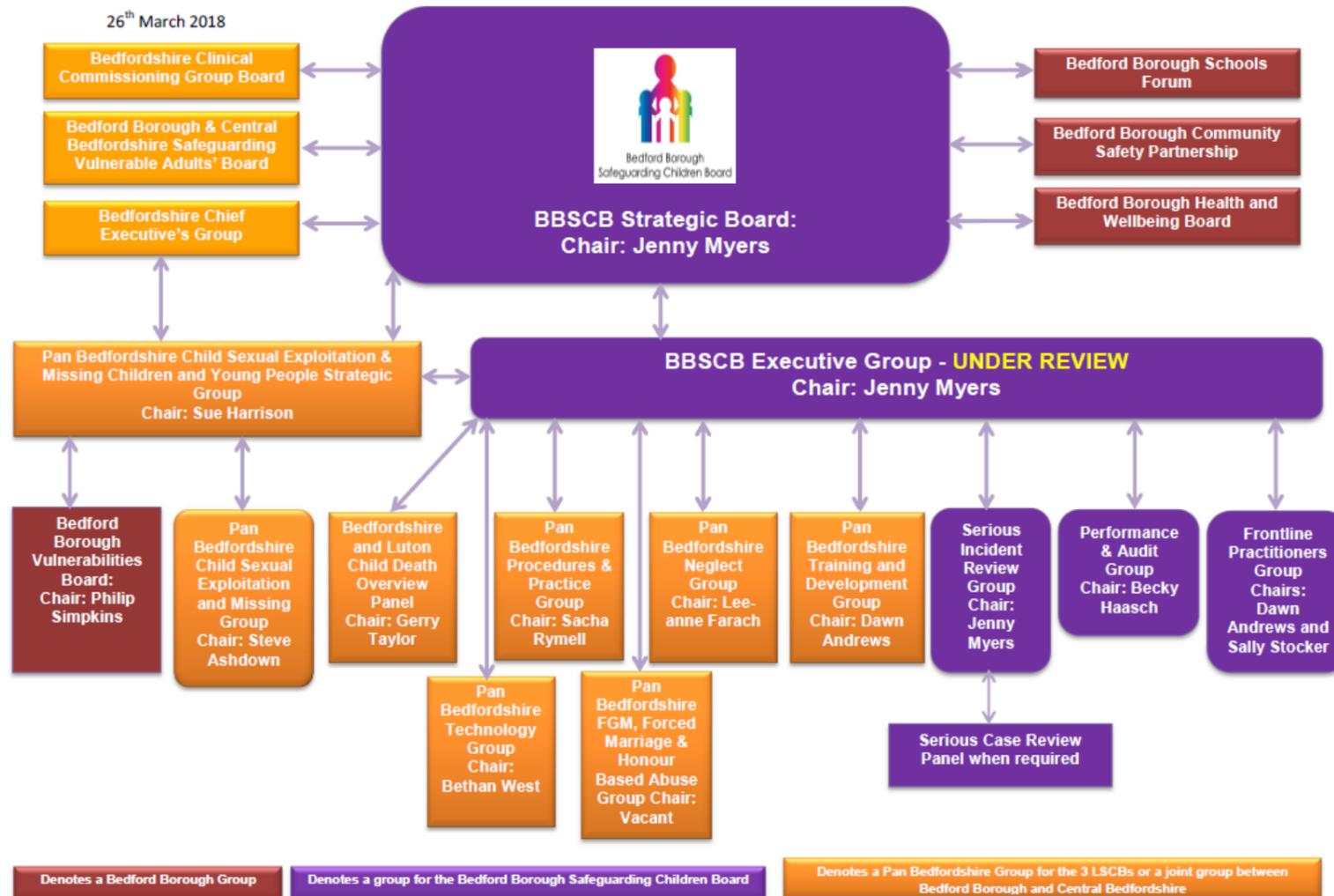
The Health and Wellbeing strategy is being refreshed and it was taken to the Bedford Borough youth parliament for their comments.

# Finance and Staffing

## 2017 - 2018

### Finance and Staffing

The work of the BBSCB is funded through contributions from partner agencies in line with a funding formula agreed by agencies in 2010 and adhered to since that time. Partner agencies agreed to maintain their budget contributions in 2017/2018 at the same level of 2016/2017.



### The Independent Chair

BBSCB continues to be independently chaired by Jenny Myers, a crucial role ensuring the Board operates independently, to challenge senior representatives and agencies whilst scrutinising services to seek continued improvement. The Chair is accountable to and meets regularly with the Chief Executive of Bedford Borough Council (BBC). The Chair also meets frequently with the BBC Director for Children's Services and has full access to director level representatives from other partner organisations and the Lead Member. The Chair is a member of the Bedford Borough Children's Improvement Board and has also undertaken a schedule of meetings with other partner agencies over the last year. The Board continues to change and develop with a greater focus on outcomes and aims to encourage greater discussion and debate to influence and where necessary change or modify multi-agency practice. All this is taking place in an environment of significant change across the multi-agency partnership both nationally and locally, with key agencies reporting an increased pressure on capacity, alongside fewer resources and increasing scrutiny by inspection bodies.

### Lay Members

BBSCB has two lay members who provide additional scrutiny and challenge to the Board.

*"I joined the board as a lay member in January 2014 and have seen and been part of many changes in that time. The sub-groups have been tailored to ensure that they are focused and effective in always optimising awareness and safety for the children and young people in Bedford Borough, and I have only a couple of these groups left to attend. I find it really valuable to be part of the structure and to see how the board works to bring all sub-groups together for a common aim. My comments are always encouraged and welcomed, and I feel that my presence at all the meetings I attend is valued. I can clearly see the progress of the board in striving towards optimal effectiveness and would like to see this continue to be built upon, using the input from the public sector, the private sector and the residents of Bedford Borough."* **Susannah King (Lay member)**

### Joint Working

Joint working with Central Bedfordshire and Luton Safeguarding Children Boards has continued to be a particular feature of BBSCB reflecting the practicalities for many partners, such as the Police, Probation and Health organisations who work across the three Safeguarding Boards areas. In the past year there has been successful joint working around:

- Pan Bedfordshire Child Death Overview Panel (CDOP),
- Pan Bedfordshire Child Sexual Exploitation (CSE) and Missing Strategic Group,
- Pan Bedfordshire Female Genital Mutilation Group, Honour Based Abuse, Forced Marriage
- Pan Bedfordshire Neglect Group
- Pan Bedfordshire Digital Safeguarding Group

The BBSCB has been involved again in the development of the Joint Strategic Needs Assessment (JSNA) and the Bedford Borough Children, Young People and their Families Plan 2016 - 2020 which addresses safeguarding issues for children and young people in Bedford Borough. The Community Safety Partnership (CSP) has been actively involved in the Pan Bedfordshire work around Domestic Abuse (DA), FGM and CSE. The CSP recognises that every member of the community has a role to play in reducing the negative impacts caused by crime and disorder. Therefore during 2018 - 2019 they will ensure that their partnership engagement involves communities more. More details about the BBSCB can be found on the website [www.bedford.gov.uk/lscb](http://www.bedford.gov.uk/lscb)

## Multi-agency Achievements in 2017 – 2018

480 Early Help assessments received

Conference on neglect attended by 309 delegates

Focus on neglect cumulating in an increase of child protection medicals for neglect

'Chelsea's Choice' a CSE awareness theatre production, delivered to 1,319 schools pupils from Year 8 to Year 11

'Crashing' a CSE awareness theatre production aimed at raising awareness that boys can be victims of CSE delivered to 1,357 schools pupils from Year 8 to Year 11

County Lines a play performed to 375 students for the first time to outline the risks of County Lines where children and young people are criminally exploited

Pan Bedfordshire bid was successful to the Bedfordshire Police and Crime Commissioner's Grant Fund for 2018/2019 to commission County Lines in 2018/2019 for all secondary schools in Bedford Borough

Risk logs implemented and updated regularly to provide regular progress on identified concerns

Pan Bedfordshire audit of the Graded Care Profile 2 assessment completed and learning shared

Pan Bedfordshire multi-agency emotional wellbeing and mental health audit completed and learning shared

Problem Profiles completed for Female Genital Mutilation, Forced Marriage and Honour Based Abuse

CSE Make Safe Campaign in place across Bedfordshire and a Make Safe conference arranged to raise awareness with Hoteliers in March 2018. This campaign is aimed at Taxi firms, Hotels, Restaurants and Fast Food outlets to educate those working in these areas around the concerns for CSE/Missing 'The more you know, the more you see'

Local CSE campaigns with communications plan for the year

The CSE Disruption Tool-kit and a new Practitioners CSE Tool-kit launched in June 2017

Pan Bedfordshire CSE Conference held in September 2017 – well attended and evaluated. A further conference to be held 2018

CSE awareness training is now in place on an ongoing basis for taxi drivers throughout Bedford Borough and monitored by Bedford Borough Council licensing leads

Police School Liaison Officer continues to support schools with regards to education around topics; gangs, knife crime, on line safety, bullying, CSE etc

Strengthened Pan Bedfordshire work

Bedford Early Help Team have worked with Link to Change (see page 32 for more information) to develop a work shop aimed at year 7 + children in School around the issues of CSE/Online Safety and how to report it

Half day briefing held in regards to the Fathers Voice to 131 delegates

Funding secured from the Schools Forum to commission the following plays: In the Net, Chelsea's Choice and Click to raise awareness of online safety, healthy relationships and CSE to schools in autumn 2018

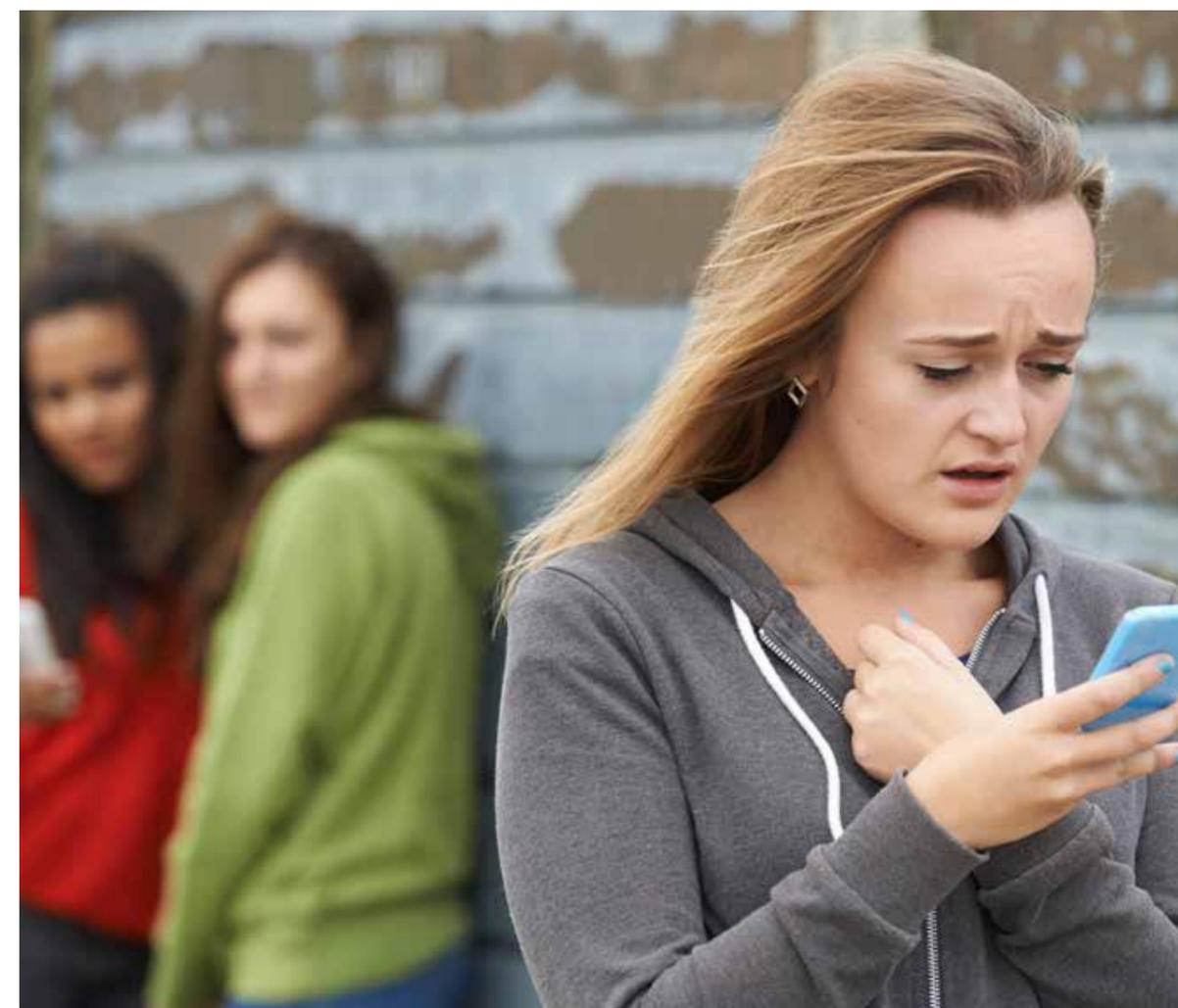
BBSCB has worked hard at trying to evidence improvement and impact over the last year. The Board agreed to continue with the following priority areas due to either their prevalence in the cases agencies see or because the BBSCB believed them to be unseen or hidden forms of abuse which the BBSCB needs to work together to tackle. BBSCB also identified that help given to children and young people before they suffer abuse, is a key area to develop. Early Help ensures that all children, young people and their families, who are experiencing problems, get the support they need from a range of agencies before it's too late.

### BBSCB has agreed the following objectives to direct its work for 2017 – 2019:

- 1: Assure ourselves that families, children and young people are supported earlier
- 2: Protect the most vulnerable children and young people
- 3: The multi-agency workforce is supported, informed & effective with a focus on learning & improvement

### BBSCB has identified 3 key priorities:

Neglect – Emotional Wellbeing & Mental Health - Online Safety



## Objective 1: Ensuring that families, children and young people are supported earlier

Bedford Borough is an Early Intervention Foundation named Early Intervention Place and has an early help offer, based upon the principle that practitioners who know children and young people well are best placed to identify and support them and their families, when additional needs are first identified. The Early Help Assessment (EHA) continues to be used across all partners with 480 having been received through the front door in the period April 17 – March 18. The number of consent to EHA's from health professionals has increased significantly, meaning that a greater number of professionals are identifying need and risk in the community. Currently 5% of EHA's are referred for a statutory assessment, suggesting that Early Help is effectively addressing risk early. In addition, 85.6% of parents stated that their confidence in their parenting had improved following attendance at a parenting course.

In the Care Quality Commission (CQC) and Ofsted thematic review of Mental Health and Wellbeing services for young people our partnership working and the local Early Help offer across the system was noted as good and "The Child and Adolescent Mental Health Services (CAMHs) practitioners in each secondary school, as part of the Bedford Borough Early Help offer, are proving to be a strong source of Early Help and support, both to students in building resilience, and to school staff who have benefitted from the uplift in skills and knowledge.

The Early Help professionals provide support and challenge to multi-agency Lead Professionals and also facilitate sharing of learning and good practice. The numbers of children and families supported through Team Around the Family (TAF) processes have continued to increase at a steady rate meaning more children and families are receiving coordinated, multi-agency Early Help, which is meeting their needs when issues first arise.

There is a strong interface between Early Help and Children's Social Care, with professionals working well together to identify the most appropriate level and type of support. This means that children, young people and families are receiving the right help at the right time. They are offered help when concerns are first identified, and this help improves the child's situation. Early Help practitioners enhance care plans for those in need, or on a CP plan, with specific pieces of work aimed at improving areas of need identified through assessments.

In addition to the increased number of children and young people benefitting from Early Help, we have also seen an improvement in the quality of the early interventions. This means that needs are being addressed early, which stops problems worsening and is preventing children, young people and families needing more intrusive interventions at a later stage.

The emotional needs of children and young people are met at an early stage, via CAMHs practitioners who are based in every secondary school, meaning that children and young people can access appropriate services when their needs first arise, and prevent escalation to higher level services. The strong partnership working between Early Help and the East London Foundation Trust (ELFT) has meant that innovative practice has developed in the area.

In the period April 2017 to March 2018 the Intensive Family Support Service has worked with 169 families. Only 8 families in that period have had to be stepped up to Children's Services from the Intensive Family Support Service.

- Early Help services are more widely acknowledged and the implementation of new referral pathways has supported the number of children and young people who have been referred into this service.
- Positive relationships across partner agencies have ensured that appropriate challenge and escalation has taken place to support and/or safeguard children and young people.

Two Early Help Professionals have been awarded the Solution Focus Diploma offering all students in secondary schools Solution Focused Intervention. Currently we have a success range of 80% with 24 out of 30 cases showing improvements on their Outcome Stars. Of the 'Out of the intervention', 29 or 91% stated that they found the sessions either "very" or "extremely" helpful. Out of the 32 young people whom completed feedback following Solution Focused intervention, 31 or 97%, stated they would recommend the service to others.

Two Early Help practitioners have secured the post graduate qualification in Enhanced Evidenced Based Practice (EEBP) which means an in house offer of Cognitive Behaviour Therapy (CBT) is available for young people experiencing low mood or anxiety. Since the service went live in the summer of 2017 10 young people have been supported with an EEBP package.

A comprehensive parenting programme is available through the Early Help and Intervention Service offering Triple P (parenting programme) as the universal programme open to all through to the targeted programmes of Who's In Charge and Strengthening Families. 128 parents and 46 young people accessed the targeted parenting groups from April 2017 to March 2018. 119 reported improvements and reduced difficulties. 112 parents accessed Triple P during the period April 2017 – March 2018 with 95% finding the programme good or excellent and 90% finding the programme supporting them positively in their role of parent. 87.9% of families show an improvement in outcomes following Early Help intervention.

Bedford Hospital NHS Trust has worked with the Early Help Team to support the development and use of a one page Early Help referral form for children and families identified by practitioners as requiring Early Help services. Internal information sharing has increased and has seen liaison take place with community partners across health and other services to support families who may require additional support or an Early Help Assessment.

Early intervention and diversion from a Criminal Justice system is evidenced as a model of best practice and BYOS places considerable focus on working with partners to ensure proportionate; timely and effective intervention with children and young people at risk of offending. There are strong working relationships between Children's Services; Police and BYOS. The reduction in First Time Entrants (FTE) to the criminal justice system remains a national priority. Identifying how to tackle violence; vulnerability and exploitation regarding children and young people is the subject of both national; county and borough focus. The BYOS is working alongside partners to provide support for those involved in serious youth violence or at risk of involvement in county lines or 'gang' behaviours. The BYOS is an integral part of the response both Pan Bedfordshire and within Borough where there are issues of CSE and missing. Using its data as well as the work of other partners; the YOS continues to seek to identify the prevalence and patterns of risk and offending.

The rate of FTE for BYOS continues to be better than the regional and national comparators. The latest national data set Oct 16-Sept 17 has BYOS as a FTE rate of 215 per 100,000 as compared with 226 per 100,000 in the South East and 304 per 100,000 nationally. The number of Diversions (to avoid them being a FTE) within BYOS in 2017/18 is twice that of 2016/17 and four times that of 2015/16. The actual number of FTE in 2017/18 for BBC was 41 children/young people (as compared with 50 children for 2016/17). The FTE number of Bedford Borough children/young people in 2017/18 equates to approximately 0.2 % of the population of 10-18 year olds within Bedford Borough. Thus we continue to seek to reduce the numbers of FTE and increase Diversion numbers to ensure there is early intervention where children and their families need it. The Triage approach uses the EHA which means there is a direct interface between BYOS and the work of the Early Help service within Bedford Borough.

Since 2016 the BYOS has continued to develop its work around Triage and Diversion. At its simplest this is about reducing the criminal 'footprint' of a child whilst still ensuring there is appropriate and timely intervention to reduce risk of offending. It does also offer the opportunity to refer and offer other support services where needed. In 2017/18 BYOS received funding from the Office of the Police Crime Commissioner (OPCC) to support this work; part of the monies was ring-fenced for a Pan Bedfordshire scoping piece of work to look at models; cost savings and future developments in Diversion work. The resulting report from the Centre for Social Justice together with the figures from 2017/18 Diversion numbers was utilised to make a further application for 2018/19 to OPCC which was successful. There is a BYOS and Police steering group which is overseen by the Children and Young People's Strategic Board within the Police to work to improve process and policy in relation to this.

Senior managers from Bedfordshire Police have shadowed staff working in the Early Help team to identify further opportunities for joint identification of need and support between community policing teams, partners and those that can provide Early Help support and intervention. This joint approach will help ensure that agencies that have contact with certain children, young people and families are supported in a coherent and supportive way, building on strengths rather than just focussing on where there are problems.

Want to know more about children and young people not being brought to health appointments? This has been a finding in both national and local Serious Case Reviews. This two minute video asks you to re-think 'did not attend' notifications. <https://vimeo.com/196256529> (Shared with permissions of Nottinghamshire LSCB)

## Objective 2: Protecting the most vulnerable children and young people

Multi-Agency Safeguarding Hub (MASH) provides the gateway to secure safeguarding services for children and young people and a multi-agency triage service supports the children's workforce in delivering effective Early Help and safeguarding intervention for vulnerable children, young people and families. The MASH is made up of professionals from across the children's workforce and each member of the team is able to use their shared knowledge, skills and networks to ensure that children, young people and families have access to the right services at the right time. Development of robust processes and engagement with referring agencies and practitioners enhance the understanding of thresholds and improves the quality of referrals.

Children's Services received 10,285 contacts in this year which is a significant increase on last year. This amounted to 1226 referrals. The conversion rate of contacts to referrals was 13% which is only a slight decrease from 13.9% in 2016/17.

Bedfordshire Clinical Commissioning Group (BCCG) and Public Health has financially supported the development of the health provision in MASH. Co-location has been seen as a welcome approach for good information gathering and decision making. These arrangements have been reported as beneficial for prompt information sharing, greater area engagement and facilitating the culture of joint working as working together in the same place fosters mutual respect among different agencies and builds trust.

Bedfordshire Police held a number of process mapping workshops with partners to improve the way in which risk to children and young people from domestic abuse, neglect or abuse is identified, researched and disseminated. The workshops were well attended by partners and harnessed ideas for improvement, barriers were identified and removed and recommendations put forward to further integrate a partnership approach to jointly identification of risk and intervention.

The number of **Child in Need** in Bedford has increased over the past 12 months. As at 31st March 2018, 1133 children/young people were open to Children's Services as children in need, an increase from 938 as of 31st March 2017.

Outcomes for Children in Need are slower than those subject to Child Protection Plan (CPP) although most cases have benefitted from the intervention and the intervention has made a difference for children and young people, meaning that outcomes for children and young people are improving. The low re-referral rate suggests that interventions are reducing the need for further involvement in children, young people and families' lives. Children in Need that have Special Educational Needs or Disabilities (SEND) are well supported by their social workers who generally know them well. The Children with Disabilities (CWD) team has overcome a period of significant workforce instability and although the majority of social workers are agency staff, there is much less turnover and the numbers of permanent staff are slowly increasing.

Through a systematic process of senior managers reviewing all children and young people subject to **Child Protection** plans for more than 2 years and more recently, by evaluating every request for an Initial Child Protection Conference against the threshold of significant harm, Children's Services have made significant progress in safely reducing the number of children and young people subject to a Child Protection (CP) plan. In April 2017, there were 205 children and young people subject to a CP plan. As of April 2018, this has reduced to 154. Over the same period, there has been a focus on CP Plan's that have lasted for more than 2 years and as a consequence there are currently no plans that fall into this category. The rate of children and young people starting a CP Plan for a second or subsequent time is low at 7% which indicates children and young people are living in a safe environment following intervention. The percentage of children and young people who became the subject of child protection for a second or subsequent time (in the previous 2 years) is 7.2% (2017/18) which is significant in comparison to national (17.9%) and statistical neighbours (18.3%) as this suggests our current reduction in CPP numbers is safe.

In most cases, children and young people subject to a CP plan are seen within 10 working days. 2017/18 performance data demonstrates 76.9% of initial child protection conferences were held within 15 days of the Section 47 enquiry (child protection enquiry/investigation). 100% of CP plans were reviewed in statutory timescales. The Strengthening Families Model of CP conferencing is being used from May 2018. This will support in empowering families to ensure changes are made to keep their children safe.

In the last 12 months the Police have been subject to a Her Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS), inspection on child protection where the review team found the quality of investigation for teams dedicated to child abuse investigation to be very high. This investigative capability and the quality of inter-agency working found reduces the risk of on-going safeguarding concerns for children and young people. Dedicated child protection staff are now trained in using Achieving Best Evidence Language Screen (ABELS) which is a method for assessing the capability and capacity of a child to be interviewed without the use of an intermediary. Typically for cases involving children under the age of 11 officers would seek the support of an intermediary to assess the child and establish what needs they may have when providing evidence in interview. There is a national shortage of intermediaries which on occasion means the initial interview can sometimes be delayed for 6 – 8 weeks. Through using ABELS it requires less use of intermediaries and shortens the time before a child can be interviewed, significantly supporting the child's welfare and helping to bring any offenders to justice more quickly.

In this year, 105 **children and young people become looked after** which is a decrease on the previous year's figure of 135. The number of children/young people looked after by the Local Authority has decreased over the past 12 months from 265 in March 2017 to 239 in March 2018. 75% of the children/young people looked after by Children's Services live in Bedford Borough or neighbouring Local Authority and 63% of children live in long-term stable placements which are just below the national and neighbour average.

100% of children under 5 have had 2 health assessments in time and 71% of new looked after children/young people had their initial Looked After Children (LAC) medical in time. Whereas 94% of over 5's had their annual health assessment in time. 100% of LAC reviews were held to timescale in 2017- 2018.

86.7% of care leavers aged 17-21 were assessed as living in suitable accommodation which remains above our statistical neighbour and national performance however, is a slight decrease on last year's performance of 91.2%.

51.6% of care leavers aged 17- 21 were in education, employment or training which is above our statistical neighbour and national performance. Increasing aspirations and opportunities for care leavers will be a focus for practice in 2018/19 with exploration of mentoring and work experience schemes both within the Council and externally with local businesses.

BCCG commission Essex University Partnership Trust (EPUT), to deliver a dedicated Looked After Children (LAC), service in Bedfordshire. This ensures that the health needs of this vulnerable group can be identified and addressed early. The LAC Health Team co-ordinates all statutory LAC health assessments for in county and out of county placements. BCCG have identified a number of Paediatricians to carry out health assessments of LAC placed in Bedfordshire from other Local Authorities to ensure LAC placed in Bedfordshire have access to health services in a timely manner when difficulties arise. There is evidence of good partnership working between the BCCG, BBC and Health Services, and good communication processes have been established, including regular meetings. Compliance of initial health assessment completed within 20 working days timeframe - 2017-18 compliance 76.1% (A rise in performance of 65.3% over the past three years). BCCG has commissioned a dedicated LAC CAMHs from East London NHS Foundation Trust (ELFT). This service is working well and monitored via contractual arrangements.

Bedfordshire Youth Offending Service (BYOS) focused on Remand work in 2016/17 undertaking a Remand Deep Dive Audit resulting in a YOS action plan and a Remand Multi-agency Case Audit. Numbers have substantially reduced in 2017/18 which is due to better ways of working and the joint work with Children's Services. BYOS looked at their data and practice against the Lammy Review (<https://www.gov.uk/government/publications/lammy-review-final-report>) which showed that we do have black, Asian, minority ethnic (BAME) children/young people over represented particularly at Remand and Custody levels (this is a national picture alongside over representation of LAC (looked after children) and those from other cultural groups such as Gypsies and Travellers. BYOS have put in actions within the Service and started the discussion with sentencers around their monitoring and support of children and young people within Police detention. They have developed a working protocol with the Health Liaison and Diversion Service that offers out of hours work with children in Police custody. There is a revised Decriminalisation of Looked After Children protocol which is being reviewed by relevant partners. The latter has strategic join up with the support; training and interventions with Children's homes and accommodation providers in Restorative approaches to behaviour.



## Children with disabilities

As at 31st March 2018, there were 137 children in need in Bedford Borough with a disability recorded, representing 11.9% of all children in need. This compares to the national average of 12.9% (31st March 2017). Department of Education (DfE) provide 12 disability categories, of which more than one can be selected. Bedford Borough has a higher proportion of 'Autism/Aspergers Syndrome', 'Communication' and 'Learning Disabilities' than the England average.

In February 2018, Ofsted and the Care Quality Commission (CQC) conducted a joint inspection of Bedford Borough to judge the effectiveness of their implementation of disability and special educational needs reforms as set out in the Children and Families Act 2014. Inspectors spoke with children and young people who have special educational needs (SEN) and/or disabilities, parents and carers, and Local Authority and National Health Service (NHS) officers. They visited a range of providers and spoke to leaders, staff and governors about how they were implementing the special educational needs reforms. Inspectors looked at a range of information about performance and the local area's self-evaluation. Inspectors met with leaders from the local area for health, social care and education. They reviewed performance data and evidence about the local offer and joint commissioning. As a result of their findings the Her Majesty's Chief Inspectorate (HMCI) has determined that the Bedford Borough Council and Bedfordshire Clinical Commissioning Group are jointly responsible for submitting a Written Statement of Action to Ofsted because of significant areas of weakness in the local area's practice.

### Some of the main findings of the Inspection:

- In recent years, deep-seated weaknesses in the local area's wider provision have meant that leaders have not prioritised improving the quality of services for children and young people who have SEN and/or disabilities. The ongoing weaknesses in the partnership between the Local Authority and Bedfordshire Clinical Commissioning Group (BCCG) continue to hinder their ability to act on weaknesses robustly. Consequently, the reforms have not been implemented quickly or rigorously enough, and leaders are failing to meet their duties under the Children and Families Act of 2014.
- Leaders have not ensured that children, young people, families and professionals understand how Bedford Borough is implementing the 2014 reforms. Significant numbers of parents and carers who spoke to inspectors commented that the guidance given to them, often by schools, does not help families to understand their rights or the support available. Parents are too often given mixed messages and incorrect guidance about the process for applying for an Education Health Care Plan (EHCP), and more widely about the essence of the 2014 reforms. Parents, carers and professionals do not know enough about the existence of, and process to apply for, personal budgets.
- Since his appointment, the Director of Children's Services (DCS) has raised expectations about what the provision in the local area should look like. He has been incisive and tenacious in identifying the weaknesses so that the locality can better meet the needs of children, young people and their families. Leaders' evaluation of the strengths and weaknesses in the provision broadly matches the findings of the inspection team.

- The members of the Parent Carer Forum (PCF) are skilled, knowledgeable and well respected. They have been actively championing the rights of children, young people and their families, consistently raising their ongoing concerns about the provision in Bedford Borough. However, members of the PCF acknowledge that they do not represent the views of all groups of parents and carers. The DCS has sought the views of the PCF extensively since his appointment, in a genuine effort to seek rigour in the services and more transparency in how Bedford Borough addresses the concerns of parents and carers.
- Parents, carers, children and young people appreciate the support that they get from individual practitioners from schools, healthcare services and social care services. There are examples of strong practice by individual practitioners.
- Under the leadership of the new DCS, leaders in social care and education have a much broader and better understanding of the weaknesses in the provision. Professionals across education and social care are now working and communicating more closely to develop effective systems to support and safeguard children and young people who have SEN and/or disabilities. There were no safeguarding concerns identified during the inspection.

### The effectiveness of the local area in identifying children and young people's special educational needs and/or disabilities

- Strengths identified from the Inspection:
- The integrated two-and-a-half-year assessment for all children and young people is effectively enabling collaborative working between the families and professionals to support early identification of needs. Professionals build positive relationships with families and understand their needs well.
- Leaders have ensured that the processes for undertaking statutory assessments within allocated timeframes is a strength in their work. Nearly all conversions from statements of SEN to EHCPs have now taken place. Additionally, almost all assessments for EHCPs are completed within the 20-week statutory timeframe.
- Bedford Borough provides ways to support children, young people and their families when they are not successful in their application for an EHCP. These 'way forward meetings' offer guidance and advice from a range of professionals about the reasons behind the unsuccessful application and how best to support children and young people in the future.
- There is good-quality work to support the transition for young people between disabled Children's and Adults' Services. These two teams are working collectively to support the young people who have the most significant needs, so that they can access the necessary support they require as they settle into early adulthood.

For the full report please visit [https://files.api.beta.ofsted.gov.uk/80428\\_\\_1.PDF](https://files.api.beta.ofsted.gov.uk/80428__1.PDF)

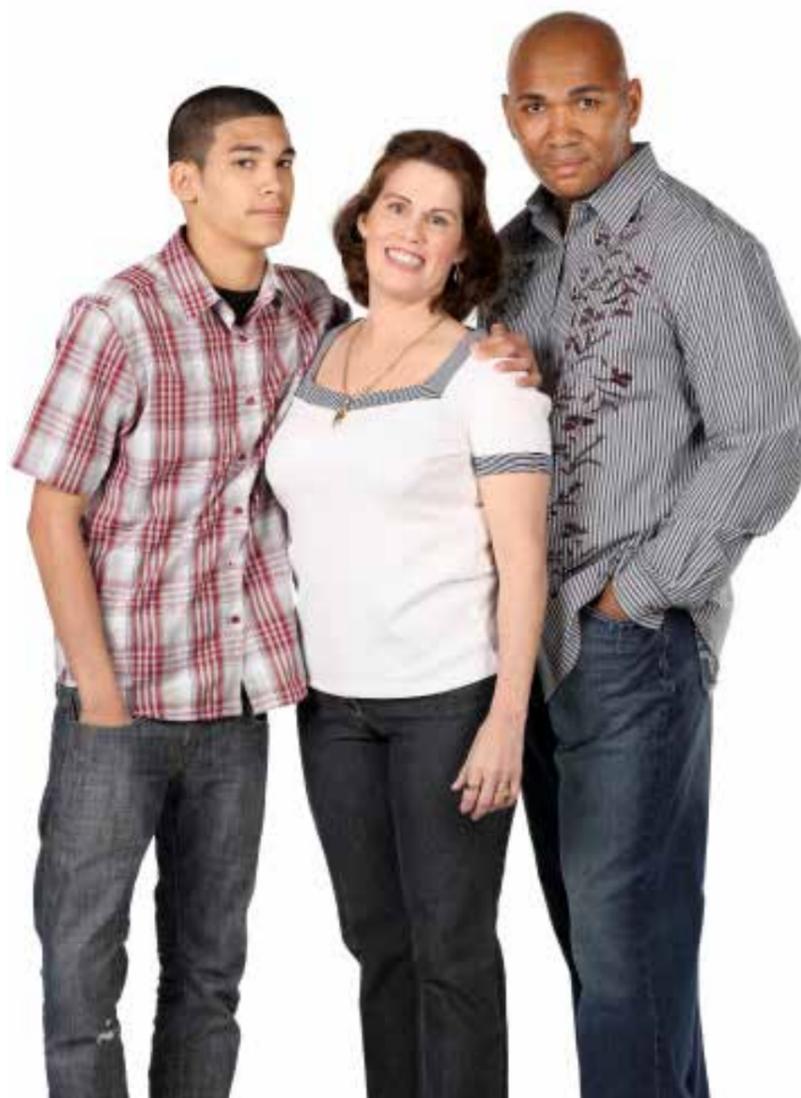
In response to the Inspection findings a SEND improvement board has been developed to begin addressing the areas for development identified in the report. BBC and BCCG have been requested to report back to the BBSCB on their SEND Improvement Plan in 2018.

The Children with Disabilities Team has continued on their improvement journey over the past year, working closely with colleagues to ensure early notification and timely transition for children and young people moving to Adults' Services. The positive impact of this work was recognised within the BBSCB Multi-Agency Transitions Audit as well as the SEND inspection. The CWD team is working closely with SEND work streams in order to support improved practice across the service for children with disabilities.

A BBC protocol for preparing for adulthood was completed in 2017 and presented to the BBSCB. The Children with Disabilities team participate in transition tracking meetings, which were developed as a response to the learning from the Serious Case Review (Patrick). The meetings track all children and young people with an Education, Health and Care Plan (EHCP) and are multi-agency meetings. Children's Services contributes to a number of meetings and forums which enable smoother transition arrangements and are related to the 0 - 25 agenda and these improve and develop best practice. There are now regular meetings with the Bedford Parent Carers Forum that are being minuted with an action log to improve relationships and develop better communication and ascertain the views of parents and carers relating to the service they receive from Children's Social Care.

Following the Pan Bedfordshire spotlight event on Children with Disabilities in January 2017 all agencies provided impact statements to the Board in response to the learning from the event.

A Multi-agency audit on Transitions was conducted 2017, to seek assurance that learning from the Patrick and Thematic SCR has been embedded; to ensure that transitions between Children and Adult Services are timely and involve the young person and family; and to identify both good practice and learning to improve practice in supporting young people through Transition. The audit aimed to review 3 cases where children and young people were in the transition journey.



Some examples of good practice;

- 2 cases demonstrated timely reviews of the Education, Health and Care Plan.
- 2 cases (both of the young people under age 18) were identified early as part of tracker meetings held with Adult Social Care and therefore early transition planning had begun.
- 2 cases had a named GP (both of the young people under age 18) 1 case had a named Community Paediatrician.
- 2 cases demonstrated good involvement of the family in the Education, Health and Care Plan.
- Clear evidence on 2 cases that the voice of the child impacted on planning.
- Good practice seen in the preparation to adulthood worker who bridges Children's and Adult's Social Care and supports the transition between the services. Part of the responsibility is to review assessments undertaken already and those required, which includes consideration and discussion of a carers assessment.

Work is ongoing to seek assurances of this continued good practice is evident in:

1. Carers assessments completed
2. Early transition planning and young people discussed as part of tracker meetings with Adult Social Care
3. Young People with additional needs having a named GP
4. Evidence of improvements made to:
  - The Think Family Approach underpinning the work with families through transition
  - The join up between the Education, Health and Care Plan and Child In Need plans
  - Ensuring that all professionals working with the young person are involved in the Education, Health and Care Plans.

Want to know more about safeguarding children with disabilities then please visit our website:

[http://www.bedford.gov.uk/health\\_and\\_social\\_care/children\\_young\\_people/safeguarding\\_children\\_board/practitioners/disabled\\_children.aspx](http://www.bedford.gov.uk/health_and_social_care/children_young_people/safeguarding_children_board/practitioners/disabled_children.aspx)

## Priority - Neglect

From April 2017-March 2018, Neglect was a feature in 3.6% of all contacts to the MASH and a feature in 13.3% of all Assessments completed. As of March 2018, of the 154 children/young people subject of a Child Protection plan, 45.5% (69 children/young people) were under the category of Neglect. Over the year 2017- 2018, Neglect is the highest category of abuse identified at initial child protection conference at 40.8%.

Bedford Borough Council launched the Graded Care Profile 2 (GCP2) a tool for Social Workers and Health practitioners to use when they visit families at home to do an assessment. It looks at different aspects of family life which are 'graded' and questions are broken down into 4 areas:

- physical, such as quality of food, clothes and health.
- safety, such as how safe the home is and if the child knows about things like road safety.
- love, such as the relationship between the carer and child.
- esteem such as if a child is encouraged to learn and if they are praised for doing something good.

GCP2 is designed to be used with families where someone is concerned about the care of a child. The number of visits needed depends on the family. After all the visits, practitioners put the results together and talk it through with the family. The Early Help Team has a series of training sessions planned. EPUT children service professionals have worked collaboratively with BBC Early Help Team to implement the GCP2 training and offer support to professionals using this tool to measure neglect. Feedback from a professional "I found the tool to be very comprehensive and it was a way to methodically complete the assessment and highlight areas where without it, vital areas of identifying neglect could have been overseen".

Over 200 practitioners have been trained in the use of the GCP2 and as of March 2018, 73 GCP2 assessments had been completed.

Performance data, audits, case reviews and feedback have been used to evaluate where BBSCB is in relation to safeguarding children and young people from neglect. It is a challenge to evidence impact against our Neglect Strategy using performance data as the current dataset is very limited in the information provided specifically in relation to Neglect. Also, an increase or decrease for example in referrals with the main concern being neglect does not necessarily correlate to improved practice. Work is underway across all 3 LSCB's to review the datasets in order to determine whether they can be aligned and streamlined and how we can use measures which demonstrate impact on outcomes for children and young people.

What is positive from performance data is that in 2017/2018, for the first time, Neglect Child Protection Medicals were requested and undertaken. This demonstrates improved awareness and understanding of Neglect and the impact on a child or young person's overall health. However, we also know that from two recent SCR's (one still to be published) that we are still not identifying neglect cases early enough.

The first objective within the Pan Bedfordshire Neglect Strategy was 'to improve awareness and understanding of neglect across all agencies so that early identification is achieved and there is effective working between services working with children, young people and adults'. 90% of delegates at the Pan Bedfordshire Neglect Conference in March 2017 rated their knowledge of neglect between 8 and 10 after attending the conference compared to 61% who gave a rating of 8 and above before the conference. This demonstrates improved awareness and understanding of neglect across agencies.

The second objective within the Strategy was 'to improve the recognition, assessment and support of children and young people and their families where neglect has been identified but before statutory intervention is required'. The data also demonstrated that Children's Services were not using GCP2 as an assessment tool in cases of Neglect as only 2 out of 22 cases audited where Neglect was a feature had a GCP2. This is being addressed by BBC Children's Services. Unfortunately, there is no data on the number of GCP2's completed, and this is an ongoing challenge for the BBSCB in 2018 - 2019. However here are some case examples of where the GCP2 has worked well;

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**Case study A:** Professional concern with respect to speech and language developmental delay associated to lack of stimulation and supervision in the family home. GCP2 undertaken with young mother and grandparents, actions identified age appropriate play and toys, attendance at community groups, Speech & Language assessment and follow up. Evidence that progress is being sustained and child is developing well.

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**Case study B:** Concern about hygiene of school age child and, on door step visit, awareness of clutter and unpleasant aroma from the home, history of non-engagement with professionals. Completed the GCP2 with parent; allowed parent to share their situation and verbalising plan of action for clearing and cleaning, facilitated professional to access all rooms in the house and call Team Around the Family meeting (TAF). GCP2 assessment shared and provided focus for multi-agency Early Help support plan. Repeat GCP2 assessment planned.

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**Case Study C:** Police raised concerns about the home conditions after attending a home. An Assessment uncovered that mother struggled to stay on top of the home conditions due to her physical disability; however, it was noted that there were a number of protective factors including the relationship between the mother and child. The Intensive Family Support Team supported the family and undertook a GCP2 with the mother. This was then shared with all professionals at the initial Team Around the Family meeting. The actions identified via the GCP2 helped inform the plan which was reviewed at the next TAF and evidenced progress being made. The child's lived experience was improved as her bedroom was clear of clutter, her hygiene was improved and family activities were observed.

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A thematic audit of 5 cases was undertaken in Children's Services where Neglect was a feature. 1 was a CiN and 4 were on a CPP. All of these families had a previous history; however, this was the first time where a CPP (in the relevant 4) was used. All of the case files had a chronology which supported decision making. All had an up to date assessment which reflected the child's lived experience and all plans were reviewed in time. Areas for improvement were noted as ensuring that for all cases that feature neglect a GCP2 is used and to improve handover visits for families where there was a change of social worker.

**Case Study D:** Concerns were raised for a child due to ongoing domestic abuse between parents. As a result, a child protection plan was put in place and mother was supported to move out and live independently with her child. This was the first time mother had lived independently and struggled. A GCP2 was completed with mother and supported her to see what the issues were which led to a plan to improve the home environment for her child. The social worker said that the mother hadn't previously engaged with social care, but with the GCP2 she 'got it' and could visually see the progress she was making which helped her get involved with it. The social worker stated that the GCP2 promoted parental engagement, identified strengths and positive changes and helped to demonstrate to mother exactly what needed to happen.

**Case Study E:** Concerns were raised for a family regarding neglect. There was a history of referrals regarding neglect going back to 2005 with a period of child protection in 2015. The family was being supported under CiN in 2017 when the social worker used a GCP2 to evidence progress made and provide an evidenced reason to step down to Early Help. The GCP2 promoted mother's level of engagement and allowed her to see where her strengths lay as well as where specifically work was needed for the children. This will now be reviewed by the Early Help worker in December 2017.

**Professional & service user feedback on the GCP2;**

*"Mother engaged very well, and assessed herself as I would assess; surprisingly perceptive and at end stated that she was pleased that she had some direction and understanding of the professional's concerns."*

*"I perceived difficulties were about if client would accept this way of assessing need. Found that as it was clearly written, client engaged very well with the process. The challenge will be consistency."*

*"The handbook was shared; mother and I went through it together. I was not the expert as it was only second time of using it (GCP2). Found it a very positive experience and helped dialogue about the home."*

A Neglect Conference was held in 2017 and was well attended by 309 delegates.

Understanding Assessing Issues Reflective  
 Identifying Neglect GCP Experience Event  
 Families Mental Health GCP2  
 Graded Care Profile Training Resources  
 Awareness Daily Basis Impact Learning  
 Child Gave Thinking Cover Safeguarding Regarding  
 Neglect Cases Improve



A direct result of the conference has been that many professionals and settings have accessed the GCP2 course as well as other safeguarding training and have begun to use the tool for family assessments. Attendees came away from the event with a much clearer understanding of neglect and how to respond when it is evident and have cascaded their learning to their managers and their teams as part of in-house training and supervision back in their organisations. There has also been an increased confidence in working alongside other agencies and participating in multi-agency case reviews and meetings. The following feedback comments and areas for improvement were collected from the immediate post course evaluations;

*Excellent training day, found the information about the GCP2 helpful - I already know a great deal about this subject, but the course was set at a good level and still held my interest and I came away with some good ideas and tips for working with families. - Really good training course, the best I have been on in a long time. - Highlighted the variation of understanding and identification of neglect across Service and Organisational area. Highlighted the benefits of Early Help and preventative approaches which Universal Services can take without the need for statutory intervention. - Very beneficial working in housing for over 23 years and we come across a lot of issues around neglect so I felt I gained a lot more knowledge where I can contact people in making sure the relevant action is taken and linking in with other agencies is a key role.*

Capturing the 'voice of the child' was a standout theme in the conference and since attending, delegates have stated that this is now at the forefront of their minds when making assessments and during other safeguarding working. They have been able to directly use what they have learnt from the day not only to guide them in their own practice but also to assist their colleagues, managers and other settings and to provide support for children, young people and their families.

Delegates who went back to their settings and delivered neglect training to their staff based on material and learning from the conference have been able to evidence an increased confidence in identifying and responding to cases of neglect. They have been described as being more vigilant and more focussed on the child's voice and daily lived experiences as well as having an increased awareness to look out for issues at home and behind the scenes.

The Police have seen a gradual rise in the number of child neglect cases (22%) 9 cases in 2015 and 11 cases in 2017 and no particular pattern for the amount of cases of child neglect has been identified. Although there has been a rise in cases of child neglect in the last 3 years fortunately the number of child neglect cases is relatively low in comparison to other crimes. There is a clear upward trend of members of the public reporting child neglect to the Police. Additionally, there is a dramatic rise in the number of family members reporting child neglect. This suggests that there is more public awareness of child neglect, which may mean that people are more confident to report their suspicions to the Police as they are more certain of the signs as well as the potential effects of child neglect. This could perhaps be having an effect on the amount of safeguarding professionals reporting cases as often members of the public such as families/ neighbours see the signs first and so are in a position to report crimes before safeguarding professionals become aware of the issue.

Bedfordshire Police conducted an audit of 8 child neglect cases that were investigated by their dedicated child protection investigation team, CAVAA. The quality of investigation, inter-agency practice, safeguarding and case management were found to all be excellent. The Police are aware that child poverty is expected to increase in the coming years and that this increases the risk of more child neglect cases. So to help better identify these cases at an early stage there has been a dedicated programme of Police staff awareness raising, which has included case studies and training concerning how to make referrals and the support offered by other agencies. This approach has increased the quality of subsequent referrals and will be built on through a dedicated child protection training programme being delivered to all frontline staff by 2019.

Recent child neglect case reviews have underlined the importance of ensuring there is early and effective medical assessment. If the child's physical development is not recorded soon after the child is taken into care, it is much more difficult to show how the child's physical development was impaired by their needs not being met. If this baseline can be captured quickly, any significant gains in physical and mental development while in care can help investigators prove a criminal case of neglect. To ensure this medical assessment is completed officers have been briefed on learning from SCRs to ensure that at Strategy Meetings officers are assertive in ensuring a Child Protection medical takes place early and that it is clear what is meant by a "medical" for Child Protection cases.

Want to know more about neglect then please watch Michelle's Story.  
This is the story of Michelle and her experience of neglect as she was growing up.  
Click the picture/link to watch the video.  
<https://www.youtube.com/watch?v=0X8gsyk0Dv8>

## Child Sexual Exploitation (CSE) and Missing Children and Young People

### CSE

At point of contact for 17/18, 1.9% of contacts (198) were identified as at risk of CSE. This increases to 5.6% (89) of children/young people with an assessment completed identified as at risk of CSE. As at the end of March 2018, 28 children/young people have been identified as currently at risk of CSE, of which 11 were LAC, 1 child was on CP Plan and 16 were CiN.

Children's Services has a CSE Single Point of Contact who is co-located with the Police CSE Team for one day per week. Early Help has a CSE lead who works with schools and education settings regarding children/young people at risk of CSE in order to support with early identification and signposting to support services. Bedford Early Help Team have worked with Link to Change to develop a work shop aimed at year 7 + children in School around the issues of CSE/Online Safety and how to report it. They have gone into Schools to deliver this workshop and there are also plans to offer a similar workshop to parents. They also provide information and advice leaflets to share with parents/carers and children/young people.

Children's Services work closely with Link to Change, who specialise in working directly with young people at risk of or experiencing CSE. This has been expanded by 0.5 of a FTE which has increased their capacity to support more children and young people. They also ensure that any child at risk of CSE has a completed CSE risk assessment and referral to Link to Change. There is on-going mandatory training for social workers to attend in relation to CSE.

Is a charity that provides services to children and young people aged 12 to 26 in Bedford Borough who are involved in, or at risk of Child Sexual Exploitation (CSE). They received an increase in referrals for 1-2-1 support for children and young people and were also involved in other work over the year:

- Supported Chelsea's Choice and Crashing
- Delivered CSE prevention workshops in partnership with Early Help
- Delivered awareness raising sessions to professionals
- Delivered targeted group work in schools, hostels, foyers and children's homes
- Organised activities for our young people such as trips to theme parks or to the Theatre.

For more information please visit [www.linktochange.org.uk](http://www.linktochange.org.uk)

BBC has a Single Point of Contact (SPOC) for CSE/Missing who attends a weekly conference discussion with Central Beds CSE Co-ordinator, Luton CSE Lead and CSE Police, to discuss our most vulnerable and high risk children and young people in relation to Missing and CSE, and also discuss any recent trends/Intel or Operations. BBC have a CSE/Missing Panel every fortnight and social workers are able to bring their case to this panel for discussion, similar to a case clinic, where a Panel of professionals experienced with CSE/Missing issues, including the SPOC, give advice and supervision to ensure the social worker is doing everything they can to keep the child

safe.

The work on CSE, Missing and trafficking is led by a Pan Bedfordshire Strategic CSE and Missing group chaired by a local Director of Children's Services. The group reports quarterly to the respective LSCBs on progress against the agreed action plan.

The following pieces of work have been completed in this reporting period:

- Pan Bedfordshire Child Sexual Exploitation Strategy 2018-2020 updated.
- The CSE Panel (CSEP) following the National Working Group's (NWG) review which highlighted that it was not sufficiently meeting the needs in Bedfordshire became the CSE Group and then subsequently the Child Sexual Exploitation and Missing Group (CSEM). This group looks at current trends, hotspots and disruption activity.
- Pan Bedfordshire CSE & Missing Action Plan – reviewed and updated.
- Pan Bedfordshire CSE Communication Plan for 2017 and 2018 developed to address local and national CSE trends and concerns.
- The first Bedfordshire Against CSE Conference held in September 2017 to raise awareness on CSE with the 'Voice of the child and Voice of the Parent.'
- Bedfordshire CSE Disruption Toolkit embedded across Bedford Borough.
- Bedfordshire CSE Practitioners toolkit developed.
- Most hoteliers in Bedford Borough have now received a dedicated, face to face briefing on the risk of CSE in hotels. Under the banner of Operation Makesafe several hotels have since contacted the Police to report suspicious behaviour between young girls and older men. This initiative has directly led to the arrest of suspected sex offenders and the protection of young people. Without this education, it is unlikely these episodes would have been identified and reported.

## Overview

- Most crimes occurred in Luton 35 (45%), Bedford 23 (30%) and Central 19 (25%).
- Overall there are 56 victims and 77 offenders. Some victimless crimes have been recorded (25) which seem to mainly relate to internet based crimes.
- Most of the victims are female aged 16 or under. The youngest victim is 10 years old. 82% were White North European, 7% Asian, 5% Black and 5% not recorded.
- Most victims are female and most offenders are male.
- Most offenders are male, aged under 35. 36% the ethnicity is not recorded, 29% White-North European, 22% Black and 13% Asian.
- Most crimes occur in a dwelling of some kind (56) with dwelling (type unknown) being the most common location. Other locations include parks, fast food takeaways, car parks and hotels.
- A number of complex CSE operations throughout Bedfordshire are underway.

For cases where there is information to suggest a child is at risk of CSE, but the child denies this to be the case Police and partners can find it difficult to gain a full understanding of the risks. Recent learning has shown that where there is a long term relationship in place with a trusted professional (for those children and young people most at risk of CSE), disclosures can be made of CSE abuse some months after the initial information. Bedford Borough is now trialling the use of a trusted professional to work with the specialist Police team once a week assesses the effectiveness of this approach.

One of the key National Working Group CSE recommendations was to ensure Information Sharing

was formalised and reviewed between Partners. We now have a CSE Tier 1, Tier 2 and a Tier 3 agreement signed and in place. These documents have been confirmed by the Information Commissioner's Office as best practice, and critically enable partners to share information and detail in regards to CSE in all its facets.

A Communications Campaign has been developed for the year to raise awareness with the public of Bedford Borough about what CSE is; what the warning signs are and how to report concerns. A Bedfordshire Against CSE conference was held on 28.9.17 as part of the on-going county-wide campaign 'The More You Know The More You See' which launched in 2015. Speakers on the day included Sammy Woodhouse, survivor of the Rotherham abuse scandal, and Lorin La Fave, mother of Breck Bedner, who was groomed via the internet and murdered by someone he met online. Richard Denton, Children and Young Persons Development Co-ordinator for Bedfordshire Police, gave an input on how to keep children safe online, and the University of Bedfordshire delivered a session on how to improve the way in which Police and partner agencies engage with young people. The message to the delegates was that CSE is a very real issue and it's happening in Bedfordshire so it is important that we work together to help tackle it better protect children and young people in Bedford Borough.

## 'Chelsea's Choice'

BBSCB with support of Early Help services commissioned 'Chelsea's Choice' for another year. This play shows how children/young people are groomed by adults for the purposes of sexual exploitation and is based on a true story. A number of partner agencies supported every performance of 'Chelsea's Choice' and provided support for those wanting advice or making disclosures following the performances. They were asked how they would like to be informed about CSE in the future and the young people clearly expressed a view to see more plays as a way of informing them of these issues.

## 'Crashing'

This was a new play commissioned by BBSCB to raise awareness that boys as well as girls can be victims of CSE. This play is based on a true story. As above, partner agencies were available to the young people as they need and advice and support following the performance.

Find out more about CSE then please watch Know the signs - a victim's story - a video from West Yorkshire Police told from a victim's perspective to raise awareness of the signs of CSE - <https://youtu.be/pnTYFeZNLkQ> and visit the Bedfordshire against CSE website <http://bedfordshireagainstcse.org/>

## Missing children and young people

The multi-agency response and management of missing has continued to be a priority for BBSCB this year. Children/young people missing from home, school and care is a priority issue for the Local Authority and partner agencies. The Child Sexual Exploitation and Missing Group (CSEM) works to ensure a coordinated multi-agency approach to concerns about CSE and missing children and young people and to maintain an overview of the emerging issues in Bedfordshire.

There is a weekly Single Point of Contact Meeting between Children's Services and Police where the top 5 high risk young people at risk of CSE/Missing, are discussed, themes are highlighted and intelligence is shared with the strategic group (CSEM) via a monthly highlight report. There is a monthly missing GOLD group, which provides strategic oversight of intelligence, highest risk persistently missing children/young people, themes, issues and joint working.

Historically there have been significant challenges for Bedford Borough in ensuring children and young people had a Return Home Interview (RHI) in appropriate timescales and that this fed through to effective intervention. There has been significant and ongoing work with Police colleagues to ensure the Local Authority is aware of all missing children/young people at the point they go missing to enable an effective response and return home interview. Bedford Borough commissions Barnardo's to undertake independent RHI's. As at March 2018, 73.3% of children/young people who went missing had a RHI in appropriate timescales, which is a significant increase in comparison to 36.6% in 2016/17.

BBC's Single Point of Contact (SPOC) for CSE/Missing contacts social workers for those children and young people placed in Bedford Borough by another Local Authority to ensure they are aware that the child/young person has gone missing, and request that a RHI is completed and sent to the BBC SPOC. The SPOC will escalate any concerns in relation to a child/young person placed in Bedford, especially where they continue to go missing or are at risk of CSE. We would normally chair a strategy meeting and invite the other Local Authority to take action to protect the child/young person.

Bedfordshire Police have introduced a new missing person notification system which means that incidents of children and young people going missing or being found are reported to partner agencies within 4 hours, supporting an increase in the number of RHIs being completed. The information from these interviews helps professionals understand what was driving the disappearance, whether the child/young person has come to harm and provide information that may aid finding the child/young person if they go missing again. This step change in approach has increased the chance that children and young people will be better safeguarded. Trigger plans are maintained for the highest risk children/young people that go missing. These are continually updated and utilised by frontline staff to help direct immediate lines of enquiry. Following testing and review they have been shown to reduce the amount of time a child/young person is missing, thus reducing the risk of harm.

To improve the quality of frontline practice, every member of the Police response teams has been trained on the Missing Person systems, the risk to CSE and what happens with the information they provide. There is now a feedback process in place which is helping to increase the quality of initial investigation. An interactive drama has been delivered to all frontline staff called "missing the picture" which helps to shape the attitude and culture of frontline staff so they better understand the trauma and risks associated with some children and young people that go missing. A better educated workforce are better able to respond to the child/young person's needs. Practice is reviewed at a variety of Police and partnership meetings. As a result of enquiry and review it was found there could be better liaison between those staff completing return home interviews for missing children/young people and the Police. This learning has been put into place which means where a child/young person goes missing again, there is a better understanding of the potential causes for the episode as well as the risk factors.

An area for improvement is how partners in Bedford Borough can help safeguard a child/young person from another authority who continually goes missing from a placement within Bedford Borough. Police are working with partners to improve the communication flow, and lines of accountability to ensure children and young people placed in this area are properly safeguarded.

Want to know more about missing children and young people please visit our website: [http://www.bedford.gov.uk/health\\_and\\_social\\_care/children\\_young\\_people/safeguarding\\_children\\_board/professionals/missing\\_children\\_young\\_people.aspx](http://www.bedford.gov.uk/health_and_social_care/children_young_people/safeguarding_children_board/professionals/missing_children_young_people.aspx). Procedures can be accessed via [http://bedfordscb.proceduresonline.com/chapters/p\\_missing\\_home\\_care.html](http://bedfordscb.proceduresonline.com/chapters/p_missing_home_care.html) and watch this video [https://www.youtube.com/watch?time\\_continue=2&v=Z293D3\\_OPbs](https://www.youtube.com/watch?time_continue=2&v=Z293D3_OPbs)



# Child Criminal Exploitation and Knife Crime

Knife Crime; County Lines and gangs are aspects of national concern and debate and have been high on the agenda within Bedford Borough over the past 18 months. The drive is to look at how to manage violence; vulnerability and exploitation; to understand the needs and issues for these children and young people recognising the links between CSE, Missing and Criminal Exploitation. There is considerable work between partners Pan Bedfordshire regarding this and on a borough level. The aim for strategic join up is from the Chief Executives group down to those operationally managing services and interventions at a local level.

Bedfordshire Youth Offending Service (BYOS) is rolling out an extension to their Risk and Safeguarding Panel (RASP) in June 2018 to encompass the Police Serious Youth Violence list which is intelligence led piece of work which identifies the top 100 or so children/young people across the county where there is intelligence, convictions; arrests for weapons and violence. They recognise the need to be aware of patterns and contacts between individual children/young people is essential and can ensure we are working as effectively together with those at risk as possible.

BYOS provides data and qualitative information about the experiences; presentation and journey of children and young people where there are issues of violence; vulnerability and exploitation. They work closely with Early Help and Children's Services to pull together the overall picture for Bedford Borough. The numbers of offences with a substantive outcome for possession of a weapon (including knives) has risen considerably in the past three years. The numbers for BBC: possession of a weapon 2015/16 - 7; 2016/17 - 23 (of which 18 knife possession); 2017/18 - 24 (of which 18 knife possession).

BYOS has worked with the Police through the knife crime action plan on the development of a schools toolkit and they offer specific weapons awareness work through group work and specialist individuals commissioned to work with those at risk of or involved in serious youth violence. BYOS recognise that the issue is wider than that who have a specific criminal justice outcome for a weapon; assessment, planning and intervention ensures that where there are risks and intelligence to suggest use of or carrying a weapon that this is built into work with a child/young person.

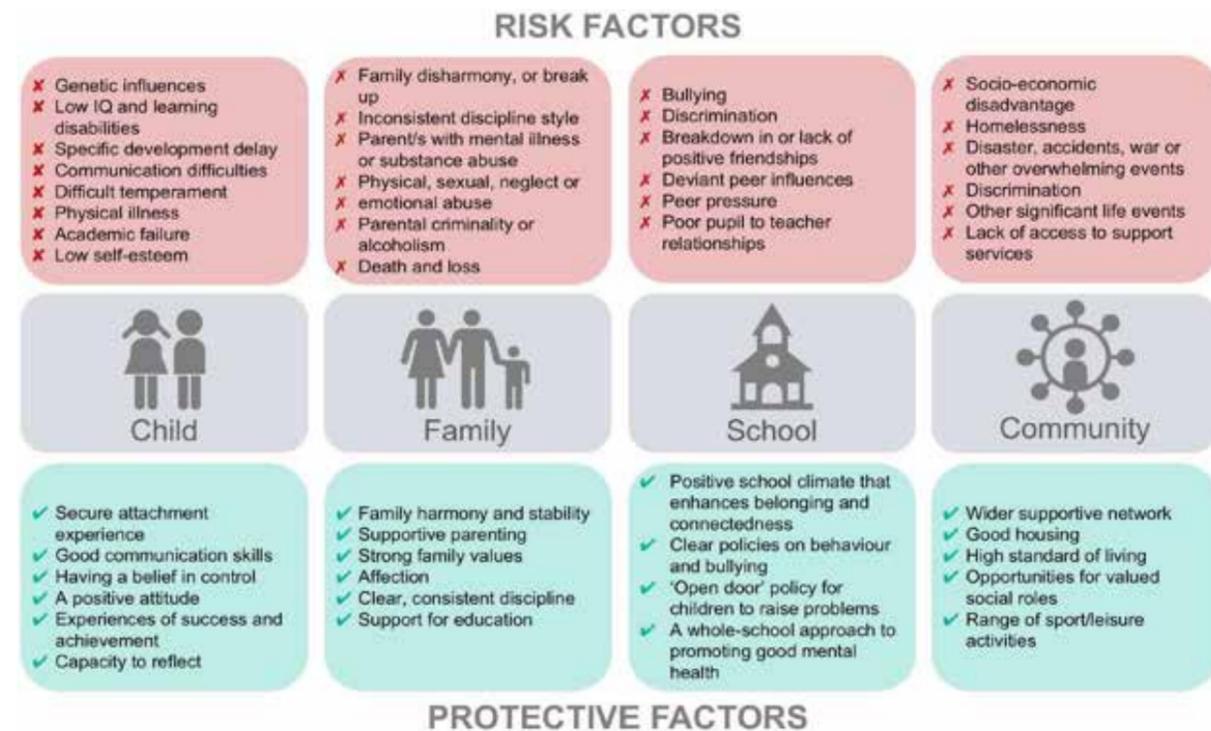
Through the work of partner agencies in a number of CSE and Missing meetings within the Borough and Pan Bedfordshire BYOS recognise the overlap with many children/young people between this and the risk of criminal exploitation and offending. They continually acknowledge the challenge of managing risk and vulnerability for children/young people who may be identified as those involved in CSE themselves and criminal behaviour but who are still children; still victims themselves and still requiring safeguarding.

Want to know more about County lines then visit our website  
[http://www.bedford.gov.uk/health\\_and\\_social\\_care/children\\_young\\_people/safeguarding\\_children\\_board/practitioners/county\\_lines.aspx](http://www.bedford.gov.uk/health_and_social_care/children_young_people/safeguarding_children_board/practitioners/county_lines.aspx)  
 and watch this <https://www.youtube.com/watch?v=pLhGpS1f-F0>



# Priority - Mental health and emotional wellbeing of children and young people

An estimated 2,200 children/young people aged 5 to 16 have a mental health condition, and half of lifelong mental illness manifests by age 15.



Poor mental health is associated with a range of risky behaviours in childhood and adolescence including smoking, drug and alcohol misuse. Over 2,200 children and young people aged between 5 and 16 years in Bedford Borough are estimated to have a clinically diagnosable mental disorder, and 1,100 young people aged between 16 and 19. Most of the risk factors for poor mental health are linked to social inequality and the home environment, including:

- Parents' substance misuse
- Low birth weight
- Poor parental mental health
- Social deprivation
- Abuse in the home

Several of the risk factors described above for poor mental health are considered to be “adverse childhood experiences”, that is experience and events in childhood that have long term impacts on a child/young person’s life chances. It is estimated that nearly half of all children/young people in the UK are exposed to at least one of the adverse childhood experiences listed in the diagram above and 1 in 12 are exposed to four or more.

Adverse childhood experiences are more common in children and young people from more deprived backgrounds, and are associated with risky behaviours including unintended teenage pregnancy; smoking, drug and alcohol misuse.

The issue of children and young people’s mental health is a priority for the BBSCB and other two LSCB’s in Bedfordshire and therefore it was agreed that a Pan Bedfordshire multi-agency audit should be carried out to evaluate current practice within this area. Prior to the audit a survey was sent to frontline practitioners around their confidence in dealing with cases which involved mental health concerns. The results from the survey helped to focus and plan the audit. To seek assurances that partner agencies are appropriately identifying and responding to the needs of children/young people experiencing poor emotional wellbeing and mental health. It also aimed to capture any learning needs which will support improvement in practice aimed at strengthening safeguarding for children and young people. The audit included accuracy of case details, underpinning this was the ‘Voice of the Child’ and compliance to procedures. See page 57 for more information on the audit findings.

The BBSCB has accepted the report and are responding to the questions posed. All partners are asked to share an audit summary widely within their respective organisation, ensuring the learning is understood and any development activity is undertaken in order to improve outcomes for children and young people. For more information please access the summary at [http://www.bedford.gov.uk/health\\_and\\_social\\_care/children\\_young\\_people/safeguarding\\_children\\_board/practitioners/mental\\_health.aspx](http://www.bedford.gov.uk/health_and_social_care/children_young_people/safeguarding_children_board/practitioners/mental_health.aspx)

Highlights from the CQC Thematic Review of Mental Health Services for Children and Young People identified that there were challenges to local services in Bedford Borough arising from the increasing population of children and young people. However, the partnership understands the needs of its children and young people and has a good grip of data that supports strategic planning. The Review found accountable and responsive strategic leadership in Bedford Borough demonstrated by their robust self-assessment. The Joint Strategic Needs Assessment (JSNA) and the Director of Public Health report are strongly focused on children and young people and mental ill-health. Commissioners and providers are all actively engaged in the work of the Health and Wellbeing Board and this ensures a good understanding of the area’s needs and commissioning requirement. Partner agencies are also engaged in ongoing discussions and meetings to strengthen the work to engage with black and minority ethnic communities and young people who identify as Lesbian, Gay, Bisexual, Transgender and Questioning (LGBTQ), both of whom are currently under-represented in the cohort of young people receiving mental health services.

There is good collaboration between East London NHS Foundation Trust (ELFT) and BBC to improve the offer for children and young people with emotional wellbeing and mental health needs in local schools. The CAMHs practitioners in each secondary school, as part of the Bedford Borough Early Help Offer, are proving to be a strong source of Early Help and support, both to students in building resilience, and to school staff who have benefitted from the uplift in skills and knowledge.

BBC provides extensive support to children and young people through a good, local Early Help offer. CAMHs practitioners are fully embedded within Early Help teams and this facilitates quicker assessment and less delay in delivering targeted support for those children and young people experiencing lower level emotional wellbeing issues.

A good service is offered to children and young people who are looked after by BBC with a dedicated team who prioritise their care and treatment, although the identification of need is not always timely. The CQC Inspection tracked a number of cases which illustrated a good variety of care and treatment options offered to children and young people in Bedford Borough. The eating disorder service and schools programme were highlighted as examples of services that children and young people speak positively about. The single point of entry (SPoE) to the mental health services for young people supports children and young people to get access to the right service. The role of the SPoE is enhanced by the schools programme that acts as an additional 'front door' into mental health services.

### CASE STUDY

#### BEDFORD BOROUGH: INNOVATING BY ACTING ON FEEDBACK

The specialist child and adolescent mental health (CAMHS) service in Bedford Borough runs a participation group that enables children and young people using the service to share their feedback and ideas about how to improve the way the service operates. Members of the participation group told staff that they did not always feel comfortable speaking to adults about their feelings and experiences and they would prefer to have the option of talking to one of their peers.

Staff and senior leaders at the CAMHS service and their partners in Bedford Borough Council's children's services not only listened to these concerns, but worked together to take action. A peer mentoring scheme is now being piloted in six local secondary schools.

The scheme involves training school nurses, the CAMHS team, school teaching staff, and staff from Bedford Borough Council's 'early help' service for families. In turn, these members of staff then provide training to young people who are in the final three years of school so they can become 'Wellbeing Ambassadors'. These Wellbeing Ambassadors are being trained in listening skills, safeguarding, and tools to help young people build their emotional resilience. Once trained, they can offer one-to-one peer support for younger children, especially those in Year 7 who are entering secondary school for the first time.

The scheme will be rolled out to all secondary schools in Bedford in September 2018.

Children and young people in mental health crisis who attend the Accident and Emergency department (A&E) at Bedford Hospital experience a timely and robust response from the A&E liaison team. Assessments are comprehensive and ensure children and young people receive safe care and treatment at a time when they are particularly vulnerable.

The 'voice of the child' is prominent in individual care planning. Through the case tracking of individual children and young people, the CQC Review found evidence of children and young people being engaged with their plans and enabled to make choices about suitable interventions. For example, one case we were tracking showed that a young person had been enabled to receive more practical based therapeutic support rather than a programme of Cognitive Behaviour Therapy (CBT) he was finding it difficult to engage in.

Bedford Borough Health and Wellbeing Board and service providers have a well-developed approach to involving children and young people in the co-production of mental health services. Through focus groups, forums and surveys, children and young people are enabled to provide their contribution to the design of services and we saw plentiful evidence of the partnerships

commitment to action as a result of these activities. These include; the development of a single point of access, a flexible approach to commissioning to enable more innovation and responsiveness, a commitment to making best use of resources to deliver more services in the community and a renewed focus on transition and planning. A peer mentoring scheme piloted in Bedford Borough equips older students in school settings, known as mental health ambassadors, to provide lower level support to younger peers in managing resilience.

The eating disorder service delivered by ELFT provides safe and effective interventions for this vulnerable group of young people. One parent said "I feel that my daughter would not be here if it wasn't for the eating disorder team." A young person reported "Overall my experience has been really, really positive. They have helped me out. I was going downhill and if it wasn't for CAMHS I wouldn't be where I am today."

For the full report please access her via [https://www.cqc.org.uk/sites/default/files/20180308b\\_arewelisting\\_report.pdf](https://www.cqc.org.uk/sites/default/files/20180308b_arewelisting_report.pdf)

27% of referrals from Bedford College to the safeguarding team related to mental health, down from 34% in the previous academic year. A CAMHS Mental Health Practitioner has been allocated through the Future in Minds school programme for 5 years. They will be based at each site for half a day and offer training to staff on mental health topics, staff consultation and one to one assessments of students. This role was introduced in January 2018 and has contributed to the decline in mental health referrals to the safeguarding team due to early intervention by CAMHS or the College counsellors. Counsellors have reported 71% of presenting issues related to mental health (up from 67%), predominantly around anxiety and depression. An Early Help Practitioner has also offered Solution Focussed Therapy to a small number of students.

The College uses every possible opportunity to promote safety and welfare to students. Health, wellbeing and transition is a theme for weekly tutorials and cross-college events during the autumn term, and throughout the year national 'days' and campaigns are used to raise awareness, such as Safer Internet Day, CSE Awareness Day and the Time to Change mental health campaign. Resources and links are also available to students via the Student Services website, [www.yourspaceonline.net](http://www.yourspaceonline.net)

Want to know more about mental health [http://www.bedford.gov.uk/health\\_and\\_social\\_care/children\\_young\\_people/safeguarding\\_children\\_board/practitioners/mental\\_health.aspx](http://www.bedford.gov.uk/health_and_social_care/children_young_people/safeguarding_children_board/practitioners/mental_health.aspx) and watch this video <https://www.youtube.com/watch?v=nCrjevx3-Js>

# Domestic Abuse

Domestic abuse is the single highest risk factor identified at point of contact and is a common feature in cases where there are other identified risk factors. Currently, the use of the Domestic Abuse, Stalking and Honour Based Violence (DASH) a risk identification, assessment and management model is not consistent across the service post referral.

The Bedford Borough Council Strategy to Tackle the Causes and Effects of Domestic Abuse 2017-2020 was approved in June 2017. Please click on the link to view the strategy.

The Strategy is an important element of the Council's overarching objectives contained within other relevant strategies, such as community safety and safeguarding to ensure a focussed and coordinated approach to tackling domestic abuse in Bedford Borough. The overall vision of the strategy is to create a society in Bedford Borough where domestic abuse is not tolerated, and to reduce the level and impact of incidents in the Council area.

This strategy provides a framework with shared definitions, understanding and action points. It will allow agencies to co-ordinate and collaborate to ensure that women, men, adults, children/young people and all those affected by domestic abuse will receive better protection support, challenge and prevent incidents. Domestic Abuse is everyone's business. This strategy will build on aims and objectives contained within other relevant strategies, such as community safety and safeguarding to ensure a focussed and coordinated approach to tackling domestic abuse by Bedford Borough Council.

Bedford Borough has a strategy and intervention coordinator for domestic abuse and the Borough now has a perpetrator program for the first time in a long time, which means that we will be able to offer services to reduce the risk of re-offences and enable children and young people to live in households which are safer. As part of the programme the Borough will have an Outreach Perpetrator Worker based alongside Children's Services. We work closely with our voluntary sector to ensure there is provision of support for victims via the Liberty and Freedom Program.

Bedfordshire Police has recently employed four dedicated safeguarding engagement officers, who support investigators in providing dedicated support and signposting to victims of DA and their families. This will improve the timeliness of support, integration with partners and Multi Agency Risk Assessment Conference (MARAC).

The Relay scheme (incidents of DA which have been reported in the previous 24 hours to Bedfordshire Police from households where children reside are notified to the relevant school(s)) is now in its 3rd year of running with all Bedford schools signed up. The agreement has been updated to include Bedfordshire Police as a signatory to the agreement. The purpose of the scheme is to share relevant information provided by the Police to the Early Help Team with named Relay staff within the school that the child/ren attend at the beginning of the school day.

This allows the school to monitor the child/ren after an incident and respond appropriately to any concerns for the child/ren's welfare. Feedback from the schools suggests that as parents are aware that the scheme is running it has enabled a more open level of communication between parents and the school in self disclosure of domestic abuse within the home. The Relay Scheme does not necessarily reduce incidents of domestic, but does provide data which confirms the high levels of domestic abuse in the Borough where children and young people are living in the home, and also ensures children/young people are supported in school.

In January 2018 a multi-agency event was held to look at children and young people as Victims of DA and the outcome of the day was to;

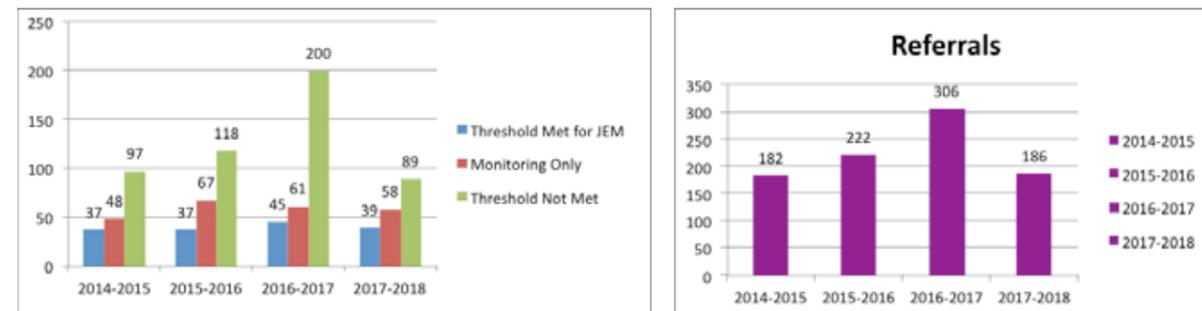
- Raise awareness of how domestic abuse impacts upon children and young peoples' development, emotional wellbeing, and coping strategies/behaviours in child/adulthood.
- Raise awareness of the impact of Relay at a local level.
- Raise awareness of 16-17 year old domestic abusive relationships.
- Raise awareness of Review findings.
- Raise awareness of local services and processes.

Since 1st April 2018 Bedfordshire Police has introduced a new victims hub which includes staff from victim support services to better identify the needs and support required from victims of crime. This is a new integrated service which intends to ensure the victim receives strong "wrap around" support and engagement with the investigator. This initiative is expected to improve the "victim's journey" and enhance existing safeguarding.

Want to know more visit the Bedfordshire Domestic Abuse Partnership (BDAP <http://www.bedsdv.org.uk/> and our website [http://www.bedford.gov.uk/health\\_and\\_social\\_care/children\\_young\\_people/safeguarding\\_children\\_board/practitioners/domestic\\_abuse.aspx](http://www.bedford.gov.uk/health_and_social_care/children_young_people/safeguarding_children_board/practitioners/domestic_abuse.aspx) and watch this video [https://www.youtube.com/watch?v=r\\_IWQJPLd-8](https://www.youtube.com/watch?v=r_IWQJPLd-8)

## LADO

After a year on year increase in contacts with the LADO service, there was a significant decrease in contacts from 2016/17 at 306 to 2017/18 at 186 which is more in line with previous years. The number of cases where meetings have been held has remained relatively stable over the last 4 years. The referrals being recorded as Tier 2 for monitoring only appears to have also remained relatively stable over the years. The number of contacts at consultation only stage has significantly decreased this year from the previous year in 2016-2017. This is following work undertaken in schools to provide support and clarity of LADO threshold.



For more information about the LADO please visit our website [http://www.bedford.gov.uk/health\\_and\\_social\\_care/children\\_young\\_people/safeguarding\\_children\\_board/practitioners/lado.aspx](http://www.bedford.gov.uk/health_and_social_care/children_young_people/safeguarding_children_board/practitioners/lado.aspx) and procedures <http://bedfordscb.proceduresonline.com/chapters/contents.html>

70% of referrals were concluded within the one month timescale; which is just under the guidelines of 80% in Working Together. However 94% of referrals were concluded within 3 months which has met the Working Together target of 90%. This shows a significant improvement of timelessness of case conclusion within the 3 month mark from the previous year. In terms of outcomes, of the contacts meeting LADO threshold, 33% were recorded as substantiated, 33% were unsubstantiated, 18% were unfounded or false, 4% malicious and 13% unresolved at time of writing. The source of referrals has remained relatively consistent with most referrals coming from educational establishments.

## Female Genital Mutilation (FGM)

Female Genital Mutilation (FGM) is a form of child abuse which involves the partial or total removal of external female genitalia or injury to external female genitals for non-therapeutic reasons. In line with the national picture, it is hard to establish a picture of the prevalence of FGM, as there are low levels of reporting.

The incidence of FGM varies considerably from area to area and the number of cases being identified will be influenced by a wide range of factors, currently we are not aware of any evidence of under-reporting in the Bedford Borough area. The Board has shared Bedford Borough population demographic along with the other 2 LSCBs with Police analysts who between July 2017 – February 2018 produced problem profiles for FGM, Forced Marriage and Honour Based Abuse.

Bedfordshire Police completed an FGM problem profile using their own data and also from Bedford Borough, Central Bedfordshire and Luton Councils, NSPCC, NHS agencies and ACCM (Agency for Culture and Change Management UK).

The outcomes were in regards to FGM;

- Often no evidence to support FGM; or, no disclosures made on contact (33%).
- In 21% of cases there were no FGM issues; a misunderstanding took place or a plausible explanation was given.
- 18% of cases, the family and/or community did not support the practice.
- Courts refused applications for FGM Protection Order (FGMPO) and Emergency Protection Order (EPO) in 6% (2) of the cases.
- No reliable way to estimate the number of girls currently at risk of FGM.
- Statistics produced are likely to be overestimated as they do not take into consideration factors that reduce the risk of FGM, for example, living in a western country, age, education and/or wealth.

Recommendations for Bedford Borough;

- Raise awareness, build relationships and partnership work and ensure we educate both males and females.
- Ensure training is up to date and/or completed across all partner agencies.
- Consider an FGM media campaign using the Police information. Signpost parents to key services, offer advice and support to help them deal with pressure from their extended families.
- Identify key schools across Bedford Borough where girls from FGM practicing countries are present.

For this year the multi-agency data for FGM has continued to be reported as very low. Bedford Hospital NHS Trust (BHT) undertakes risk assessments when it is considered that FGM is either being undertaken or is a possible risk for women and/or their children.

# Forced Marriage and Honour Based Abuse

Forced Marriage (FM) is where one or both people do not consent to the marriage and pressure or abuse is used. Pressure can include threats, physical or sexual violence, and financial pressure. This is different to an arranged marriage, where both people have consented to the union but feel free to refuse if they want to. All child marriages are forced, because a child cannot provide informed consent, and are therefore a violation of children's rights. Honour Based Abuse (violence) (HBA) is a collection of practices, which are used to control behaviour within families or other social groups to protect perceived cultural and religious beliefs and/or honour. Such violence can occur when perpetrators perceive that a relative has shamed the family and/or community by breaking their honour code. For young victims it is a form of child abuse and a serious abuse of human rights. It can be distinguished from other forms of violence, as it is often committed with some degree of approval and/or collusion from family and/or community members. Women, men and younger members of the family can all be involved in the abuse.

There is no specific offence of "honour based crime" – this is an umbrella term to encompass various offences. There are no requirements by the Home Office to collate and return data around HBA and therefore is no comparison at a nation level. It is widely reported that HBA and FM is underreported nationally and is evident locally. Nationally, ChildLine has seen an increase in concern amongst young people around HBA and FM. Nationally, HBA and FM doesn't feature within the national curriculum. Given that these issues disproportionately affect women between the ages of 16-25, key agencies suggest continuing raising awareness within colleges and universities.

Police problem profiles for FM and HBA have been undertaken primarily based on Police Data and established the following;

- There is potentially underreporting from males in relation to FM.
- In terms of FM, victims are at greater risk aged between 16-25 yrs, but the older the victims are the greater at risk they are of forced marriage or they have already been forced into marriage.
- Emerging new communities have been noted within the data; albeit it is unclear which communities have seen an increase and where the future threats lie.
- Unsurprisingly, high proportions of victims feel very frightened; the abuse is getting worst and is happening more often.
- Pregnancy or having recently given birth is a recognised trigger for abuse, with 15% of victims having had a baby in the last 18 months.
- Academics have raised concern over the criminalisation of FM and whether or not it is in fact working. Criminal proceeding takes power away from victims. Perpetrators are often family members, including parents and loved ones. Potentially victims will tolerate abuse or forced marriage to avoid their parents from being prosecuted.
- 30% of victims who had been placed in refuges or places of safety decided to return to the family home. The average age of those returning home is 21 years.
- Victims with a disability are at risk of FM, albeit Bedfordshire data does not flag if the victim has any disability specifically.

Recommendations & Intelligence gaps;

- Greater data sharing between partner agencies
- Improve data quality and recording
- Working in local schools to raise awareness, signposting where help and support can be obtained
- Focus activity for raising awareness, in keys area where there is potentially underreporting
- Work with Crown Prosecution Service for greater referral and prosecution
- Regional partnership working to improve the safeguarding of victim.

Following discussion at the Pan Bedfordshire FGM/HBA/FM group it was agreed to share the problem profiles with the Safeguarding of Vulnerable Adult Boards for them to address the issues identified in regards to vulnerable adults and some joint work.

A Pan Bedfordshire Communications Group has been established in response to the Strategy for FGM/HBA/Forced Marriage and an action plan has been developed. A Pan Bedfordshire press statement was released in June 2017 prior to the school summer holiday which are a peak time for children and young people to be taken overseas and forced into a marriage against their will. The statement will also urge schools and professionals to be vigilant in guarding against the dangers of FGM ahead of the summer holidays, known to be a particularly dangerous time for at-risk girls.

Bedfordshire Police have identified there is a need to improve frontline officer's understanding of hidden risks to children and young people in the form of neglect, FGM or HBA. Between September – December 2018 all frontline staff will receive a 1 day training event co-delivered by specialist child protection staff and a partner agency. The aim is to give officer's more confidence to identify risk, engage with young people and other agencies.

More information about FGM, Forced Marriage and Honour Based abuse please visit our website: [http://www.bedford.gov.uk/health\\_and\\_social\\_care/children\\_young\\_people/safeguarding\\_children\\_board/professionals/female\\_genital\\_mutilation\\_fgm.aspx](http://www.bedford.gov.uk/health_and_social_care/children_young_people/safeguarding_children_board/professionals/female_genital_mutilation_fgm.aspx) and procedures <http://bedfordscb.proceduresonline.com/chapters/contents.html>

# Private Fostering

The Children Act 1989 (section 66) defines Private Fostering as occurring when a child under 16 (or under 18 if disabled) is cared for and provided with accommodation, for 28 days or more by somebody other than a close relative, legal guardian or someone with parental responsibility. Close relatives are defined within the Act as step parents, siblings, brothers or sisters, aunts and uncles and grandparents by birth or by marriage. A private fostering arrangement is one which is made privately without the involvement of the Local Authority.

The Local Authority has a duty to complete an assessment to make a recommendation as to whether the private fostering arrangement is appropriate. In order to do this the wishes and feelings of the child/young person are taken into account and support offered to private foster carers as appropriate. In 2017- 2018 there were 9 new notifications of young people who were privately fostered. The fostering team continues to promote awareness of private fostering and work was undertaken with local language schools and student exchange companies to highlight the need for early notification of new carers prior to placements starting to ensure all required checks are in place.

Want to know more about Private Fostering please visit our website: [http://www.bedford.gov.uk/health\\_and\\_social\\_care/children\\_young\\_people/safeguarding\\_children\\_board/professionals/private\\_fostering.aspx](http://www.bedford.gov.uk/health_and_social_care/children_young_people/safeguarding_children_board/professionals/private_fostering.aspx), access our policy [http://bedfordscb.proceduresonline.com/chapters/p\\_priv\\_fost\\_policy.html](http://bedfordscb.proceduresonline.com/chapters/p_priv_fost_policy.html) and watch this video <https://www.youtube.com/watch?v=dAgI2qrDyxE>

## Other examples of multi-agency work;

Over 2017-2018, Public Health services have driven forward a huge range of outcomes to best support our population at the earliest point possible. Some examples of particular progress are a clear indication in local data that under 18 year olds teenage conceptions are reducing. This can be attributed to a number of factors including an integrated teenage parent support pathway. An established integrated sexual health service (iCaSH), the promotion of high quality Personal, Social and Health Education (PSHE) and Relationships and Sex Education (RSE) in schools, a fully developed school nursing service with regular drop in sessions for pupils in school year 7 and above. We will continue to drive this agenda area forward and are planning to get a greater understanding from schools regarding their needs in regards to provide their pupils with high quality PSHE & RSE. The Health Visiting Service has introduced a new 0-5 Universal Partnership Plus (UPP) through an enhanced schedule of additional, purposeful health visiting contacts, co-ordinated partnership support will be provided to help parents to identify, clarify and manage problems to ensure the positive health and wellbeing and development of their children. The 0-5 Health Visiting Service will work with partners from Children's Centres, Early Help, Maternity Services, Early Years provision, Social Care, voluntary groups, GPs and other health services to ensure an integrated offer for families, which may lead to a range of needs-led, UPP care packages to be delivered.



## Objective 3: A supported, informed and effective multi-agency workforce with a focus on learning and improvement.

Children's Services has recently begun training social workers, managers and senior leaders in systemic social work practice in partnership with the Centre for Systemic Social Work based at the London Borough of Kensington and Chelsea. The leadership of BBC Children's Services is committed to enabling frontline social work practice to shine and believes this will lead to an effective system with the right outcomes for every child and family. All learning from audits, Serious Case Reviews (SCR) and other forums has been cascaded to frontline practitioners and managers. The key messages have been reiterated through professional forums, workshops, Quality Assurance Board and supervision.

Two Early Help Professionals achieved the Brief Solution Focus Diploma and two have achieved the post graduate qualification in Enhanced Evidenced Base Practice from the University of Reading. Both these qualifications enable the service to provide bespoke packages of "talking" interventions to young people and their families.



### Serious Case Reviews

BBSCB is required to consider whether to initiate a Serious Case Review (SCR) when a child/young person dies (including death by suspected suicide) or is seriously injured, and abuse or neglect is known or suspected to be a factor. The main purpose of an SCR is to learn lessons to improve the way in which agencies and professionals work both individually and collectively to safeguard and promote the welfare of children and young people.

There has been significant amount of work through our SCR activity this year with three new SCRs being commissioned (one led by Telford and Weakin LSCB (TWSCB)). The Baby Sama SCR was published in April 2017, an SCR in regards to Faith was published December 2017 and the SCR led by TWSCB was published in May 2018. The reviews we have conducted have utilised a range of methodologies and provided valuable learning. Partners are reporting evidence of impact and improvement.

Though it must be acknowledged that the increased SCR and other audit activity across all the three LSCBs in Bedfordshire has put partners under pressure to resource them. The learning from the SCRs will be used to inform safeguarding practice in Bedford Borough. The improvement plans from these SCRs will be monitored via the Executive Group and reported back on a quarterly basis to the Strategic Board.

Learning from SCRs for the Police has underlined the importance of ensuring a parenting assessment takes place soon after concerns regarding neglect are recognised, where there is evidence a parent may have learning difficulties. This increases the chances of proving parental culpability for any criminal prosecution for child neglect. This learning has been fed back to all specialist Police investigators. The full reports and briefing summaries can be accessed via [http://www.bedford.gov.uk/health\\_and\\_social\\_care/children\\_young\\_people/safeguarding\\_children\\_board/serious\\_case\\_reviews.aspx](http://www.bedford.gov.uk/health_and_social_care/children_young_people/safeguarding_children_board/serious_case_reviews.aspx).

# Multi-agency Training

In this year the Pan Bedfordshire LSCB Training Unit has delivered the following;

The training available, it's reach and delegate satisfaction rates have increased year on year. There has been a slight decrease in number of training places filled; this can be explained by raising the maximum attendance per course from 16 to 20 in many venues. No courses were cancelled in 2017/18. Working Together became a one day training session in Sept 2017. This has received consistently good feedback and is well attended. The training was observed to be of a high standard.	<b>Face to Face training</b>	
	<b>Courses delivered</b>	97
	<b>Delegates booked*</b>	2214
	<b>Places filled</b>	92%
	<b>Courses cancelled</b>	0
	<b>Satisfaction</b>	97%
	<b>Observations completed</b>	17

There has been a decline in the pass rate of e-learning; this could be attributed to lower completion rates. The training team have addressed this through monitoring and issuing fortnightly reminders where registration is made but the course has not been completed. Charges are made for non- completion outside of agreed timescales.	<b>E-Learning</b>	
	<b>Delegates registered</b>	8294
	<b>Delegates completed</b>	6828
	<b>Pass rate</b>	83%
	<b>Satisfaction</b>	97%

The Pan Bedfordshire LSCB Training Unit takes a robust approach to evaluating the training programme, collecting evidence of the following;

- The quality of the learning/training; (has it met participants learning needs and course objectives?)
- The immediate impact of the learning/training; (has the learning had an impact on the participants knowledge and confidence levels?)
- The medium-term impact; (Has the learning had an impact on delegates own practice? How has it been shared?)
- The longer term and wider impact of the training; (What are improvements to delegate's service? What are the outcomes for children, young people and families?)

The processes for carrying out these evaluations are as follows:

**Immediate impact;** Delegates are required to complete an online evaluation in order to receive a certificate for the training.

“As a preschool leader with many responsibilities, I am now becoming the safeguarding lead within the setting. Although I am confident in what to look out for with babies and young children, what to do with that information has not always been clear. I now feel I will be able to lead in this area confidently and if I am not sure then I know where to go.

Medium term impact (3 months): A second online survey is sent to each delegate 3 months after the learning event. The purpose of this evaluation is to identify how the participant has shared their knowledge and skills further assess the impact on practice.

“This course has highlighted the need for professional curiosity and the need to follow through with niggly concerns. It has emphasised the need to take a multi professional approach to piece together information to build a complete picture about the situations we are working with. This has meant that more multi professional meetings have been held so that a more joint approach can be taken.”

Longer term impact (6 months): A sample of delegates is contacted 6 months after attending the learning event. Interviews are carried out by telephone or face to face and a request is made to interview the line manager. The interviews focus on;

- Specific examples of impact of learning on own and service practice.
- Any barriers to implementing learning.
- Identification of learning and development undertaken following course attendance.
- Manager recognition of the impact.

Each source of data is routinely reviewed and analysed. Any concerns are followed up by the Training Officer and shared with the Training & Development Group where required. The Pan Bedfordshire Training Unit provides a quarterly training report for each LSCB area, offering highlights from training impact evaluations. The Training Officer undertakes quality observations of training courses. Observations focus on new trainers’ or learning events, and on courses that have been updated or refreshed. Observations will be carried out where feedback suggests lower satisfaction or impact ratings. Trainers receive a copy of observations and feedback along with a summary of participant’s comments. The training team welcomes Board members to attend and observe training.

## Case study

**Organisation** - Primary School

**Course attended** – Working Together

**Staff attended** - Principal

The course was really informative, especially the information on timescales for strategy meetings and other processes. It helped me to put referrals through to the most appropriate team and to know where to signpost families on to. I now feel more empowered to challenge other professionals where I have felt it necessary, an example of this being when I felt a family's case was closed too soon with Early Help. The case was then escalated. The training was great- being in a room with other professionals and learning about the challenges and frustrations in their role and well as from the school point of view. The detail about the importance of working together and information sharing was very good though as we find that can be challenging. No changes have been made to policies, but an overview was shared with staff in meetings and escalation procedures were followed in one case.

Large Scale Events	Attendance	Date
Pan Bedfordshire Neglect (Full Day Conference)	309	30th March 2017
A Father's Role in Safeguarding Children (Half Day Briefing)	131	18th October 2017
Children as Victims of Domestic Abuse (Half Day Briefing)	135	22nd January 2018

Some feedback from the Neglect conference included;

*“A direct result of the conference has been that many professionals and settings have accessed the GCP2 course as well as other safeguarding training and have begun to use the tool for family assessments. Attendees came away from the event with a much clearer understanding of neglect and how to respond when it is evident and have cascaded their learning to their managers and their teams as part of in-house training and supervision back in their organisations. There has also been an increased confidence in working alongside other agencies and participating in multi-agency case reviews and meetings.”*

Some delegate feedback on the Fathers Role in Safeguarding included;

*“Presentation generated a lot of discussion and shared experiences between different agencies which enhanced understanding of each other's roles and how to work together more effectively.”*

*“Speakers were clear and concise, and very knowledgeable. The two papers by the University of Leeds have been added to our workplace library.”*

## E-learning Courses

BBSCB provides access to a full range of e-learning courses through the Virtual College.

This allows partners the ability to offer up-to-date safeguarding training to all staff through the unlimited licences available for each course. Courses include:

- Safeguarding Children and Young People from Abuse by Sexual Exploitation
- Safeguarding Children Refresher
- Awareness of Child Abuse and Neglect
- Collaborative Working: A Whole Family Approach



# Pan Bedfordshire Procedures and Practice Group

The Pan Bedfordshire Procedures and Practice Group is responsible for keeping procedures up to date. Following some work to analyse the use of the procedures it transpired that practitioners are not utilising the procedures as much as they should be. The BBSCB has therefore promoted the procedures and advised practitioners they should add the link into work related technology. Practitioners should register for updates and then they will be automatically updated on any future child protection procedural changes and any new national or local guidance.

In the last year 17 documents were either revised or developed please see the Pan Bedfordshire Interagency Child Protection Procedures for full details <http://bedfordscb.proceduresonline.com/index.htm>

## Priority - Pan Bedfordshire Digital Safeguarding

A Pan Bedfordshire group has been established to draw together activity and learning on how safeguarding is affected by technology (web, social media, apps). It aims;

1. To develop a county wide strategy on how safeguarding addresses the risks and concerns raised by perpetrators use of technology
2. To set out activities to promote children and young people's use of technology that promotes wellbeing and prevents vulnerability / risk of abuse
3. To set out activities to promote parents/carers/public understanding and ability to support children and young people's safe use of technology
4. To set out activities to support practitioners understanding of technology (risks and benefits) and their role in supporting children and young people's safe use of technology.

A strategy and action plan has been developed and the group's priority is to coordinate a multi-agency approach to online safety for children, young people, their families and practitioners. The focus of this priority is:

- Improving professional's knowledge about technology and how to support children, young people and their families to stay safe online.
- Improving children and young people's knowledge and confidence about how to keep themselves safe online.
- Improving parent and carer's knowledge and confidence on how to help their children/young people keep safe online.

1. Leadership - It is important that there is a clear vision and strategy for online safety with effective leadership. This should be owned and understood by all stakeholders. There should be effective self-evaluation, monitoring, reporting systems and sanctions.
2. Embed Online Safety in Procedures and Practice - to promote that online safety is embedded in everyone's policies, commissioning and planning activities in order to prevent and appropriately respond to safeguarding matters.
3. Raise Awareness - To empower children and young people, their families, vulnerable adults and those who work with children and young people to be aware of the potential safeguarding issues online and know where to go for advice, information and support.
4. Building E-safety Skills - to encourage children and young people to remain safe and act responsibly while using technologies including social networking and on-line gaming facilities. To empower them to act responsibly, deal successfully and safely with issues as they arise and minimise the harm of risky or careless online behaviour.
5. Monitor, review, improve, demonstrate impact and on-going effectiveness of online safety work.

In March 2017 an E-safety Training Consultant was commissioned to work together with the Early Help team to examine children/young people's use of technology and the associated risks across the Bedford Borough area. Children and young people aged between 10 and 17 and parents and carers across Bedford Borough were asked a series of questions through a survey, which aimed to highlight the following:

- Their use of technology
- The most popular social networks and social media apps
- The risks and issues they face
- How they respond to those risks
- The education they have received
- The education and support they would like to receive.

Their Online Safety Report was shared with the Board and here are some of the findings.

## Conclusions and recommendations:

### Children and young people:

- Seek support from one another - therefore they need appropriate training and support
- Promotion of referral routes - ensuring that children and young people know where and how to report
- Empowering and realistic messaging and an educational programme, especially around 'nudes' - understanding the motivations for children and young people sharing nudes and what might prevent the behaviour

### Parents and carers:

- Support at appropriate 'touch points' - ensuring that parents and carers can access support at the most appropriate times for them e.g. at point of sale, in health centres and supermarkets
- Community access - ensuring that support is provided in the community
- Applied support - most likely to seek support from schools - ensuring that those most in need get the support they require at the right time
- Balanced and not scary or patronising - ensuring the messaging is positive and non-patronising for their children.

**Schools:**

Schools need to be supported to ensure that they have implemented best practice approaches in relation to their policies and practices; infrastructure and technology, education and training, and standards. In order to develop this further it's imperative that all schools have an increased awareness and are offered support, consultancy and training.

**Next steps****Children and young people:**

As part of the work with schools the education and training element should ensure there is a progressive curriculum around online safety for schools. Schools should be provided with the support. In addition a peer mentoring support scheme should be established for students across the Borough. This work should commence from April 2018.

**Parents and carers:**

Key online safety messages should be built into existing campaigns and programmes where appropriate to develop parents' confidence and to ensure there is a focus on parenting in the online world. Where there are no appropriate campaigns or programmes new ones should be developed to ensure that parents can access support at the appropriate touch points – communities, schools and health. This work should commence from April 2018.

Want to know more about online abuse please visit the BBSCB [http://www.bedford.gov.uk/health\\_and\\_social\\_care/children\\_young\\_people/safeguarding\\_children\\_board/practitioners/online\\_abuse\\_advice.aspx](http://www.bedford.gov.uk/health_and_social_care/children_young_people/safeguarding_children_board/practitioners/online_abuse_advice.aspx) and CEOP websites <https://www.thinkuknow.co.uk/>



## Performance and Audit Group

The remit of the Performance & Audit Group (PAG) is to ensure the effectiveness of multi-agency working to safeguard and promote the welfare of children and young people is the second of the BBSCBs core functions. Measuring effectiveness across the whole safeguarding agenda is very complex and contains a whole range of performance information. The BBSCB Learning and Improvement Framework promote a culture of continuous improvement across the partnership. The BBSCB uses a range of sources to assess the performance and quality of safeguarding work with collation and analysis undertaken through regular highlight reports.

The focus has continued to be on strengthening the governance arrangements to enable the Board to properly scrutinise the work of the partnership and ensure that, when it comes to performance and quality, there is sufficient transparency across the partnership so that priorities and risks can be identified and addressed. The PAG comprises of key agencies across the partnership and its role is to promote high standards of safeguarding work; foster a culture of continuous improvement and ultimately to provide assurance to the BBSCB.

**Performance Framework identified some of the following issues in 2017 – 2018;**

- Social Worker recruitment continues to be a challenge
- Processes are being established to review all children/young people who have been on a CP plan for 2 years as well as scrutinise progress and planning in preparation for the 2nd Review CP conference to ensure there is no drift or delay in planning for children and young people
- There has been an increase in the number of children and young people with an active CSE alert on their file
- Return interviews – 56% of children and young people who went missing had a return interview recorded. Interview needs to take place within 72 hours of returning
- Data now available from Mountain Healthcare who operate the Sexual Assault Referral Centre (SARC)
- Data will now be collected re the number of risk assessments completed for FGM
- Bedford Hospital – CP medicals for children under 2 - new CP medical pathway is being developed. Also implementing a referral form for CP medical requests which BBC have agreed
- CP medicals around neglect – significant rise in request for these. This is the first quarter that where CP medicals have been requested with neglect being the main element of the safeguarding concern. This may be partially due to the development and roll out of the multi-agency Pan Bedfordshire neglect strategy, and the raising of awareness around neglect including the conference that took place in early 2017, also the GCP2 assessment tool
- Missing increase of 200% since March 2017, due to the change in the way children and young people are now all recorded as missing whereas before they were either missing or absent.

The dataset has a lot of duplication and data is presented in different ways, numbers/percentages/rates per, this means it is lengthy and practitioners continue to struggle to understand what the story is behind the data. Agreement has been sought from all 3 LSCBs to develop a multi-agency Pan Bedfordshire Performance Framework and analysis.

### Audits:

A **Transitions** Audit was undertaken in July 2017 in response to the Patrick SCR on 3 cases in regards to young people transitioning from Children's to Adults' Services. The key findings and recommendations were;

1. Both children/young people under 18 are benefitting from early transition planning with Adult Social Care. This is due to the tracker meetings which are aimed at ensuring that young people are known to Adult Social Care from the earliest point possible and supported by the Preparation to Adulthood Worker.
2. Both children/young people under 18 are benefitting from having a named GP, which supports better information sharing and continuity with health care. However, GP's hold valuable information and should be part of the conversation and planning for a young person rather than just have the final plan (EHCP or CIN) sent to them. (Linked to Key Finding 5 of the audit)
3. Both children/young people under 18 are benefitting from good practice in Children's Services of offering Carer's Assessments.
4. All 3 cases indicated that professionals tend to direct all communication and support to the main carer for the child rather than both parents. In order to maximise the support for the family and understand the impact of a young person's disability on the family as a whole and in line with the Think Family Approach, it is important that both parents where possible are involved in meetings and reviews in respect of their child. Recommendation **1: All Review Meetings (EHCP, CIN and any other meeting) should involve both parents/ carers along with the young person where possible and any intervention with the family should bear in mind the Think Family Approach.**
5. Improvement could be made to the join up between the Education, Health and Care Plan and any other plans, namely a Child In Need Plan. **Recommendation 2: There is no additional recommendation from this transitions audit as this is already on the SEND Improvement Plan.**
6. It is important to ensure that all professionals supporting a young person are involved in the Education, Health and Care Plan.
7. Recommendation 3: There is no additional recommendation as the EHCP pathway is already being developed as part of the SEND Improvement Plan.

The provision of overnight respite was seen as a challenge. It is noted that an assurance report has already been requested from Children's Services regarding this.

A **Pan Beds GCP2 Audit** was undertaken in October 2017 with each Local Authority identifying 3 cases. The themes from the audit were;

- All felt the GCP2 helped support conversations with parents
- Picked up other issues a worker hadn't originally thought of
- Gave a clear focus for support plans
- Helped consistency in work force – benchmarks
- Helped evidence a practitioner's gut feelings
- Helped evidence/see when changes have/haven't been met within the time frames agreed
- Prepping the family before undertaking the GCP2 has been helpful to the family
- Helped/prevented cases being escalated as improvements made

### Good practice found;

- It looks at every aspect of the child's life and helps not to miss things compared to single issue work
- Having the process of the review is useful in supporting achievements and sustainability
- Reduces drift in work and if used effectively can engage both parents and allow a dynamic conversation to explore dynamics
- Visual coding is very helpful for families with low levels of literacy or where English is not their first language
- Allows a preventative approach to be adopted
- Provides clear evidence for practitioners to use to plan interventions
- Works with families with Learning Disabilities
- Generally being completed by 2 staff (preferably from different agencies) to give different views
- Strengths based tool which is clear and allows any practitioner to pick it up and quickly get a feel for the lived experience of the child
- Less narrative and clearer analysis of the issues.

## Recommendations:

- Undertake a second GCP2 Audit in a year's time.
- Local areas to consider how they collate data on GCP2 in terms of numbers completed, lead agency, age, ethnicity and tier of service.
- All three areas to agree a common reporting form across Bedfordshire.
- Consideration of how GCP2's are recorded/logged so other agencies are aware one has been completed.
- Agencies to ensure that they have enough licensed practitioners to carry out GCP2 on an ongoing basis

**A Pan Bedfordshire LSCB Multi-agency Emotional Wellbeing and Mental Health Audit was undertaken in March 2018**

5 cases were picked by the CAMHs for each of the 3 LSCB areas, the cases were a mixture of cases which had been referred to CAMHs and then had been accepted in to the services or declined and signposted to alternative services.

### Summary of Key Learning:

- Children/young people being picked up at the point of crisis – for the majority of cases it would appear that there was no identification of early intervention (i.e. 6 months before). However, feedback from children/young people contained within the audits showed that the child/young person's situation improved once they were working with CAMHs.
- If CAMHs had accepted the referral, there appeared to be a good response for the child/young person and their family.
- Once the young person was being worked with by CAMHs there was good evidence that the child/young person's lived experience was known, and their voice was being heard. There was limited evidence within the audits that the child/young person's voice or lived experience was being heard prior to CAMHs.
- Poor recording and record keeping – the audit was limited due to the lack of information contained within the young person's records and what could therefore be provided to the audit.
- There was evidence that cases were closed or signposted to other services, but information wasn't provided back to the referrer.
- There was also evidence that when young people were signposted to other services no follow up took place to see if they had been accepted.
- There was a good example in one case where the GP followed through their contact with the family even after their referral to CAMHs was accepted to see how the young person was doing.
- Prior to the audit 270 practitioners responded to an online survey to say they felt quite confident in how they would identify and support children and young people with a mental health issue. However, the audit did identify that for some professionals supporting a young person with mental health concerns is a challenge.
- In some cases, the concerns in relation to the young person's mental health were seen in isolation and weren't being joined up or linked with other issues occurring in the family, i.e. Forced Marriage, Domestic Abuse and Parental Mental Health.
- It wasn't clear from the information provided that professionals did not understand that poor parenting could be impacting upon a young person's mental health.

## Recommendations

- To share the findings with schools
- Ensure the learning from the audit feeds into the suicide prevention strategy work
- Consideration of a Pan Bedfordshire Suicide Prevention guidance document
- All partners are asked to share this Audit Summary widely within their respective organisation, ensuring the learning is understood and any development activity is undertaken in order to improve outcomes for children and young people.

To assure the Board that members are monitoring their own safeguarding practice effectively single agency audits were presented to provide independent scrutiny of targets and performance. Audits presented to the PAG identify performance areas which might be of concern to the Board, together with actions being taken by the agencies.



## Child Death Overview Panel (CDOP)

The CDOP function provides a clear interface between the work of health to review neonatal deaths, understanding of medical issues and improving the Public Health focus of the CDOP work where themes emerge. CDOP is required by the statutory guidelines to review all child deaths, drawing on comprehensive information from all agencies on the circumstances of each child's death. Particular consideration is given to the review of sudden unexpected deaths in infancy and childhood; accidental deaths; deaths related to maltreatment; suicides and deaths from natural causes where there are lessons to be learnt. None of the child deaths in 2017/18 met the thresholds for consideration for a Serious Case Review. CDOP continues to report to the BBSCB and links with the other subgroups to ensure that safeguarding issues are fully addressed and learning achieved to prevent future deaths, addressing any identified modifiable factors, through both the national and local Public Health agendas.

From April 2017 to 31st March 2018, Bedfordshire CDOP received referrals relating to 15 child deaths in Bedford Borough; of these, 6 were unexpected deaths but not suspicious.

Bedfordshire CDOP also informed the Public Health/Police agenda on the dangers of the use of illegal drugs and has worked closely with Public Health on putting in place policies and procedures for suicide in children and young people. Bedfordshire CDOP has also continued working with Maternity Services to ensure that messages surrounding smoking in pregnancy and maternal health continue to be promoted.

Pan Bedfordshire CDOP produces an annual report which is disseminated widely across the partnership and can be accessed on the BBSCB website [http://www.bedford.gov.uk/health\\_and\\_social\\_care/children\\_young\\_people/safeguarding\\_children\\_board.aspx](http://www.bedford.gov.uk/health_and_social_care/children_young_people/safeguarding_children_board.aspx)

## Engaging with Frontline Practitioners

We have made improvements in engaging with frontline practitioners through a core group of frontline practitioners from voluntary and statutory agencies. The meetings give members the opportunity to discuss and reflect on their own and multi-agency experiences of working in Bedford Borough but also find out more about local safeguarding issues/practices and current initiatives across Bedford Borough. Frontline workers are encouraged to suggest ways in which improvements can be made to support them in delivering high-quality services for children, young people and their families. At each meeting there is an update on the work of the BBSCB. Some of the topics covered at the meetings in the last year included the implications of SCRs, audits, information sharing, mental health and Early Help services, male victims of domestic abuse CSE and FGM. The Group also raised issues around the need for guidance on when bruises seen on children and young people should be reported which resulted in some guidance being developed with them.

### Individual partners have reported the following priorities and challenges for them in 2017 – 2018;

For most partners the increase in work, reduced resources, training requirements, recognition and identification of concerns in expanding categories of abuse and vulnerabilities impacts on their capacity significantly.

Bedfordshire Police stated an area to improve is some officer's understanding of the impact and risk domestic abuse can pose to children/young people, even if the abuse appears to be between two adults. Training is planned to ensure those officers working on dedicated domestic abuse teams recognise this link, are better able to identify risk to children/young people and then work with partners to support children and families.

In the last year there has been an 11% increase in crime which places significant strain on frontline policing and specialist services. Specifically for offence types that could affect children and young people there have been a 24% increase in DA related crime and a significant increase in gun and knife crime. If this trend continues it may affect the Police response times, the timeliness of follow up actions to keep up with demand.

Bedfordshire Police has overseen a significant period of improvement over the last 3 years in the way in which it identifies and responds to vulnerability. Over the next two years almost a quarter of the whole workforce will have less than 2 years' service due to a rapidly changing workforce. This creates a challenge in ensuring we retain sufficiently skilled staff working within child protection in domestic abuse teams.

The 2018-2021 Early Help Strategy sets out our ambitions to maintain and improve our performance over the next 3 years. We will continue to invest in the work we do with partner agencies, focusing on community health staff that have recently transferred to a new provider. It is our agreed priority to ensure children in need of support who are under 5 are identified earlier before crisis occurs and a multi-agency Team around the Family approach is in place to enable improved outcomes for children, young people and families.

Early Help will focus on embedding the use of Survey Monkey to support enhanced feedback from children, young people and families at the end of pieces of work. The Quality Assurance framework for Early Help is in place and the intention is to embed more systematic case auditing across the system. They will focus on embedding systemic practice across Children's Services in order to improve outcomes for children, young people and families. There continues to be an increase in work and the challenge within an ever decreasing financial envelope to deliver the best quality service for children, young people and families whilst supporting staff to feel positive about the work they do.

The demand on the family justice system and on CAFCASS services remained very high throughout the year, with very large rises in local caseloads (private law applications). CAFCASS are currently undertaking some audit work to try to understand both the increase in private law applications and the above average number of these requiring section 7 reports. They are trying to identify if the initial advice given to court could be improved, are the courts too risk averse? Are more children/young people being drawn into private law proceedings unnecessarily? Or do CAFCASS have more complex issues in private law locally which require our services?

Publication of the Director of Public Health report on children, young people and their families which very extensively outlines where we are doing well and where we need to improve compared to the best performing Local Authorities. The report clearly outlines specific calls to action and can be accessed via [https://www.bedford.gov.uk/health\\_and\\_social\\_care/bedford\\_borough\\_jsna.aspx](https://www.bedford.gov.uk/health_and_social_care/bedford_borough_jsna.aspx)



## Challenges and Priorities for BBSCB for 2018 – 2019

BBSCB has once again made significant progress over the last year and continues to hold partner agencies to account and provide constructive challenge and scrutiny of the multi-agency arrangements to safeguard children, young people and families. I am continually grateful for the commitment of all those practitioners and managers who work to keep children and young people safe. However, the implications of the Children and Social Work Act and revised government guidance (WT18) which transfers (once a safeguarding partnership plan is agreed and published by September 2019 at latest) the responsibility for safeguarding partnership arrangements to the Local Authority, Police and CCG and no longer maintains a statutory requirement to have an LSCB is a risk to the safeguarding local arrangements. I have though been reassured by the early discussions between senior leaders both within Bedford Borough and Pan Bedfordshire to maintain current structures, adequate funding and independent scrutiny and to ensure that whatever arrangements evolve they will uphold the following:

- Champion the interests and rights of children and young people;
- Provide the independent challenge and leadership that is essential to ensure the best outcomes for children and young people amidst competing priorities;
- Involve all partner agencies not just Police, Health and BBC, with sanctions and a clear duty to co-operate;
- Scrutinise and improve practice - using a range of approaches and meaningful measures (e.g. Section 11, audits, data, case reviews, feedback from children, young people and their families and practitioners and Annual Reports) to provide accountable oversight and feedback on performance and outcomes;
- Learn from experience and evidence of what works well – creating workable strategic and operational arrangements that fit form to function and are proportionate, efficient, effective and adequately resourced;
- Meet the leadership challenge of harnessing multiple partners to achieve common goal;
- Seek to unblock and steer a path through challenges and issues across service teams or partner agencies that may be hindering progress or deliverables;
- Seek to influence the release of resources/funding to facilitate discrete pieces of work or projects which is within its remit, and receive updates on the outputs and deliverables.

Over the next year the three key partner agencies will consult and publish their safeguarding arrangements, but in the meanwhile the BBSCB will continue to hold the statutory functions and be responsible for ensuring the effectiveness of local safeguarding. Our Business Priorities will remain the same but outlined below are some of the key challenges we want to address:

- Understanding more about the quality of the response to children and young people with emotional and mental health issues.
- The partnership response to serious youth violence and ‘gang’ /group risk activity and offending and the links County Lines (drug-dealing); CSE and Missing.
- Ensuring that no child/young person under the age of 18 is detained overnight in Police custody post charge. Develop common thresholds and processes for the provision of alternative accommodation for children/young people otherwise kept in Police custody.
- The safety and well-being of children and young people in custody within the Criminal Justice Secure Estate. There remains a challenge about how BYOS and Children’s Services work well in ensuring joint decision making with custodial establishments whilst Bedford Borough children and young people are in them.
- A continued improvement to partner agencies response to missing children and young people and the number/quality of return interviews carried out.
- Obtaining evidence that learning and improvement is being embedded in frontline practice.
- Enabling change and being assured that lessons are being learnt from SCRs, case reviews and audits and that practice and outcomes are improving as a result.
- Empower children and young people to recognise abuse and feel confident to report concerns.
- Build a culture where by the daily lived experiences of children and young people are clear in all assessments.
- Work with Adult Services on learning from SCRs/Safeguarding Adults Reviews (SARs) and the Problem Profiles for FGM, Forced Marriage and Honour Based Abuse
- Consider the impact of poverty on the 5,470 children and young people in Bedford Borough with 18.9% of children/young people living in income-deprived households.

Pan Bedfordshire we have agreed some specific task and finish work streams that address:

- MASH
- Emergency Duty Team (EDT)
- Child Protection (including Section 47, Initial Child Protection Conference (ICPC) and strategy meetings)
- System Change (including Working Together 2018)
- CSE and Missing
- Exploitation
- Audit and learning
- Data sharing
- Special Educational Needs and Disability (SEND)

I am yet again grateful for partner agencies continued commitment to the BBSCB at such difficult times.

**Jenny Myers**

**BBSCB Independent Chair.**

## Appendix 1: Glossary

ABELS - Achieving Best Evidence Language Screen

A&E – Accident & Emergency

ACE - Adverse Childhood Experiences

BBC - Bedford Borough Council

BBSCB - Bedford Borough Safeguarding Children Board

BCCG - Bedfordshire Clinical Commissioning Group

BDAP – Bedfordshire Domestic Abuse Partnership

BeNCH- Bedfordshire, Northamptonshire, Cambridgeshire & Hertfordshire Community Rehabilitation Company Limited

BAME - Black Asian Minority Ethnic

BYOS- Bedfordshire Youth Offending Service

CAFCASS - Children/Family Court Advisory and Support Service

CAMHs - Child and Adolescent Mental Health Services

CAVAA – Child Abuse Vulnerable Adult Abuse

CBSCB – Central Bedfordshire Safeguarding Children Board

CBT - Cognitive Behaviour Therapy

CCG – Clinical Commissioning Group

CDOP - Child Death Overview Panel

CiCC – Children in Care Council

CIN - Child in Need

CP - Child Protection

CQC – Care Quality Commission

CSE - Child Sexual Exploitation

CSEM - Child Sexual Exploitation and Missing  
CSEP - Child Sexual Exploitation Panel  
CSP - Community Safety Partnership  
CWD - Children with disabilities  
DA - Domestic Abuse  
DASH - Domestic Abuse, Stalking and Honour Based Violence  
DCS - Director of Children's Services  
DfE - Department for Education  
EDT - Emergency Duty Team  
EEBP - Enhanced Evidenced Based Practice  
EHA - Early Help Assessment  
EHCP - Education Health Care Plan  
ELFT - East London Foundation Trust  
EPO - Emergency Protection Order  
EPUT - Essex Partnership University NHS Foundation Trust  
FGM/PO - Female Genital Mutilation/Protection Order  
FM - Forced Marriage  
FTE - First Time Entrants  
GCP2 - Graded Care Profile 2  
GP - General Practitioner  
HBA - Honour Based Abuse  
HMIC - Her Majesty's Inspectorate of Constabulary  
HMICFRS - Her Majesty's Inspectorate of Constabulary and Fire & Rescue Services  
ICPC - Initial Child Protection Conference  
JEM - Joint Evaluation Meeting  
JSNA - Joint Strategic Needs Assessment  
LAC - Looked After Child / Children  
LADO - Local Authority Designated Officer

LGBTQ - Lesbian, Gay, Bisexual, Transgender and Questioning  
LSCB - Local Safeguarding Children Board  
MASH - Multi Agency Safeguarding Hub  
MARAC - Multi Agency Risk Assessment Conference  
MOMO - Mind Of My Own  
NHS - National Health Service  
NSPCC - National Society for the Prevention of Cruelty to Children  
NQSW - Newly Qualified Social Workers  
NWG - National Working Group  
OFSTED - Office for Standards in Education, Children's Services and Skills  
OPCC - Office Police Crime Commissioner  
PAG - Performance & Audit Group  
PCC - Police Crime Commissioner  
PCF - Parent Carer Forum  
PSHE - Personal, Social and Health Education  
RASP - Risk and Safeguarding Panel  
RHI - Return Home Interview  
RSE - Relationships and Sex Education  
SAR - Safeguarding Adults Reviews  
SARC - Sexual Assault Referral Centre  
SCR - Serious Case Review  
SEND - Special Educational Needs and Disability  
SPOE - Single Point of Entry  
SPOC - Single Point of Contact  
TAF - Team Around Family  
UPP - Universal Partnership Plus  
VOCypf - Voluntary Organisations for Children, young people & families

## Appendix 2: Strategic Board attendance

Agency	Meeting dates					Total Attendance		
	23rd May 2017	3rd July 2017	3rd Oct 2017	12th Dec 2017	20th Feb 2018	Total number of meetings held	Number attended	%
BBSCB - Independent Chair	1	1	1	1	1	5	5	100
BBSCB - Business Manager	1	1	1	1	1	5	5	100
BBC - Children's Services	1	1	1	1	1	5	5	100
BBC - Adult Services	0	0	1	1	1	5	3	60
BBC - Portfolio Holder for Children's Social Care	1	1	0	1	1	5	4	80
BBC - Public Health	1	1	1	1	1	5	5	100
BBC - Education and Early Help	1	0	1	1	1	5	4	80
Bedfordshire CCG	1	1	1	1	1	5	5	100
BeNCH	0	0	0	1	1	5	2	40
Bedford College	0	1	1	0	1	5	3	60
Bedfordshire Police	1	1	1	1	1	5	5	100
Bedford Hospital	1	1	1	1	1	5	5	100
CAFCASS	0	0	0	0	0	5	0	0
East London NHS Foundation Trust	0	1	1	1	1	5	4	80
Lay Members	1	1	1	0	1	5	4	80
National Probation Service	0	0	1	0	0	5	1	20
Representing schools	0	1	1	0	1	5	3	60
Essex Partnership University Trust	0	1	1	0	1	5	3	60
Voluntary Organisations for Children, young people & families	1	0	1	1	1	5	4	80

## Finding out more

This report is available online on the BBSCB website at

 [www.bedford.gov.uk/LSCB](http://www.bedford.gov.uk/LSCB)

Copies can also be requested by emailing the BBSCB Business Support team at

 [LSCB@bedford.gov.uk](mailto:LSCB@bedford.gov.uk)

or send a letter to

 **Bedford Borough Safeguarding Children Board**  
**Room 509,**  
**Borough Hall**  
**Cauldwell Street**  
**Bedford MK42 9AP**

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 **01234 276512**

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