



# Barnet Safeguarding Children Board

## Business Plan

2016-2018



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## 1. Introduction

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Barnet's Safeguarding Children's Board (BSCB) is a partnership of local organisations (both statutory and voluntary) whose work brings them into regular contact with children and young people. When those who work for these organisations deal with children and young people or their families what they do can have a significant impact on whether children and young people are kept safe and thrive. Our role is to ensure coordination and scrutiny of those local services that are designed to protect children and promote their welfare.

The Business Plan sets out a number of activities which are part of the **Core Business** of the BSCB. At the core of our safeguarding work is the commitment to understand the quality of a child's experience of local services and to learn from individual cases. We want to ensure we find the optimum ways to disseminate learning from best practice and case reviews across a wide multi-agency work-force and continue to develop a culture of constructive professional challenge between agencies which leads to better outcomes for children. We will work to strengthen relationships with key partnerships where we share agendas and champion and protect the safeguarding needs of children and young people.

The BSCB Business Plan also sets out our **strategic priorities** for 2016-18. These are identified as areas for development. Emerging needs have been identified through the work of the Board over the course of 2014-16. We have also learnt from local and national case reviews and audits of practice, and through our work with children and young people.

The delivery of The Business Plan will be monitored by the BSCB Business Management Group to ensure currency and relevance. If local need changes or new national priorities emerge we will adapt our Business Plan..

A full review of progress made on delivering actions will be produced at the end of the year (March 2017).

## 2. Vision, Mission & Ambition

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**Our Vision** is to make Barnet a place where all children and young people thrive, receive protection and feel safe.

**Our Mission** is to:

- secure sustained improvement in multi-agency safeguarding performance and practice
- improve the way that safeguarding partners share information, resources and expertise in our day to day business of safeguarding children and young people
- be relentlessly self-critical in understanding from our data what works and what needs to change and improve.

**Our Ambition** is to ensure the Board is and continues to be:

- an inspirational, confident and influential partnership that delivers our vision and prioritises effectively
- focused on children, young people and their families
- informed by a coherent understanding of our local community and place, valuing diversity and emerging communities
- sighted on our strategic, operational management and frontline delivery
- a lead in promoting a learning culture that looks to the future
- a partnership that improves the quality of life of children, ensures our children and young people have equal access to opportunities and empowers them by actively involving them in the decisions affecting their lives.

### 3. Our Core Business Priorities

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The Board's business as usual is set out in the action plan below.

The Board will:

- ensure there is effective co-ordinated safeguarding practice and provision across the child's journey from universal services, early help and child protection to secure the best outcomes for children and families and continue to support and embed a multi-agency understanding of thresholds
- deliver and improve the quality assurance and challenge role of the BSCB through a Learning and Improvement Framework and Quality Assurance schedule including Section 11 audits<sup>1</sup>, multi-agency audits and overseeing practice via the BSCB dataset analysed quarterly by the Performance and Quality Assurance sub-group.
- improve how we capture the engagement of children and young people and frontline practitioners.
- maintain an interagency focus on key vulnerable safeguarding risk groups including missing children (from care, home or education), children and young people who are privately fostered and young people whose use of drugs and alcohol is problematic.

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<sup>1</sup> Children Act 2004, Section 11 imposes a duty on specified agencies to make arrangements to ensure that their functions are discharged having regard to the need to safeguard and promote the welfare of children. BSCB will test the effectiveness of these arrangements biennially by ensuring each agency completes and audit and attends a challenge panel.

## Core Business Action Plan

Priorities	Actions	Outcomes
<p>To ensure there is effective coordinated safeguarding practice, provision and outcomes across the child's journey from universal, through early help, child protection and children in care provision.</p> <p>To continue to support and embed a multi-agency understanding of thresholds and support information sharing.</p>	<p>Update the thresholds procedure to make it accessible, portable and useful to all professionals working with children.</p> <p>Check the understanding of thresholds and use of multi-agency tools through single and multi- agency audits and the LSCB dataset</p> <p>Monitor understanding / application of thresholds at the front door.</p> <p>Develop and embed multi-agency tools for recognising and recording need and managing risk e.g. use of the threshold and the inter-agency risk assessment tool</p> <p>BSCB training to support the implementation of toolkits and practitioners ability to manage risk at all levels of intervention.</p> <p>Monitor use of the escalation policy and ensure that issues raised through the audit programme are escalated to appropriate service leads for further investigation, check and challenge.</p>	<p>Appropriate referrals between agencies with the right level of detail using language that all colleagues understand.</p> <p>Need is effectively assessed, decisions are based on evidence, risk is considered and planned for.</p> <p>Robust interagency support when cases are more complex demonstrated through consistent engagement in planning and good co-ordination of care.</p>
<p>Ensure that the Boards' priorities are progressed through the relevant Sub-Groups(s) including work to</p>	<p>To inform the work programme for each of the sub-groups and ensure that progress against agreed priorities is achieved and regularly evaluated by the Board.</p> <p>That priorities identified within the Business Plan are communicated to the relevant Sub Group Chairs and that progress against these priorities regularly informs progress against the plan.</p> <p>To ensure that the priorities of each of the sub groups are updated as new and changing issues are brought to the attention of the Board.</p>	<p>The Board's priorities are progressed and evidence of improved practice, policy development and targeted programmes of training and development activities are reported to the Board through scheduled specific reporting to the Board and Business Management Group</p>

Priorities	Actions	Outcomes
<p>Improve outcomes for key vulnerable safeguarding risk groups</p>	<p>Ensure that BSCB key safeguarding indicators pick up on vulnerable risk groups.</p>	<p>Strategic efforts co-ordinated to safeguard these groups e.g. at partnership level and inter-agency level.</p> <ul style="list-style-type: none"> <li>- Professionals with improved knowledge and shared strategies for working with these young people.</li> <li>- Young people feel that practitioners understand their needs, talk to one another, listen to them and act in their best interest.</li> </ul>
<p>Further strengthen performance management framework, building on on-going work.</p>	<p>On-going development of performance management framework and data set. To include:</p> <ul style="list-style-type: none"> <li>- Identification of Key Performance Indicators (KPIs) to be reviewed by the PQA Sub-Group and reported to the Board.</li> <li>- Review the programme of multi-agency audits updating as new areas of practice for audit are identified.</li> <li>- Receive regular themed presentations on performance from partners for challenge at SCB meetings.</li> </ul>	<p>Evidence is available of multi-agency performance improvement, including evidence from single and multi-agency audits.</p> <p>Continuous service improvement is embedded and supported by appropriate data.</p>
<p>Strengthen and evidence the Board's effectiveness through rigorous challenge, participation and engagement</p>	<p>Undertake Section 11 Challenge Panels at each scheduled Audit refresh.</p> <p>Encourage professional challenge and debate at Board and Sub-Group meetings.</p> <p>Develop a process to evidence the outcome and difference made from the challenge and escalation policy.</p> <p>Ensure a process to evidence the outcome and difference made from the challenge policy.</p> <p>Promote participation and engagement of stakeholders wherever possible to allow the Board to challenge and develop practice.</p>	<p>Partner agency representation and contribution is maximised and engagement is strengthened.</p> <p>Partners increasingly feel confident to use respectful challenge as a means of improving services to children and young people.</p> <p>Stakeholder views inform policy and practice development and service commissioning</p>

Priorities	Actions	Outcomes
Ensure that the Board maintains a comprehensive overview of the work of partner agencies involved with safeguarding children.	<p>Receive regular reports and minutes from the Sub-Groups containing information relating to the level of activity and emerging issue related to practice and practice development.</p> <p>Take action on issues escalated by the Sub-Groups to the Board</p>	<p>The Board can be satisfied that partner agencies are meeting the requirements of the safeguarding agenda and 'Working Together' guidance.</p> <p>Issues escalated to the Board are addressed and appropriate action is taken and reviewed.</p>
To ensure the Board is able to meet its statutory responsibilities and work programme by ensuring appropriate budget arrangements.	Engage key partners in discussions about the BSCB budget informing them of pressures and risk which impact on the Boards ability to carry out its key functions and to remind partners of their statutory responsibility to provide financial support to the Board.	Effective safeguarding and child protection is maintained and priorities are progressed within resources.
Develop an effective model for developing and evaluating the impact of training on safeguarding practice.	<p>Implement range of appropriate evaluation approaches – range of measures identified for evaluating multi agency training including evidence from supervision, audit and personal evaluations with questions to delegates about their own personal improvement plans.</p> <p>Request and collation of reports from partner agencies with evidence about training impact on their workforce.</p> <ul style="list-style-type: none"> <li>- Actions achieved by implementing the following reporting tools/measures:</li> <li>- Evaluation self reporting at Levels1 and 2</li> <li>- Supervisor assessment at Level 3 to identify impact on practice</li> <li>- Annual Section 11 Challenge</li> <li>- Periodic reports to the Safeguarding Board by partner agencies</li> </ul>	Agencies secure assurance and can evidence the value and impact of training on individual's improved safeguarding awareness and practice.



## 4. Our Strategic Priorities

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The Business Plan sets out six priorities which the Board will focus on over the next two years. These were selected by Board members and are key areas for focus where we want to make a difference in the lives of children. We will work collaboratively to drive forward a real change in these areas.



## 5. Child/Adolescent Mental Health & Self-Harm

Growing up is meant to be one of the very best times in anyone's life but it can also be tough. There are many pressures and some children and young people are exposed to situations and experiences that can make them particularly vulnerable.

High quality and accessible mental health support for children and young people is vital to improve outcomes for children, and by intervening early and building young people's resilience we can improve both life chances for individuals and reduce the reliance (and cost) on public services later in life.

Child and adolescent mental health is a significant factor for children in Barnet. In the past year 2807 children and young people were referred to Barnet CAHMS, compared to 2139 children and young people the previous year. This represents an uplift of 31%. Recent data also suggests that acute admissions for eating disorders are rising, as are incidents of self-harm.

Improving outcomes for children and young people will require a multi-agency approach, and the BSCB is well placed to coordinate, develop and agree local initiatives. We will work to strengthen the multi-agency response to mental health issues and improve access to high-quality evidence-based treatment for children and young people.

## Child/Adolescent Mental Health & Self Harm

Strategic Approach	What we will do	How we will do it	Responsible Leads (TFG Members)	Evidence of improvement in performance / Expected outcomes	Timescale	RAG
Prevent	Promote good mental wellbeing and resilience, by supporting children, young people and their families to adopt and maintain behaviours that support good mental health	Raise awareness amongst parents and practitioners of the importance of early attachment and interactions between baby and parents and work to promote understanding of importance of: <ul style="list-style-type: none"> <li>• Nurturing a child's confidence and self-esteem</li> <li>• Guidance and discipline: parenting programmes</li> <li>• Play opportunities with other children</li> </ul>	Karen Pearson	Publication of Information on the BSCB website, Raised awareness amongst practitioners and parents	October 2016- October 2017	
		Prepare parents for the stress they might feel when their baby cries and help them to cope better by promoting the use of NSPCC video on coping with crying baby which has evidenced good outcomes in supporting new parents	Deborah Dover/Trish Stewart/Karen Pearson	Understanding of the link between stress, depression, relationship problems and baby's crying.  Coping with Crying programme is helping to keep babies safe. Parents who have seen the film are more likely to react positively towards their baby's crying and feel confident seeking help and support when needed.	January 2017	
	Work to reduce risk factors for special populations	Further develop an understanding of the relationship of child mental health & self-harm with other safeguarding risks i.e. Bullying or harassment at school <ul style="list-style-type: none"> <li>• or somewhere else</li> <li>• DV</li> <li>• Child abuse – physical, sexual, neglect, emotional abuse</li> <li>• Poor parenting or caregiving</li> <li>• Parental mental illness</li> </ul>	Deborah Dover/Lucille Balcombe/Tina Read	Improved Early identification & increase in early help referrals	February 2017	

## Child/Adolescent Mental Health & Self Harm

Strategic Approach	What we will do	How we will do it	Responsible Leads (TFG Members)	Evidence of improvement in performance / Expected outcomes	Timescale	RAG
	Education staff feel confident and competent in recognising emotional and mental health needs and know how to help children and young people to access assessment and support.	<p>Provide training for education staff to:</p> <ul style="list-style-type: none"> <li>- Help them identify and address those with less severe problems at an early stage and build their resilience.</li> <li>- Help schools identify and support pupils with more severe needs and help them make appropriate referrals to specialist agencies such as Child and Adolescent Mental Health Services (CAMHS) where necessary</li> </ul> <p>Explore the use of PSHE guidance and lesson plans to support the delivery of effective teaching on mental health issues to include</p> <ul style="list-style-type: none"> <li>- robust PSHE starting to address anxiety in primary schools and continuing through to school leavers</li> </ul> <p>Promote the use of MindEd, a free online training tool which provides information and advice for staff on children and young people's mental health which can help to sign post staff to targeted resources when mental health problems have been identified.</p>	Neil Marlow/Jane Morris/ Deborah Dover	Children, young people and parents/carers have access to information about anxiety: what it is, how you can help, and links to organisations which can support children guidance for schools in place, in conjunction with the PSHE, which will help schools provide age-appropriate teaching on mental health problems from anxiety and depression to eating disorders and self-harm	October 2016- October 2017	
	Develop and oversee local prevention strategies	<p>Work in collaboration with Public health and other relevant partners to develop prevention strategies including:</p> <ul style="list-style-type: none"> <li>- Suicide Prevention strategy,</li> <li>- Bullying prevention programmes,</li> <li>- Behaviour management programmes</li> </ul>	Natalia Clifford Natalie Daley	Preventative strategies developed. publication of information on BSCB website	October 2017	
		Explore use of programmes aimed at promoting positive behavior in two and three year olds (such as Sign 4 Little Talkers) which encourage positive communication and	Karen Pearson	Evaluation of pilots demonstrates impact	March 2017	

## Child/Adolescent Mental Health & Self Harm

Strategic Approach	What we will do	How we will do it	Responsible Leads (TFG Members)	Evidence of improvement in performance / Expected outcomes	Timescale	RAG
		behaviours, delivered in Early Years Settings.				
		<p>Raise awareness amongst staff of the impact of environmental risk factors on young people such as:</p> <ul style="list-style-type: none"> <li>- Overt parental conflict including domestic violence</li> <li>- Family breakdown (including where children are taken into care or adopted)</li> <li>- Inconsistent or unclear discipline</li> <li>- Hostile and rejecting relationships</li> <li>- Failure to adapt to a child's changing needs</li> <li>- Physical, sexual, neglect or emotional abuse</li> <li>- Parental psychiatric illness</li> <li>- Parental criminality, alcoholism or personality disorder</li> <li>- Death and loss – including loss of friendship</li> </ul>	All	Feedback from partner agencies demonstrates increased awareness of impact of negative behaviours on the well-being of children and young people.	October 2016- October 2017	
	Ensure professionals who work with children and young people are trained in child development and mental health, and understand what can be done to provide help and support for those who need it.	<ul style="list-style-type: none"> <li>• Provide information to teachers, parents, community organisations, youth clubs etc to help them recognise the early signs of mental health problems.</li> <li>• Training needs analysis for schools to be completed.</li> <li>• Develop training and information packs with those in the education sector</li> <li>• Provide awareness raising sessions for professionals: what is self-harm, breadth of self-harm and top tips for professionals</li> </ul>	<p>Dr Deborah Dover/Jane Morris</p> <p>Dr Deborah Dover</p> <p>Dr Deborah Dover</p>	<p>Delivery of training &amp; identified increase in quality and quantity of referrals</p> <p>Increased number of school staff better informed on early signs of mental health problems</p> <p>Children and young people are given early help to achieve positive health outcomes, avoiding escalation into clinical intervention.</p>	October 2016- October 2017	

## Child/Adolescent Mental Health & Self Harm

Strategic Approach	What we will do	How we will do it	Responsible Leads (TFG Members)	Evidence of improvement in performance / Expected outcomes	Timescale	RAG
		at point of identification of self- harm				
	<p>Understand the nature and extent of the local issues in relation to child &amp; adolescent mental health &amp; Self harm</p> <p>Strengthen information systems and evidence for mental health</p>	<p>Analyse CAHMS data to better understand the prevalence of child and adolescent mental health and self-harm issues in Barnet</p> <p>Develop data set as a supplement national data to aide commissioning and strategic development</p>	<p>Eamann Devlin</p> <p>PQA</p>	<p>Better understanding of prevalence of child/adolescent mental health and self-harm. Data enables evidence based commissioning of services.</p> <p>Early identification, increase in referrals for Early help services</p>	December 2016	
<b>Identify</b>	<p>Improve early recognition of emotional or behavioural problems in childhood and adolescence amongst health staff</p> <p>Ensure School nurses are equipped to provide a consistent response to mental health issues</p>	<ul style="list-style-type: none"> <li>Train GPs in identifying and referring problems early and supporting families, children and young people to develop resilience</li> <li>Explore possibility of named lead person in each surgery for children's mental health issues.</li> <li>Explore introduction of CAMHS group supervision for school nurses/GPs throughout the borough.</li> </ul> <p>Explore the use dedicated courses run by school nurses to help those struggling with anxiety, low self-esteem and confidence issues.</p>	<p>Designated GP /Deborah Dover/Lucille Balcombe</p> <p>Trish Stewart CLCH</p>	<p>GPs and other settings (hospitals e.g.) are trained in: Self-harm; Eating disorders; Suicidal thoughts; and Making referrals.</p> <p>Children and young people receive early help with emotional and mental health issues from those best placed to recognise it.</p> <p>Evidenced based programme in use, with referrals being made by GPs, social care, teachers and the families themselves.</p>	November 2017	

## Child/Adolescent Mental Health & Self Harm

Strategic Approach	What we will do	How we will do it	Responsible Leads (TFG Members)	Evidence of improvement in performance / Expected outcomes	Timescale	RAG
	Ensure that when a child needs specialist mental health support, it is delivered jointly by the relevant agencies.	<p>Review and re-launch the BEHMT and Family Services interface Group to improve working relationships and troubleshoot specific cases</p> <ul style="list-style-type: none"> <li>○ Refresh ToR</li> <li>○ Review membership of the Group</li> </ul> <p>.Clear referral pathways and service contact information is in place to ensure equitable access to support that meets the child or young person's assessed needs.</p>	Lucille Balcombe	<p>Issues regarding communications between organisations regarding referrals are examined and resolved</p> <p>Services work in an integrated way to ensure effective communications and holistic support packages are in place</p>	November 2016	
	Work to adequately support young people where there are issues of self-harm	<ul style="list-style-type: none"> <li>• Provide appropriate training in the assessment and early management of children and young people who have self-harmed</li> <li>• Provide training to practitioners who have contact with children and young people who self-harm in the assessment of risk</li> <li>• Develop knowledge and awareness of 'what works' to prevent self-harm and effective coping strategies for children and young people</li> </ul>	Barnet CAMHS	<p>clearer and wider understanding of self-harm in all areas, especially schools and GPs :</p> <p>understanding of what is self-harm, breadth of self-harm and top tips for professionals at point of identification of self-harm</p>	January 2017	
		Scope offer of CAHMS home visits and outreach workers	Deborah Perriment BEHMHT		November 2016	

## 6. Neglect

Neglect is about the relationship that a parent or carer has with their child. It is the persistent failure to meet a child's basic physical and/or psychological needs. Neglect causes great distress to children and is likely to result in the serious impairment of the child's health or development in the short and long term.

Children who are neglected may have poor appearance and hygiene, health and development problems and housing and family issues. As they grow up, they are more likely to have mental health problems, poor physical health, difficulties with relationships and reduced employment in their adult life. In some cases, neglect can cause permanent disabilities and at the upper end of the spectrum, neglect can be life-threatening.

Nationally neglect is the most common of the four categories of child abuse (which include physical, sexual and emotional abuse). In Barnet in 2015/16, 36% of Barnet's children were subject to a Child Protection Plan as a result of Neglect.

Using insight data and expertise from across the partnership, a Neglect Strategy was developed by the neglect sub-group and signed off by the Board in January 2016. The aim of Neglect Strategy is to improve outcomes for children suffering from neglect in Barnet by partners intervening as early as possible



## Neglect Action Plan

Strategic Approach	What we will do	How we will do it	Responsible Leads (TFG Members)	Evidence of improvement in performance / Expected outcomes	Timescale	RAG
<b>Prevent</b>	Participate in Phase 3 of the Graded Care Profile 2 pilot	In partnership with NSPCC	Sophie Reece-Trapp	Invoice for purchased licence & materials Inclusion in high-quality NSPCC learning and development opportunities for Champions.	Sept-16	G
	Purchase GCP2 licence	Integra Finance	Sharon Davidson		Oct-16	
	Create a network of Neglect Champions across Barnet to deliver training, disseminate information and provide guidance to professionals around neglect	Nominate sufficient champions from across the partnership Secure Champions' commitment through information sessions and a clear role description Create a buddying system for champions Establish a Champions' network	Sophie Reece-Trapp  Karen Pearson Karen Pearson	Champions identified Positive feedback from Champions Champions undertake role as set out in role description	Aug-16 Nov-16 Nov-16 Oct-16	G
Up-skill practitioners from across the partnership to fulfil the role of Neglect Champion	Enroll Champions on 2 days of NSPCC training Further learning around prevention through participation in the national network of local authorities for the GCP2.	Sophie Reece-Trapp Champions	Champions attend 2 days of NSPCC training with new skills gained Improved Barnet offer through learning from other local authorities.	Nov-16 Apr-17		

	Raise awareness amongst key agencies of neglect issues, using the Graded Care Profile 2 as a framework for identifying neglect	Explore channels of communication & awareness-raising activity via the Neglect sub-group	Sub-group	Referrals/Merlins feature GCP2 structure. Increase in referrals from partner agencies for neglect	Mar-16	
<b>Identify</b>	Support staff across all agencies to IDENTIFY neglect at all tiers, including early intervention	Include identification as a key part of refreshed multi-agency training, including recent research on mindsets and subjectivity. Explore options for refreshed multi-agency training. Include identification as a key part of refreshed social care neglect training (as above). Create Barnet guidance for using the GCP2	Karen Pearson  Sharon Davidson  Sophie Reece-Trapp	New training specification Positive feedback from training  Training evaluation mechanisms demonstrate impact  Guidance document produced and circulated	Jul-16  Nov-16 Jan-17  Nov-16	G
<b>Intervene/ support</b>	Roll out the GCP2 with an initial focus on the West of the borough, broadening to the whole borough: Support staff across all agencies to ASSESS neglect at all tiers, including early intervention	Identify training dates, trainers, training locations. Communicate information to multi-agency partners Upload relevant resources to the Procedures Manual (Family Services) and identify central repository for resources across agencies. Equip practitioners with: <ul style="list-style-type: none"> <li>• the necessary skills (training)</li> <li>• resources (central repository, bespoke Barnet product)</li> <li>• and support (Champions)</li> </ul> ...to undertake GCP2 assessments	Sharon Davidson	Programme of Neglect training Resources held accessibly in central repositories across key agencies GCP2 presentation developed for roadshows Practitioners in attendance at roadshows	Nov-16 Dec-17 Dec-16  Ongoing	G

	Ensure that practitioners understand how the EIP Menu of Interventions can be used once a plan is in place for children suffering from or at risk of Neglect.	GCP2 presentation at EIP Roadshows and other relevant fora Ensure GCP2 training includes reference to the EIP Menu of Interventions	Sub-group leads  Sharon Davidson	Presentations delivered Inclusion of EIP MOI in Neglect training	Ongoing  Nov-16	G
<b>Monitor</b>	Monitor quality and number of GCP2 assessments undertaken	Embed tracker for staff trained in the GCP2 Explore how impact will be measured Establish a quality assurance framework Explore how GCP2 can be incorporated into the multi- and single-agency reporting process	Sub-group leads	Tracker used & up-to-date Impact measurements established QA Framework demonstrates quality of assessment	Jan-16- Ongoing Dec-16	
	Identify a central repository for storing and collating findings from implementation	Shared drive and access for relevant practitioners Agreed method and format for storing data on distance travelled	Sub-group leads Karen Pearson	Shared drives set up with access Clear format that demonstrates distance travelled	Dec-16 Jan-16	
	Report success in to relevant fora	Identify fora (e.g. BSCB) and establish lines of reporting to the relevant individuals (e.g. Business Manager)	Ronit Green	Clear reporting lines in place	Nov-16	

## 7. Domestic Abuse

Domestic abuse is any type of controlling, bullying, threatening or violent behaviour between people in a relationship. Domestic abuse can seriously harm children and young people. We know that children exposed to violence will suffer a range of severe and lasting detrimental effects, usually on every aspect of a child's life, although it will vary according to the child's resilience and the strengths and weaknesses of his / her particular circumstances.

Domestic violence continues to be a significant factor for children in Barnet. An analysis of random samples of CAFs in Barnet found DV featured in 90% of the cases . Since April 2014 and when MASH started recording presenting issues, nearly a quarter of contacts were identified as having domestic violence present in the family. Of these domestic violence cases, 13% progressed under the social care threshold to CAF whereas over double that amount progressed over the threshold to social care (28%).

Early intervention services have a critical role in identifying and addressing the safeguarding needs of the child, alongside child protection services. Partners on the BSCB are committed to improving the identification and recognition of DV and its effects on children and young people, and strengthening multi agency responses to effectively tackling DV.

By working closely with the Domestic Violence and Violence Against Women and Girls sub group (DV & VAWG) of the Community Safety Partnership Board the BSCB will work with our partners to raise awareness about impact of DV on children and young people, intervene and secure the right help and support for victims and pursue the right enforcement paths. .

Domestic Abuse Action Plan						
Strategic Approach	What we will do	How we will do it	Responsible Leads (TFG Members)	Evidence of improvement in performance / Expected outcomes	Timescale	RAG
<b>Prevent</b>	Support at risk groups	Increase understanding of DV with other safeguarding issues such as: <ul style="list-style-type: none"> <li>The presence of parental mental health problems</li> <li>Substance misuse</li> <li>A history of violence</li> <li>Lack of take up of services offered</li> </ul>	DV & VAWG Business Manager	Understanding the risk factors associated with domestic violence helps determine good effectiveness measures, recognise key intervention points, and select appropriate responses.	January 2017	
	Raise awareness of domestic abuse and the impact it has on children	<ul style="list-style-type: none"> <li>Raise awareness of impact of DVA on children through events during safeguarding month</li> <li>Target Children's Centres identified in areas where DVA is prevalent</li> </ul>	DV & VAWG Business Manager  Karen Pearson	Events on DV and its impact on children during November Publication of information on BSCB Website.  Awareness raising session in children centres	November 2016  January 2017	
<b>Identify</b>	Increase the number of referrals to the domestic violence perpetrator programmes for men with dependent children	<ul style="list-style-type: none"> <li>Provide awareness sessions for social care</li> <li>Increase the number of referrals to the domestic violence perpetrator programmes for men with dependent children by social care</li> <li>Monitor number of referrals and successful completions of perpetrator programmes</li> <li>Improve data collection on number of perpetrators with dependent children</li> </ul>	AD Social Care   DV & VAWG	Delivery of training & identified increase in quality and quantity of referrals  Increase in successful completion of courses for perpetrators with children  perpetrator programmes commissioned to include data collection on number of dependent children	February 2017  February 2018	

Domestic Abuse Action Plan						
Strategic Approach	What we will do	How we will do it	Responsible Leads (TFG Members)	Evidence of improvement in performance / Expected outcomes	Timescale	RAG
Identify	Increase the quality and quantity of referrals from GPs and other Health Providers	Targeted training and support programme for providers: - Roll out IRIS training for GPs	DV & VAWG CCG	Delivery of training & identified increase in quality and quantity of referrals	January 2017	
	Increase the quantity and improve the quality of domestic violence and abuse referrals from hospitals	Monitor effectiveness of IDVAS by Collate and analyse data on number of IDVA referrals  Explore increasing use of IDVAs	Acute Trust/DV& VAWG Coordinator  BEHMT	improved partnership services where there is domestic violence and abuse, staff in hospitals recognise and refer domestic violence and abuse cases	February 2017	
	Secure best practice in information sharing,	<ul style="list-style-type: none"> <li>Improve Information sharing between social care, police and schools to safeguard vulnerable children</li> <li>Strengthen links between community safety and, family services in sharing data and intelligence around domestic violence</li> </ul>	Elaine Tuck/Neil Marlow/Paula Light  Kiran Vagarwal	Practitioners understand when, why and how they should share information and are able to do so confidently and appropriately as part of their day-to-day practice.	March 2017	
	Explore the proof of concept that domestic abusers (whose risk are unknown) will provide useful further information to help manage risk concerning children when invited to undertake a polygraph test.	Barnet Police working with the Forensic Psychiatry Department at Newcastle University (the government's academic advisors in polygraphing sexual offenders)  Where are we at with this? What should our actions for 2016/18 should be	DV & VAWG Paula Light	Increase in information provided by domestic abusers to facilitate better risk management		

Domestic Abuse Action Plan						
Strategic Approach	What we will do	How we will do it	Responsible Leads (TFG Members)	Evidence of improvement in performance / Expected outcomes	Timescale	RAG
<b>Intervene &amp; support</b>	Assess the quality of partnership services for the child and families	<ul style="list-style-type: none"> <li>Conduct multi-agency case file mapping exercise to explore the effectiveness of early help/early intervention services in safeguarding children subject to domestic violence</li> <li>Work to deliver actions based on issues identified through the multi-agency audit</li> </ul>	PQA Business Manager	Multi-agency audit confirms that children subject to domestic violence are in receipt of early help services and are better protected	December 2016	
	Examine repeat victimisation and the number of repeat high risk domestic abuse cases	<ul style="list-style-type: none"> <li>Record and monitor repeat victimisation and analyse repeat referrals</li> </ul>	DV & VAWG Business Manager	Identify those that are at a disproportionate risk of victimisation.  Enhanced information sharing to improve victims' safety through a coordinated community response	March 2017	
	Increase the number of referrals to the domestic violence perpetrator programmes for men with dependent children (working with National Probation Service and Community Rehabilitation Company and Children's Service)	Audit of CPP cases, mapping of police arrest information and breakdown of IDAP and DVIP attendance and outcomes		Increase in successful completion of courses for perpetrators with children.	March 2017	
<b>Enforce (disrupt &amp; prosecute)</b>	Increase the use of the full range of prosecution, detection, civil injunction and non-molestation orders in police cases that involve domestic abuse, where there are children in the family.	Task and finish group to scope range of possibilities and develop operating processes	DV & VAWG	DVPOs utilised and enforcement secured  Tracking of use of case disposal, measurement of repeat incidents and link between completion of course and desistance	Oct 2016 to oct 2017	

## 8. E-Safety

The BSCB recognises that as the use of digital communications technology has grown, so too have the benefits and the risks that children now come into contact with on a daily basis. The online world has become firmly integrated into the lives of young people with most not making any distinction between their online and offline lives. It is no longer enough to consider child safety in a purely 'real world' focus. We need children and young people to understand that their online behaviour may have offline consequences.

### **The facts about being online**

According to the NSPCC, one in five 8 to 11 year olds and seven in ten 12 to 15 year olds has a social media profile. One in three children have been a victim of cyberbullying and around one in seven young people have taken inappropriate picture of themselves. Over half went on to share the picture with someone else. Ofcom have found in their Children and Parents: Media Use and attitudes Report (Oct 2014 ) that 29% of friends children aged 12 to 15 have online are not personally known to them and 51% of teenagers have revealed information online that could be used to identify them.

The BSCB is committed in its ambition to keeping children and young people safe in a digital world and to particularly ensure the most vulnerable are protected from harm such as online abuse, child sexual exploitation, exposure to explicit material, theft of identity, grooming, cyber-bullying and radicalisation

The BSCB will work to ensure that all professionals working with children and young people, and young people themselves, have the skills, knowledge and understanding to address e- safety issues effectively. We will work to support organisations such as schools, youth providers, voluntary and community sector groups in developing their own responses to the risks to the young people they deal with.





E-Safety Action Plan						
Strategic Approach	What we will do	How we will do it	Responsible Lead (TFG Members)	Evidence of improvement in performance / Expected outcomes	Timescale	RAG
	how to identify potentially vulnerable young people.	online extremism and radicalisation is incorporated within the local script for Prevent WRAP training, so that it is included in all core training delivered from frontline practitioners.			2016	
	Provide peer support to victims	Explore use of peer support forums such as Peer listening schemes, buddying schemes	Business Manager/ CSE coordinator	Peer support as a way of supporting young victims of online abuse based on evidence of what works in peer support	March 2017	
	Ensure that expectations for recording & reporting e-safety incidents are clear	<ul style="list-style-type: none"> <li>Develop simple multi-agency template for recording e-safety incidents;</li> <li>Publish guidance on BSCB website</li> </ul>	Paula Light Business Manager	Clear accessible guidance on recording and reporting safety – incidents available on BSCB website.  Increase in the number of reported online incidents	February 2017	
	Understand the nature and extent of the local issues in relation to online abuse	Develop data collection of number of cases where internet facilitated abuse	Paula Light Business Manager PQA	Better understanding of the range of online abuse and the number of offences	January 2017	
Enforce: (disrupt and prosecute)	Increase arrests, prosecutions and convictions for e safety related crime.	<ul style="list-style-type: none"> <li>Develop understanding of the range of offences</li> <li>E-safety group will work with the police to develop an operating process</li> </ul>	Paula Light	Proper understanding of range of offences, increase in arrests, prosecutions and convictions.	February 2017	

## 9. Information Sharing

Information sharing is key to delivering better, more efficient services that are coordinated around the needs of children and young people. It is essential to enable early intervention and preventative work and for safeguarding and promoting the welfare of children and young people. The appropriate sharing of information can result in the jigsaw of information becoming complete with new, accurate and informed conclusions being made about the situation of a child.

A consistent message resulting from inquiries and Serious Case Reviews is the need for agencies to do better in recording and sharing the information they hold about children and young people. The SCR we have recently published in Barnet is no different. We found that there were occasions when professionals' understanding of how information should be shared was lacking.

Our new priority will address this. We will work to ensure that professionals working with a child or young person are able to share information about vulnerable children consistently. It is important that practitioners understand when, why and how they should share information so that they can do so confidently and appropriately as part of their day-to-day practice.

The actions below are based on the findings from an independent 'Review of the operational practice around the sharing of information between partner agencies in Barnet' which took place in early 2016.

Information Sharing						
Strategic Approach	What we will do	How we will do it	Responsible Leads (TFG Members)	Evidence of improvement in performance / Expected outcomes	Timescale	RAG
	Develop a One Barnet approach for information sharing, confidentiality and role of consent and ensure that the voices of the child and parents are at the core of all work.	Agree and produce a simple guide for practitioners on the overarching principles in which each agency should be sharing information to safeguard children <ul style="list-style-type: none"> <li>Develop principles for information sharing for practitioners in relation to children across the partnership.</li> </ul>	BSCB chair Chris Miller  Working group	practitioners understand when, why and how they should share information	January 2017	Y
		Agree the mechanism for challenge where information sharing is not working well	Working Group	mechanisms for challenge in place	March 2017	
		Develop a dataset to monitor the effectiveness of Information Sharing and maintain oversight through PQA	PQA	Indicators form part of the PQA framework	October 2016	
		Conduct an audit of 3 low level referrals to test the usefulness of data sharing system currently in place. <ul style="list-style-type: none"> <li>Identify good practice</li> </ul>	PQA	Multi-agency audit confirms that data sharing systems/processes in place which improve outcomes for children	March 2017	
	Ensure that the workforce is skilled to manage information sharing	Provide multi-agency training on effective information sharing in a multi-agency context	L&D	Multi-agency training on information sharing rolled out across the partnership, is well attended and improves practice	January 2017	

Information Sharing						
Strategic Approach	What we will do	How we will do it	Responsible Leads (TFG Members)	Evidence of improvement in performance / Expected outcomes	Timescale	RA G
	Ensure Accurate recording and reporting of data	Develop a consistent dataset around CSE and missing to ensure a coherent picture	Elaine Tuck	Improved understanding amongst Board members of trends and patterns	October 2016	
		Make more visible and improve accuracy of information around attendance and provision of information at multi-agency meetings, including MASE, CP conference and LAC reviews	Sandra Cornwall	Partners ensure attendance at multi-agency meetings, Where attendance is not possible, partners ensure that full reports are provided	November 2016	
		Strengthen links between community safety and family services in sharing data and intelligence around domestic violence	Kiran Vagarwal & Priscilla Kurewa	Standardised referral process for sharing intelligence in place	February 2017	
	Increase use of partnership data intelligence	Develop a consistent approach to the gathering and analysis of education welfare information from the range of services that support better attendance	Alison Dawes/Neil Marlow	Improved information sharing	March 2017	
		Identify a Troubled Families lead for each agency	Karen Pearson and lead from partner organisations		January 2017	
	Ensure appropriate Information Governance arrangements are in place	Ensure all ISAs up-to-date <ul style="list-style-type: none"> <li>○ Set up small working group</li> </ul>	Siobhan McGovern/ Elaine Tuck	Governance in place to enable staff to share information appropriately	February 2017	

Information Sharing						
Strategic Approach	What we will do	How we will do it	Responsible Leads (TFG Members)	Evidence of improvement in performance / Expected outcomes	Timescale	RA G
		Review e-MASH data protection statement which currently implies that data protection is linked to public funds.	Priscilla Kurewa	Sharing information linked to improving outcomes to children, young people and their families	January 2017	
	Monitor effectiveness of information sharing	Maintain oversight of the information sharing performance indicators through PQA	PQA	Barriers to information sharing identified and addressed		
	Develop a communication strategy that supports effective information sharing.	Clarify procedures and protocol for identification of offenders and ex-offenders between education, police and social care to ensure info where children are involved is timely.	London Probation & CRC	Children and young people are supported and risk minimised	February 2017	
		Improve the communication flow from the MASH back to referrers.	Priscilla Kurewa	Ensure a feedback loop so that referrers can provide ongoing support based on need for the child		
		Ensure children's social care are keeping other agencies up-to-date (e.g. with schools around allocated SW, and core group cancellation).	Amanda Andrews			
		Review and Improve flow of information from MASH to schools via the Education representative at the MASH	Neil Marlow	Education rep at the MASH provides feedback loop	December 2016	

Information Sharing						
Strategic Approach	What we will do	How we will do it	Responsible Leads (TFG Members)	Evidence of improvement in performance / Expected outcomes	Timescale	RAG
		Develop a plan to increase CAFs coming from children's centres and health and improve information sharing from health visitors and school nurses	Karen Pearson	Issues are identified early in the life of a child and the life of a problem. Early years and early help practitioners sharing information to improve outcomes for families	January 2017	
	Review how current systems could work more effectively for better information sharing and consider the areas of innovation	Get automated information sharing in place between LA, A&Es and out of hours services	Helen Swarbrick, Siobhan McGovern, Elaine Tuck	Improved sharing of information leading to informed decisions about the needs of the child	March 2017	
		Explore ways to enable appropriate access for partners to the children's social care case management system	Jo Pymont, Elaine Tuck	Effective information sharing systems in place	April 2017	
		Scope the development of cross-borough info-sharing protocols (shared care records project)	Eliassa Rospigliosi, Siobhan McGovern		April 2017	

Information Sharing						
Strategic Approach	What we will do	How we will do it	Responsible Leads (TFG Members)	Evidence of improvement in performance / Expected outcomes	Timescale	RAG
		Improve access to information about children and young people with disabilities across social care, health, police, adults, education, joining up Datasets <ul style="list-style-type: none"> <li>▪ Determine what information each area currently holds and what information should be shared with partners</li> </ul>	SEN lead (need to identify) Andra clare, Martin Payne	children with a disability and families have access to the best possible support and services are available	January 2017	



## 10. Resilience

The LBB has adopted Resilience as a strategic approach to delivering the best outcomes for children and young people. An approach based on resilience involves looking for strengths and opportunities that can be built on, rather than for issues or problems to treat. There is a growing body of evidence which outlines ways that can support parents and families to be more resilient.

The BSCB has adopted Resilience as a priority to ensure that the work of the BSCB is aligned to LBB's strategic plan in which resilience is a key enabler for strengthening families. We will work as a partnership to incorporate resilience into practice across the Borough

Resilience						
Strategic Approach	What we will do	How we will do it	Responsible Leads (TFG Members)	Evidence of improvement in performance / Expected outcomes	Timescale	RAG
	Ensure a shared understanding across partnership of resilience	Deliver Partnership resilience workshops starting September 2016	AD Social Care		September 2016-March 2017	Y
		Partners to develop resilience philosophies and what good resilience based practice looks like for them and what support they need to embed this	All		September 2016 – January 2017	
		Coordinate and deliver a partnership roadshow integrating EIP and resilience starting in Sept 2016	AD Social Care/ Karen Pearson		September 2016-January 2017	
		Develop and share case studies of good resilience based practice	All			

Resilience						
Strategic Approach	What we will do	How we will do it	Responsible Leads (TFG Members)	Evidence of improvement in performance / Expected outcomes	Timescale	RAG
	Roll out resilience based training in a multi-agency context	Resilience Task & Finish group to identify training requirements	Jo Pymont L&D coordinator		January 2017	
		Develop a partnership training plan on resilience	Jo Pymont/L&D coordinator		January 2017	
		Introduce Signs of Safety across the partnership through Partner briefings  Identified partners to attend 2-day Signs of Safety training	Jo Pymont		November 2016-March 2017	
	Embed resilience philosophy and model across the partnership	Resilience pilots across schools and health	AD Social Care/School Safeguarding lead/CCG			
		Partners to develop outcome measures to measure distance travelled in terms of embedding resilience philosophy  Conduct multi-agency audits to be used to measure impact and learning	PQA  PQA		January 2017	

## 11. How we will evidence improvement in performance

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The BSCB and the Performance and Quality Assurance sub-group to properly analyse and evaluate performance of each partner and provide challenge in order to help partners to:

- Measure the impact of BSCB's activity on outcomes for children,
- Undertake quantitative and qualitative evaluation of practice and interventions,
- Utilise and apply National research as a benchmark in order to drive improvements in performance,
- Identify areas for improvement going forward to secure better outcomes for children and families in Barnet.

This approach will enable BSCB to properly measure performance for each partner and drive forward improvement in performance.

Key to this will be working with Youth Shield to ensure we have a child-centred approach and good information sharing and exchange of relevant data between all partners as set out in the Terms of Reference.

In addition, BSCB will undertake and evaluate s11 audits and complete multi-agency themed audits to identify good practice, weaknesses, and areas for improvement to ensure the Board and sub-groups are making a difference and focusing the limited resource on what really matters. The Performance and Quality Assurance sub-group will commission 4 multi-agency themed audits for each 12 month period and will make recommendations as appropriate to the Business Management Group.

## 12. Budget, Risk Management and Responding to Change

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### **Budget and Resources**

The Budget Summary for 2016/17 is attached in Appendix 1. The summary sets out projected spend for the next financial year and partner contributions. Any projected overspends or underspends will be managed by the Business Management Group at its quarterly meetings.

### **How we will manage risk**

BSCB will receive progress at each quarterly meeting on the Action Plans to identify and manage risks to delivery of its core business. Any identified issues that place core business delivery at risk will be escalated up to senior level by the relevant agency, organisation or service.

### **How we will respond to change**

We are aware from our experience that new challenges can arise at any time with regard to safeguarding children. To enable us to adapt and respond appropriately to any pressing new challenges either locally or nationally as well as respond to changes in the performance of our partners' performances or their staff, the Business Management Group will keep the Business Plan under review at its quarterly meetings to ensure BSCB is properly allocating its energy and resource to what really matters in Barnet. The Business Management Group will seek to ensure that change and improvement are consistently and effectively implemented and reviewed for their impact. Ultimately, our collective goal is to ensure that such changes impact positively on the children, young people and families that we serve.

## Appendix 1: BSCB Budget 2016-17

<b>LSCB</b>			
<b>Income</b>			
Carry Forward	10000		
LBB	98,000		
MPS	5000		
Barnet CCG	12500		
CLCH	12500		
BEHMHT	12500		
Royal Free NHS FT	12500		
NPS	1000		
London CRC	1000		
NELFT	550		
CafCASS	550		
LFB	500		
	166,600		
<b>Commitments</b>			
Business Manager		-56000	
Administrator		-37620	
Chair		-17500	
Training		-22000	
Safeguarding Partnership Assoc		-1500	
SCR /IMR/SCIE		-10000	
Misc; Catering Printing Advertising Expenses		-3000	
<b>Proposed Land D officer (0.25 FTE)</b>		-11000	
	166,600	-158620	<b>7,980</b>
			91