Appendix 1

Medway Safeguarding Children Board

Safeguarding Medway's children together

Medway Safeguarding Children Board

Annual Report of 2018-19

November 2019

www.mscb.org.uk

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Foreword from Independent Chair

This Annual report describes the final year of operation of the Medway Safeguarding Children Board (MSCB). It brings to a close more than a decade of work by the MSCB, which the Kent Police, Medway Council and Medway NHS Clinical Commissioning Group have now decided should be replaced by the new, more streamlined Medway Safeguarding Children Partnership. Paragraphs 2.24 to 2.28 describe the new way of working.

The changes that the new Safeguarding Partnership have ushered in make good sense but must not be the occasion for a diminution of the commitment to multi-agency working that we are repeatedly reminded, both here in Medway and nationally, are essential to keeping children safe.

In writing a final introduction, my fifth, to a MSCB Annual report, I would like to close by paying credit to the hardworking team of MSCB officials, very ably led by their Manager, Simon Plummer, without whose unstinting efforts these past five years most of the achievements of the Safeguarding Board would not have been made. They have been an excellent team and I am delighted that the new partners have had the wisdom to keep them intact as they move into this new era. Thank you Claire, Kirstie, Rhonda, Kerry and Simon!

John Drew C.B.E.
Independent Chair
Medway Safeguarding Children Board

Section One – Independent Chair's Introduction

How effective are the arrangements for keeping children safe and promoting their welfare in Medway today?

1.1 This annual report concentrates largely on the work of Medway Council in keeping children in Medway safe today. While it is important to recognise the central role of the Council it is also important that the role of the other professionals working with children in Medway is kept in focus.

1.2 The rising number of early help assessments undertaken in Medway, which have more than doubled in three years, is an important indicator of the scale of need in Medway but also of the growing engagement of other agencies. It suggests that the multi-agency component of safeguarding is working, as does the rise in numbers of referrals to the Council's Single Point of Access, which increased by a half (50%) in 2018/19.

1.3 There has been a small but continuing rise in the number of children subject to a child protection plan. This stands above not only the national average (as anyone familiar with the social demographics of Medway would expect it to be) but also the cluster of authorities that appear to be most similar to Medway (in jargon, Medway's 'statistical neighbours'). This will be of concern to the new Medway Safeguarding Children Partnership, as it cannot be explained away by social need alone. There is always a risk here that too many children on protection plans mean that a focus on those most in danger can get diminished. At the same time artificial targets to drive down numbers to the level of theoretically similar areas carries the risk that real children in real need of safeguarding do not receive that attention.

1.4 Less ambiguous would appear to be the statistics on a reduction in the number of children missing from home. The Safeguarding Board examined this in some detail during the year and were satisfied that this was evidence that the new system that interviews children who return home, and through that identifying and responding to any problems that were at the heart of this issue, was working much better than the previous arrangements.

1.5 Another success story in 2018/19 has been the improvements that the Council has made to its Local Authority Designated Officer (LADO) service. This team coordinates the response of a range of agencies when there are allegations about how paid staff or volunteers are treating the children with whom they work. The service was not performing well in 2015, as our subsequent Serious Case Review into the abuse of children at Medway Secure Training Centre revealed. Great strides forward have been made, not only in making the availability of advice and support from the LADO service more widely known (the team received 21% more referrals this year from a wide

range of places) but also in improving the quality of judgement made by the members of the team. The team manager deserves particularly recognition for these improvements.

1.6 I do, however, remain very concerned at the continuing poor performance of professionals when their work is subject to the audits that we have carried out this year. While the numbers are small, the audit process is robust and the cases chosen for review can be presumed to be typical. With this in mind it is a fact that evidence from most cases we reviewed (12 out of 18), in three different audits, showed a clear need for a better approach to keep children safe. The proportion itself must be of concern, as must the fact that we are not seeing any improvement here. I know that the new Medway Safeguarding Partnership has responded to this by appointing an independent Scrutineer to drive forward this issue. The bodies receiving this report need to keep the future performance under close review.

1.7 This issue was also highlighted by the Joint Targeted Area Inspection, which took place in 2018/19. They concluded that:

"Although inspectors met staff who are committed to doing their best for vulnerable children, including those living with domestic abuse, and found that this strong commitment was shared at a strategic level by senior leaders from all agencies, this has not translated into similarly strong services being provided for all children".

John Drew C.B.E.
Independent Chair
Medway Safeguarding Children Board

Medway in Context

1.8 Medway is an emerging city set around the River Medway within the Thames Gateway Growth Area. There are 5 main towns in the area: Chatham, Gillingham, Rochester, Strood and Rainham, as well as significant rural areas.

1.9 In June 2019 the Officer for National Statistics released the mid-2018 population estimates – these reflect the population as at 30 June 2018. The 2018 mid-year estimate indicates that the population of Medway reached 277,855 – 239 persons (+0.1%) above the 2017 mid-year figure. Medway's growth rate in 2018 was at the lowest level seen over the past fourteen years, a similar level was seen in 2004. For the fifth consecutive year Medway has a lower rate of growth than Kent, the South East and the UK. Medway's growth peaked in 2012, after the 2011 census.

1.10 The majority of the population (89.6%) in Medway are classified as White, with the next largest ethnic group being Asian or Asian British (5.2%) including Chinese. The proportion of the population that is White is slightly larger than in England and slightly lower than in Kent, although these differences are not significant. There are also no significant differences in ethnicity by gender. Data from the January 2017 school census show that 75.4% of pupils in Medway are White British and 23.9% of pupils are of minority ethnic origins. This may suggest a large change in the overall population distribution in Medway since the 2011 Census. Some wards are considerably more diverse than others. The three wards with the most ethnically diverse school populations are Chatham Central, Rochester East, and Gillingham North. Within these wards 53.8% to 62.9% of pupils are White British and at least 36.6% of pupils are of minority ethnic origins. Rainham South, Peninsula, and Cuxton and Halling are amongst the wards with the most homogenous school populations, as 86.7% to 89.1% of pupils are White British.

1.11 Medway is ranked 118th most deprived Local Authority of 326 in England in the latest index. This is a relatively worse position than in the previous index in 2010, when Medway ranked 136th most deprived of 325.

1.12 Medway has a younger population than nationally, with proportionally more younger people and working-age residents and fewer older people. Medway has a younger median age of population at 38.1 years against 40.1 years for the UK.

1.13 Overall, comparing local indicators with England averages, the health and wellbeing of children in Medway is similar to England. 18.6% (10,220) of children live in low income families. Life expectancy for both men and women is lower than the national average.

1.14 There were 355 children subject to a child protection plan at the end of March 2019, compared with 347 in April 2018. This equates to 55.1 children subject to a child protection plan per 10,000 of the child population and is higher than the national average of 43.7 children subject to a child protection plan per 10,000 of the child population. This is higher than Medway's statistical neighbours[1] which is 51.11 children subject to a child protection plan per 10,000 of the child population.

1.15 There were 425 Looked After Children at the end of March 2019 compared with 408 in April 2018. This equates to 67 Looked After Children per 10,000 of the under 18 population, and remains below Medway's statistical neighbours at 72.80 per 10,000.

[1] Statistical neighbour models provide one method of benchmarking progress. Each local authority is grouped with a number of other local authorities that are deemed to have similar characteristics – known as statistical neighbours. Medway's statistical neighbours are: North Lincolnshire; Telford and Wrekin; Dudley; Thurrock; Havering; Northamptonshire; Rotherham; Southend-on-sea; Kent; and Swindon.

Section Two – The Board

2.1 Medway Safeguarding Children Board (MSCB) has been set up under the requirements of the Children Act 2004. MSCB is the key statutory mechanism for agreeing how the relevant organisations in Medway will co-operate to safeguard and promote the welfare of children in Medway and for assuring the effectiveness of what they do.

2.2 The main responsibilities for MSCB are defined under regulation 5 of the Local Safeguarding Children Board Regulations and include:

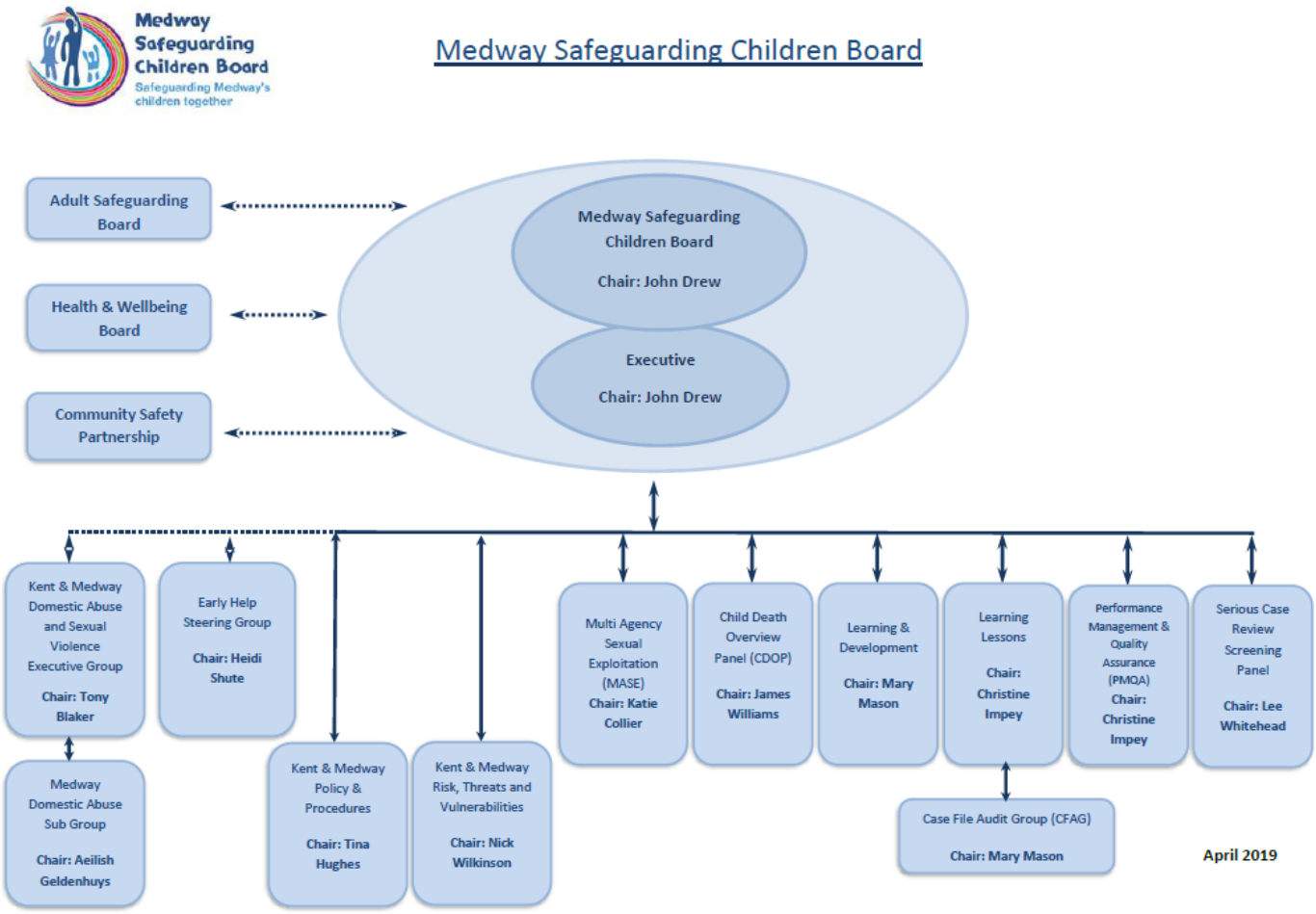
- developing policies and procedures for safeguarding and promoting the welfare of children in the area of the council, including policies and procedures ;
- communicating to persons and bodies in the area of the council the need to safeguard and promote the welfare of children ;
- monitoring and evaluating the effectiveness of what is done by the council and their Board partners individually and collectively to safeguard and promote the welfare of children and advising them on ways to improve ;
- participating in the planning of services for children in the area of council; and
- undertaking reviews of serious cases and advising the council and their board partners on lessons to be learned.

MSCB Structure

2.3 The MSCB comprises an Executive, a Board and a number of Sub Groups. The Executive is the main business forum ensuring MSCB maintains its main focus on the strategic priorities that impact on safeguarding and promoting the welfare of children in Medway. The day-to-day work of the Board is managed through the sub group structure. The Executive, Board and its Sub Groups are supported by the MSCB staff team.

2.4 To ensure accountability of each of the MSCB sub groups, each sub group chair is a member of the Executive and submits a formal report to the MSCB Executive twice a year. This is then reported to the Board.

Figure 1 – MSCB Structure Chart (April 2019)



Independent Chair

2.5 John Drew C.B.E. has been the Independent Chair for the MSCB since December 2014. John chairs both the Executive and the Board meetings.

Main Board

2.6 The Board agenda offers opportunities for information sharing and discussion, but also encourages questioning and challenge. Our Board members include representatives from:

- Health agencies including Medway Clinical Commissioning Group (CCG); Medway Community Healthcare (MCH); Medway NHS Foundation Trust; Kent and Medway NHS and Social Care Partnership; NELFT and; South London and Maudsley NHS Trust
- HMYOI Cookham Wood and Medway Secure Training Centre
- Kent Fire and Rescue Service
- Medway Children's Services

- National Probation Service & Community Rehabilitation Company (CRC)
- Police
- Schools and Colleges
- Voluntary Sector
- Youth Offending Team

Executive

2.7 The key role of the Executive is to ensure that the MSCB maintains its main focus on the strategic priorities that impact on safeguarding and promoting the welfare of children in Medway. Membership of the Executive is made up of the Independent Chair of the MSCB and Board representatives from Medway Council; Kent Police; the National Probation Service; Kent, Surrey and Sussex Community Rehabilitation Company (CRC); and Medway Clinical Commissioning Group (CCG). The Chairs of each of the sub groups are also members of the Executive.

2.8 The Executive meet six times a year at least two weeks before each Board meeting. The Executive provide leadership and direction for the MSCB, ensure that the Business Plan is delivered and approve the agenda and papers for the Board.

Performance Management and Quality Assurance (PMQA) subgroup

2.9 The key roles of the Performance Management and Quality Assurance (PMQA) Sub Group are to review and scrutinise the safeguarding children performance across all MSCB member agencies, to monitor and evaluate the quality and effectiveness of safeguarding children activities undertaken by the agencies constituent to the Board and to advise on ways to improve. Responsibilities include monitoring effective safeguarding activity, establishing and maintaining the MSCB dataset, facilitating and monitoring the section 11 audits.

Case File Audit Group (CFAG)

2.10 The key role of the Case File Audit Group (CFAG) is to undertake multi agency audits on behalf of the MSCB. CFAG does this through a programme of multi agency themed audits through which it identifies areas of good practice, areas for improvement and recommendations from the learning.

2.11 A summary of the work of the Case File Audit Group is included in Section 4.

Learning Lessons Sub Group

2.12 The key roles of the Learning Lessons Sub Group are to ensure there is a culture of continuous learning and improvement across the

organisations that work together to safeguard and promote the welfare of children; to identify opportunities to draw on what works and promote good practice; to ensure lessons are learnt and improvement sustained through regular monitoring and follow up of action plans so that the findings from these reviews make a real impact on improving outcomes for children. Responsibilities include commissioning reviews, reviewing action plans from Serious Case Reviews (SCRs), audits and other reviews to identify learning and support the dissemination of the learning.

Child Death Overview Panel (CDOP)

2.13 Through a comprehensive and multidisciplinary review of child deaths, the Medway Child Death Overview Panel (CDOP) aims to better understand how and why children in Medway die and use the findings to take action to prevent other deaths and improve the health and safety of Medway children. The CDOP will identify opportunities to draw on what works and promote good practice; to ensure lessons are learnt and improvement sustained through regular monitoring and follow up of action plans so that the findings from these reviews make a real impact on prevention of future deaths.

Learning and Development Sub Group

2.14 The Learning and Development Sub Group supports MSCB's statutory responsibility to ensure that appropriate safeguarding and child protection training is provided in Medway and that this meets local needs. This includes training provided by single agencies to their own staff and multi-agency training where staff from different agencies come together to train. The MSCB has a role in monitoring and auditing single agency training to ensure that it is appropriate and is reaching the relevant staff. A key consideration is whether such training has 'reach', to all those who need safeguarding training, and 'impact', informing and improving practice.

Kent and Medway Multi Agency Sexual Exploitation (MASE) Sub Group

2.15 The Multi Agency Sexual Exploitation (MASE) Sub Group provides the strategic oversight, collective accountability and direction for the multi-agency approach to Child Sexual Exploitation (CSE). It aims to ensure that intelligence and information relating to CSE activity is appropriately shared across all agencies, to inform mapping and enable analysis to profile CSE across Kent and Medway; for effective safeguarding and investigative opportunities to be identified along with trends and target hardening opportunities at locations. The MASE sub group has in place an action plan and seeks to reduce the risk and harm caused by sexual exploitation to children and young people across Kent and Medway, putting their needs at the centre of the service provision.

Kent and Medway Policy and Procedures Sub Group

2.16 The Group has the responsibility for co-ordinating the development of local multi-agency policies, procedures and guidance for safeguarding and promoting the welfare of children on behalf of both the MSCB and Kent Safeguarding Children Board (KSCB). The Group keeps such policies under review, ensuring their timely revision and undertakes focused pieces of work at the request of the Boards, co-opting additional professionals as required.

Kent and Medway Risks, Threats and Vulnerabilities Sub Group

2.17 The Kent and Medway Risks, Threats and Vulnerabilities sub group is a joint subgroup with Kent Safeguarding Children Board (KSCB), Medway Safeguarding Children Board (MSCB) and Kent and Medway Safeguarding Adults Board (SAB). The group oversees multi-agency activity around Modern Slavery and Trafficking, Radicalisation and Extremism, Gangs, Digital Safeguarding, Unaccompanied Asylum Seeking Children (UASC), and Missing Children and Vulnerable Adults. The group will also consider the inclusion of other emerging vulnerabilities that may become apparent.

Board Membership and Attendance

2.18 Key to the effectiveness of MSCB is regular attendance at meetings by members. The MSCB membership in terms of agencies represented has remained stable this year although there have been some personnel changes. The MSCB monitors attendance at meetings through the Executive and any organisations with regular non-attendance are challenged by the Independent Chair to ensure improved attendance. Detailed information showing agency attendance at Board meeting is in Appendix Two.

Key Relationships

2.19 There is an expectation that LSCBs have robust arrangements with key strategic bodies and are able to influence strategic arrangements. A joint working protocol is in place that sets out a framework for effective joint-working between MSCB, the Medway Health and Wellbeing Board, Kent and Medway Safeguarding Adult Board and the Medway Community Safety Partnership. The MSCB Chair presents six monthly reports to the Health and Wellbeing Board and the Children and Young Persons Overview and Scrutiny Committee and is represented on other key strategic partnerships which have helped to ensure that the voice of children and young people and their need for safeguarding is kept on the agenda of multi agency partnerships.

Lay Members

As the MSCB lay member, I have continued to be impressed by the commitment and hard work that members of the police, NHS, voluntary sector, prison services, council officers and others dedicate to safeguarding in their chosen fields. I feel confident that the MSCB has always operated in a correct and progressive fashion, and I hope this vital communication between different public services continues with as much focus and passion under it's new guise of the Medway Safeguarding Children Partnership. Safeguarding will continue to be a increasingly important and time-consuming area for our services over the coming years, and I hope it can receive more assistance via larger budgets and higher staffing levels.

Over the last twelve months, I've asked a variety of questions to any of the strategic partners during MSCB meetings:

• I asked the Governor of HMYOI Cookham Wood about prisoners spending too much time in their cells regarding the Annual Review of Restraint, to which the Governor replied that sports provision is being aided by professional football clubs, with two coaches attending the prison regularly, and the prisoners can gain a qualification in coaching.

• I asked if Children's Services could assess the usage of Children and Family Hubs after restructure and provide an overall figure for the past year as there were concerns around parents getting to the hubs. Significant budget changes were mentioned, and it was stated that there had not been any sign of any provisions not being available and no gaps.

• Discussing a Serious Case Review Overview Report, I questioned the point that a psychiatrist was asked not to mention sexual abuse when talking to the subject. A lot of digging had been done and this issue came into recommendation 1 to be able to name sexual abuse. It was thought at the time that it was possible that they did not want to confuse evidence. There was a lack of professional curiosity. The report says the psychiatrist was told not to talk about it, and the psychiatrist had not felt this was the best way to go.

• I asked which Medway Voluntary Association members report knife crime and gangs. Hotspots in Gillingham and the Detach Programme were mentioned. The Detach Programme is a sports programme which has been developed and 80-100 people attend. In Chatham the hotspots are more around the high street. The Salvation Army is now running a youth club from Wednesday to Friday evenings. They are also working alongside the Pentagon Centre in Chatham for OSS, offering youth advice, guidance and support to get them away from the hotspots. The railway stations are also a hotspot. It was mentioned that schools would be advised about the projects once they had been established. The support is multi-agency and includes youth workers, the Department for Work and Pensions employment advice and Public Health.

• In regard to the attention brought to the Medway Secure Training Centre by the Panorama programme, I brought up the Enhanced DBS check and whether there was a way of conning the system. The reply was that it is a national vetting service, and that it is only as good as the day you do it. It was mentioned that you can sign up to update services, and that a referral can be made back to the DBS.

• I asked the South London and Maudsley NHS Trust how long the reduction from 24 beds to 18 had been in place. The reply was over a year, with permanent advertisements for needed roles. More staff would mean more beds. The current dilemma is safety and they need the correct number of nurses. Young people complained that they did not get enough individual time with staff. Unfortunately, staff have to take on additional roles.

I have been proud to play an overview role for the MSCB and hope the MSCP continues this important work.

Tony Scudder, MSCB Lay Member

2.20 The MSCB has one Lay Member who has been in the role since September 2015. The role of Lay Members and their attendance at Board meetings can be key to offering a different perspective, helping everyone to stay in touch with local realities and the issues of concern in our communities.

2.21 Their role is to contribute a community perspective to the work of the Board on safeguarding children; to think as a member of the public; and to play a part in the oversight and scrutiny of decisions and policies made by the Board. The value of the lay members' role is to represent a community interest in safeguarding children and young people and bring a different perspective from the professional interests in the MSCB.

Communications

2.22 The MSCB has continued to use its website to promote safeguarding messages and raise awareness with professionals and members of the public. During 2018-19 the MSCB published 7 MSCB bulletins to ensure professionals are kept up to date with relevant policy, news and training events alongside the MSCB fact sheets. We also added to our collection of Fact Sheets during the year with an additional four published over the year. The MSCB has produced fourteen Fact Sheets in total covering topics including Child Sexual Exploitation (CSE); coercive and controlling behaviour; harmful sexual behaviour; and professional curiosity.

2.23 In addition, the MSCB has continued to grow its use of social media through its twitter account, which provides an opportunity to raise awareness amongst children and young people and members of the community. Since we created a twitter account in October 2015 we have a total of 672 followers. In the past we have used twitter to announce the publication of SCR's, published links to the MSCB Bulletin, and other general announcements.

New Safeguarding Partnership Arrangements

2.24 The Children and Social Work Act 2017 introduced a new duty to be placed on three agencies, namely the Local Authority, the Chief Officer of Police and Clinical Commissioning Group (referred to as Safeguarding partners), to make arrangements for safeguarding and promoting the welfare of children in the area.

2.25 Working Together to Safeguard Children (2018) was published in July 2018 setting out:

- The three safeguarding partners should agree on ways to co-ordinate their safeguarding services; act as a strategic leadership group in supporting and engaging others; and implement local and

national learning including from serious child safeguarding incidents;
- To fulfil this role, the three safeguarding partners must set out how they will work together and with any relevant agencies; and
- All three safeguarding partners have equal and joint responsibility for local safeguarding arrangements.

2.26 During 2018-19 the three Safeguarding Partners developed proposals for the Medway Safeguarding Children Partnership (MSCP) to replace the MSCB. The MSCP arrangements document was published on 14 June 2019 ahead of the 29 June 2019 deadline set by the Department for Education.

2.27 The MSCP will replace the MSCB on 2 September 2019. Medway Council, Kent Police and Medway Clinical Commissioning Group (CCG) are the three safeguarding partners that make up the MSCP. The purpose of the MSCP is to support and enable local organisations and agencies to work together in a system where:

- Children are safeguarded and their welfare promoted
- Partner organisations and agencies collaborate, share and co-own the vision for how to achieve improved outcomes for vulnerable children
- Organisations and agencies challenge appropriately and hold one another to account effectively
- There is early identification and analysis of new safeguarding issues and emerging threats
- Learning is promoted and embedded in a way that local services for children and families can become more reflective and implement changes to practice
- Information is shared effectively to facilitate more accurate and timely decision making for children and families

2.28 The MSCP will continue to provide safeguarding procedures, local policies and guidance, multi-agency training and will undertake local safeguarding practice reviews into serious incidents and multi-agency case file audits. Further information about the Medway Safeguarding Children Partnership is available on the MSCP website www.medwayscp.org.uk

Section Three – Progress in Medway

3.1 The MSCB had six priorities for 2018-19 set out in the MSCB Strategic Plan. The MSCB has a Business Plan that sets out the detailed actions under each of the six priority areas. The six priorities are:

- Priority One: Develop the effectiveness of the Medway Safeguarding Children Board. The MSCB will do this by:
  - Developing links between educational establishments (to include primary, secondary, pupil referral units, independent and colleges) and the MSCB
- Priority Two: Ensure that the principles of Early Help, the Multi Agency Safeguarding Hub (MASH) and thresholds are understood and embedded across partners
- Priority Three: Support a local recruitment strategy to help ensure there is an effective workforce for safeguarding children in Medway
- Priority Four: Raise awareness of the impact of domestic abuse on children and young people to ensure they are appropriately identified and safeguarded
- Priority Five: Enhance the understanding of neglect amongst professionals and ensure children experiencing neglect receive timely and effective support
- Priority Objective Six: Address the challenges to children and young people at risk of specific vulnerabilities including exploitation (including online exploitation), sexually harmful behaviour and mental health

3.2 Key activity against the six objectives in 2018-19 includes:

- The MSCB appointed a new primary head teacher representative to the MSCB Board in November 2018
- The MSCB requests schools complete an annual educational safeguarding audit. The response rate for the education safeguarding audit for the school year September 2017 – July 2018 was 61%, an increase on the previous year which was 55% but still not at the expected 100%. A new audit tool is being developed to launch with schools in 2019
- The MSCB published a new Threshold criteria document for children in need in April 2018. This was published alongside the development of the Multi Agency Safeguarding Hub (MASH) and new referral form. To support the introduction of the new threshold document, the MSCB has been holding multi agency sessions on ‘Making referrals, understanding and applying thresholds in Medway’ which were attended by 218 professionals in 2018-19
- The Multi Agency Safeguarding Hub (MASH) was launched in April 2018 which co-locates police, professionals from other children’s services teams, health and education safeguarding as well as other partners. This represents a key development in partnership working. A review of the MASH has been undertaken identifying further areas of improvement

- A new Medway Domestic Abuse Service was commissioned, pooling resources from across the Council and the CCG to promote early intervention, promote wider support for clients across all levels of risk and to embed health outcomes
- Work has begun on the development of a Kent and Medway Domestic Abuse Strategy being led by the Domestic Abuse and Sexual Violence Executive. The Strategy will be launched in 2019-20 following a public consultation
- A Kent and Medway Gangs Strategy was published during the year, developed through the Risks, Threats and Vulnerabilities sub group. The Kent and Medway Gangs Strategy is the multi agency commitment to tackle gangs operating across Kent and Medway and to support those affected by gangs and gang-related crime
- The MSCB Challenge and Escalation Policy was relaunched during 2018-19 following findings from audits which found that in some cases there was a lack of appropriate escalation of concerns and challenge when plans for children were not progressing as they should
- Following a review of agencies policies around Disclosure and Barring Service (DBS) checks and the frequency that they are completed, the MSCB wrote to all agencies advising that it is good practice that DBS checks are renewed every three years and seeking assurances that they are following these guidelines
- The MSCB Safeguarding Children Competency Framework was reviewed and launched setting out the minimum standards of learning/ knowledge expected from professionals in Medway who come into contact with children
- The MSCB published new procedures and practice guidance for working with children and young people who are sexually active and/or displaying harmful sexual behavior designed to assist professionals to identify where children and young people's sexual activity and relationships are through mutual consent, or present as harmful or abusive; and the children and young people may need protection or additional services
- The MSCB has set up a network of Vulnerabilities champions to widen the previous network of Child Sexual Exploitation (CSE) Champions to incorporate the wider vulnerabilities including Gangs, Missing Children and Child Sexual Exploitation.
- The MSCB has published regular bulletins to ensure professionals are kept up to date with relevant policy, news and training events alongside its Fact Sheets and Serious Case Review (SCR) Briefings to share learning from reviews and to support professionals on their own practice
- Between April 2018 and March 2019, the MSCB delivered 52 training sessions, attended by 875 delegates. An additional 364 delegates completed online training

Early Help

3.3 Early help assessments (EHAs) continue to increase from approximately 700 in 2014/15 to 1990 in 2018/19. Effective early

intervention can prevent the escalation of need and potentially reduce the number of children and young people entering acute services such as those in social care, accident and emergency and the criminal justice system. It is also key to ensuring a reduction in the cost to the public purse. Prevention is the focus of the Troubled Families Programme and one of its key aims is to transform services across local areas. In the past, services have responded to the one problem that presented to them. Now services are encouraged to work with the whole family and to identify and coordinate support for the needs that are impacting on all of them. There is still room to grow and some services have yet come on board, often due to capacity issues.

3.4 Support to organisations working with families across Medway has also developed further to support their Early Help understanding and delivery. Other work includes:

- The new Early Help case recording system for all Early Help Lead workers in all organisations working with families across Medway is progressing well and enables all workers to record and report on their Early Help work and to contribute to the work of other partners
- Training on Early Help delivered at practitioner, manager and general awareness levels is continually updated as processes and policies change
- An Early Help Helpdesk will soon be at full capacity and provides daily support on the completion of EHAs/ Reviews, the Early Help process, the use of Synergy Eisi, the distribution of a quarterly Early Help newsletter and Frequently Asked Questions
- Two Employment Advisors provide specialist support on benefits and employment needs ensuring the best opportunities for getting back to work
- Four Early Help Coordinators continue to support one to one the Early Help Lead workers within organisations across Medway who are working with families
- Area meetings bringing together local services to network and understand the data for their area but also bringing in the wider specialist support that is available to them all; Early Lead worker quarterly networking events with specialist speakers
- Four Early Help Partnership Officers to undertake Early Help Assessments for partners where capacity is an issue or to support new Early Help Leads in their induction
- Team around the school partnership meetings take place to understand the blockers to support across the partnership and work together to resolve these

3.5 One of the many criticisms levelled at organisations in serious case reviews is the lack of shared information between partners. The new system helps to ensure that this happens in Medway. Currently, there is resistance from some organisations who wish to avoid the need for duplicate reporting on two systems. Mechanisms to import their data

are being explored but this takes time and more resource. Other services have restructured which has hindered progress.

Children and Family Hubs

3.6 Children and Family Hubs in Medway offer families with children a coordinated service including one to one intensive intervention and targeted group work. The Hubs embed a multi-agency approach, which enable families to receive the right intervention at the right time; ensuring that children get the best start in life and parents get the support and advice they need. We are committed to improving outcomes for families, children, young people and the wider community, supporting all those we work with to reach their potential. Our vision is to promote the wellbeing and resilience of families with children from conception to 17, in a timely way by offering high quality and effective services.

3.7 We aim to improve the life chances of children and families who may be experiencing complexities by providing bespoke programmes and targeted interventions within a multi-agency framework. We will provide opportunities for children and families to improve the following outcomes:

- Strengthening and empowering parental capacity
- Healthy young children who are ready to thrive at school
- Improved participation in education, training and employment
- Prevention of harm and keeping children safe and improved outcomes for children on the edge of care
- Prevention of crime and serious youth violence

3.8 In addition to the above focused outcomes we will seek to:

- Reduce demand on high need/high cost services – above all by reducing the number of children whom are looked after by the Local Authority
- Target our spending upon priority outcomes, reduce our direct delivery and spend on universal services with a view to improve our targeted service offer.
- Work with colleagues and partners to deliver integrated services for shared outcomes: in particular work in collaboration with health, education, employment and adult services.

3.9 The Children and Family Hubs are now open and functioning. The initial feedback from staff, partners and most importantly from the families is very positive. The multi-agency team (integrated within the hubs) is beginning to have an impact on the way the hubs work.

3.10 The Children and family hubs have created new roles within the structure to strengthen the response and support to families at level

three. This includes four Early Help Social Workers who are locality based within the hubs and two Domestic Abuse workers

Multi Agency Safeguarding Hub (MASH)

3.11 The Multi Agency Safeguarding Hub (MASH) was launched in April 2018 alongside the First Response Service (formerly Children's Advice and Duty Service (CADS)), and an online referral portal. The development of the MASH reflects the close partnership between key agencies in Medway and co-locates police, professionals from other Children's Services Teams, Health and Education Safeguarding. There is additional involvement of virtual partners from Probation and Housing to improve information sharing at the front door.

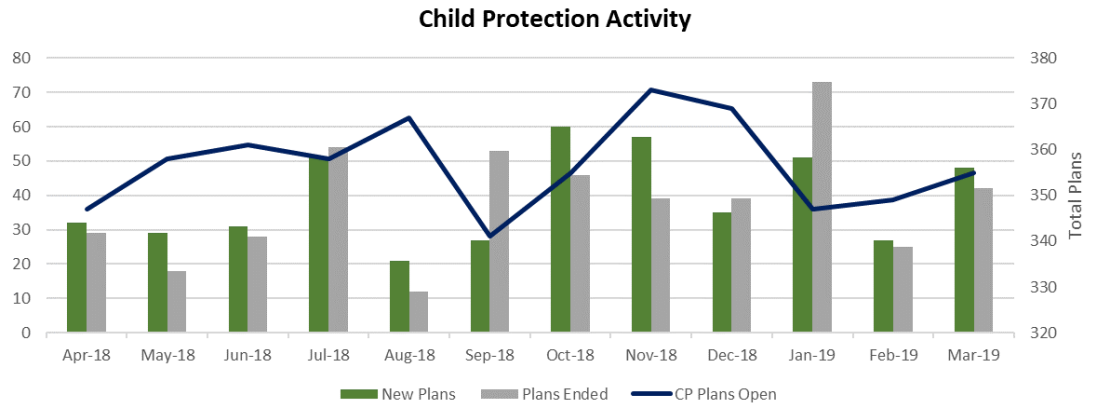
3.12 An initial review of the MASH was undertaken in November 2018 focusing on MASH activity between April 2018 and September 2018 and comparing it with 2017 activity. Findings were positive and indicated that initial safeguarding concerns were being responded to in a timely manner, however improvement was needed where the initial level of concern was child in need.

3.13 In 2018-19, Medway received 2% fewer contacts compared to 2017-18, however an increase in the percentage of contacts meeting the threshold resulted in a 52% increase in the number of referrals received by the Single Point of Access (SPA). The increase in contacts meeting the threshold could be a good indicator of partners understanding the threshold. In previous years, Medway has remained lower than both the England and statistical neighbours rate of referrals, however 2018-19 saw Medway's rate surpass the comparator averages.

3.14 Agency representation has been strengthened by full time education and part time domestic abuse representation. Challenges also remain regarding the sufficiency of the health role in MASH.

Children Subject to a Child Protection Plan

3.15 The number of children subject to Child Protection Plans has increased gradually from 347 in April 2018 to 355 in March 2019. This equates to 55.1 children subject to a child protection plan per 10,000 of the child population and is higher than the national average of 43.7 children subject to a child protection plan per 10,000 of the child population. This is higher than Medway's statistical neighbours which is 51.11 children subject to a child protection plan per 10,000 of the child population.



3.16 In July 2018, a comprehensive thematic audit on children subject to Child Protection Planning took place. In December 2018, a child protection surgery was held to reduce the number of children on Child Protection Plans.

Safeguarding Children Missing from Care and Home

3.17 Children and young people who go missing from home and care face a range of immediate and long term risks including the risk of sexual exploitation. The reasons for their absences may be varied and complex and cannot be assessed in isolation from their home circumstances and experiences. Every missing episode should, therefore, attract attention from professionals to assess the risks and respond appropriately and proportionately.

3.18 There has been a reduction in the number of missing incidents over the past 12 months. In March 2019, there were 80 incidents of children missing, this is a significant reduction from March 2018 (169 incidents).

3.19 In November 2018 a Missing and Exploitation co-ordinator was appointed based within First Response. Their role consists of mapping children who are going missing and/or being identified as at risk of exploitation, to identify themes and trends alongside Children Services, both statutory and Early Help. They offer workers/professionals advice and guidance and undertakes training with professionals who undertake return home interviews to ensure that the voice of the child and their lived experiences are being captured.

3.20 Medway Youth Service continue to undertake all first time missing return home interviews promoting the services available to children at their local Early Help Hub and Youth Centre.

3.21 Information shared within return home interview's continue to identify that children report that they have gone missing due to difficulties in family relationships, pressure of school, poor peer relationships in

school to more concerning reasons of exploitation both sexual and criminal.

3.22 The Missing and Exploitation Panel is held fortnightly, chaired by the Area Manager of First Response. This is a multi-agency panel where children who are considered to be at risk of exploitation, assessed as high risk missing or missing three times in 90 days are discussed. The panel also considers contextual safeguarding and agrees actions with partners to address wider concerns by sharing information/intelligence with the aim to disrupt places of concern and identify hotspots.

Medway Missing Children Incidents
(includes Medway LACs resident outside of Medway)

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total Incidents
2011	No data	No data	No data	No data	37	70	89	85	78	77	79	49	564
2012	72	51	69	41	77	75	62	42	55	76	81	55	756
2013	48	63	70	90	70	101	90	72	67	82	69	46	868
2014	46	44	83	67	109	99	138	127	111	106	119	83	1132
2015	97	106	109	96	120	117	116	101	102	103	89	83	1239
2016	85	134	96	92	156	143	156	110	115	148	113	92	1440
2017	104	94	139	146	152	145	100	96	96	143	140	103	1458
2018	130	114	169	115	96	102	125	81	87	86	76	72	1253
2019	65	64	80										209

Key
0-50 - Low
51-100 - Med
101-150- High

Children Missing Education

3.23 Section 436 of the Education Act 1996 requires all local authorities to make arrangements to establish (so far as it is possible to do so) the identities of children and young people residing in their area who are compulsory school age and not receiving education.

3.24 Suitable education is defined as full time education suitable to age, ability, and aptitude and to any special education needs the child may have.

3.25 Medway Council has a full time dedicated Children Missing Education Officer (CME) who oversees and collates all information and follows up information ensuring that all CME cases reported coming into

Medway or leaving Medway are followed through until a case can be fully resolved, school places offered and the case then closed.

3.26 As from September 2016 the Department for Education (DfE) requested that all schools and academies including private and independent schools notify the Local Authority where a pupil is taken on or pupil removed from the school role not including transition times. This procedure has now been fully implemented employing an additional staff member to collect and interrogate data and where there appears no outcome for the pupils this can be fully investigated to ensure pupils are on roll at a school/academy or in receipt of education at home or otherwise

3.27 Medway Council Attendance Advisory Service to Schools and Academies (AASSA) fully support this responsibility and Attendance Advisory Practitioners (AAP's) working within AASSA ensure home visits are made and work closely to sign post or work jointly with all agencies, including the police, social care and health to ensure safeguarding concerns are addressed and appropriately dealt with.

3.28 The CME officers are finding cases are becoming more complex. Families are often moved to Medway and are placed in temporary accommodation by other Local Authorities, or are placed in Medway unaware of schools admission process for getting children on role of schools. Families are often vulnerable with no friends or family support nearby and have no information on the area they are living in or even where the schools are situated. The CME officer and AAP's support and assist families with form filling or general advice regarding schools, the process and any other concerns which could be supported.

3.29 During the period September 2018 – July 2019 there were 173 incoming cases of reported Children Missing Education to the CME officer, who continues to work jointly with the Admission Team and other partners to assist with the process of getting children on a school roll and education to enable them to reach their full potential.

3.30 The CME policy has been reviewed and will be published September 2019.

Private Fostering

3.31 MSCB monitors the arrangements in place for privately fostered children in Medway. The Performance Management and Quality Assurance (PMQA) sub group receives the local authority private fostering annual report to scrutinise the arrangements the local authority has in place to discharge its duties in relation to private fostering.

3.32 Medway Council has a dedicated social worker who undertakes all Private Fostering work including assessing the suitability and safety of

these placements and supporting children and young people subject to these arrangements.

3.33 Activity and developments of the service for children and carers during 2018/19 include:

- The Private Fostering Service now sits within the Fostering Recruitment Team, with the Senior Social Worker having direct responsibility for the day to day management of the work completed. As of July 2019, the whole Recruitment Service will come under the umbrella of Generic Fostering and will be managed by the Fostering Team Manager.
- Statistics on notifications, sources of referrals, and demographics are collated and analysed biannually to identify any developing patterns or trends and to enable targeting of communications.
- New information leaflets have been designed and distributed to all of Children's Services and all partner agencies electronically. Dedicated leaflets for children, birth parents, private foster carers and professionals have been designed to provide relevant information to each party detailing their roles and responsibilities as well as the process and support provided by the service. These are now provided during every initial visit / meeting with the service users.
- New documents have been designed to support the referral process; these are a referral form (for open cases to Children's Services), delegated authority form, parental consent and a financial agreement.
- Awareness raising for Private Fostering is continually taking place with Language Schools based in and around Medway. These Language Schools have received basic information about our service and who to contact with regards to foreign students who may meet the Private Fostering criteria.
- Our referral and assessment process for all Language Students who meet the criteria for Private Fostering has also been updated. This was following a number of meetings with Kent Private Fostering Service, LADO and the Director of Medway Language School, who has responsibility for most of the foreign students placed in Medway.
- Whilst Private Fostering visits are usually undertaken 6-weekly if the arrangement is less than 12 months, and 12-weekly if over one year, our social worker is respondent to the needs of the carer and the child. This has been particularly the case with three recent children, whose needs have required a high level of support resulting in daily communication from the social worker. This, in turn, has resulted in the social worker undertaking visits to the carers, the children at school or within the community, as well as extensive liaison with other family members who may have been able to prevent the breakdown of the arrangement.
- Annual Reviews are undertaken for young people to ensure the child's plan is implemented effectively. Six arrangements have been

in place for 12 months or more and five have had their reviews within timescales of 12 months. The final review was completed just outside of the expected timescales due to work pressures.

- Carer views about the supervision and support they receive are canvassed annually as part of the review. In future, the Senior Social Worker will chair these meetings to provide additional management oversight and scrutiny.

3.34 The number of notifications of new private fostering arrangements was 18 which is a significant drop compared to recent years. This drop would tend to suggest that we are not identifying all the private fostering arrangements in the area and we thus need to be more vigilant and more pro-active in identifying these placements to ensure cases are not remaining unknown, unassessed and unmonitored. Awareness raising will be a key activity for 2019-20.

3.35 A large number of Private Fostering arrangements in Medway are made for educational reasons. The next highest figure is family breakdown and some of these children have also been subject to Child in Need and Child Protection processes in the past.

Allegations against staff

3.36 The LADO delivers a statutory role on behalf of the Local Authority to oversee and/or manage all cases where allegations have been made against an adult who is employed or works in a voluntary role with children. Their role includes providing advice and guidance to employers and voluntary organisations, liaising with the Police and other agencies and monitoring the progress of cases to ensure that they are dealt with quickly, consistently and fairly.

3.37 The threshold for a LADO investigation is that an adult who works with Children has:

- Behaved in a way that has harmed a child or may have harmed a child.
- Possibly committed a criminal offence against or related to a child.
- Behaved towards a child or children in a way that indicates that they pose a risk of harm if they worked regularly or closely with children.

3.38 The LADO facilitates a Multi-Agency meeting to gather information from all the agencies involved which requires liaison with employers, Children's Social Care, Police and also relevant regulatory bodies such as the HCPC and Ofsted. LADO must also advise on appropriate support for the professional who is under investigation.

3.39 In Medway the allegations received by the LADO are divided into 3 categories, 'Enquiry', 'Consultation and Advice' and 'Referral' as not all of the concerns received by the LADO require the same level of investigation or advice.

a) **Enquiry** - The concern raised does not meet the threshold for the LADO's ongoing oversight. Advice and sign posting is given. This contact is recorded as an enquiry only.
b) **Consultation** - The concerns raised do not meet the threshold for a full LADO Investigation. For example the allegation or concern may be a practice issue that can be dealt with by the employer. The LADO may provide advice and recommend an internal investigation. The LADO would ask for the outcome and a report of any internal investigation to be provided. If further concerns are raised during the internal process that changes the direction of the investigation it may be that the Consultation is escalated to a Referral and full LADO Investigation or just that further advice is required.
c) **Referral –** The concerns raised clearly meet the threshold for a full investigation by the LADO this will result in a Joint Evaluation Meeting (JEM).

3.40 The LADO maintains and reports accurate and up to date information and data regarding LADO activity, including consultations and duty enquires and ensures that Joint Evaluation Meeting notes and Frameworki electronic records clearly evidence decision-making and outcomes.

3.41 Between 01 April 2018 and 31 March 2019, the LADO Service managed 596 contacts; this is an increase of 21% from the previous year (total of 494 contacts), and the highest number of contacts the service has managed over the past three years. Of the 596 contacts, 96 were managed as referrals, and the remainder (500) were managed as Consultations or Duty Enquiries. This would suggest that a consistent application of threshold (as noted above) has been applied, therefore resulting in only 16% of contacts progressing to referrals. Positively, even with an increased workload and fewer staff, a consistent service has been offered.

3.42 During 2018/19, contacts concerned staff from the following agencies**:**

Agency	**2018/2019**	**2017/2018**	**2015/2016**
Medway Children's Services	5	2	13
Medway Adult Services	0	1	0
Other Local Authority	3	3	13
Police	2	2	0
Probation	0	0	0
NHS Foundation Trust	7	14	10
Medway Community Health Care	1	1	
CCG	2	0	
Medway Council	7	13	0
Faith Groups	7	4	0

Foster Carers - Independent	27	26	27
Foster Carers – Local Authority	18	6	
Early Years (Childminders, nursery, Children's Centre, Pre-School)	37	25	38
School - Primary	69	66	60
School - Secondary	47	28	53
School - Private	10	16	0
School - Special	20	15	0
School - PRU	1	3	0
School – Alternative (e.g. NOVUS)	8	5	0
College	2	1	0
Secure Estates (Medway Secure Training Centre)	88	70	61
Secure Estates (Youth Offending Institution)	92	88	106
Transport Provider	12	8	0
Residential – Private	38	23	0
Residential – Local Authority	6	3	0
Voluntary/Charity	13	13	0
Recruitment Agency	12	11	0
Sports & Leisure	7	11	0
Unknown	31	29	0
Other	24	8	49

3.43 The past year for Medway LADO service has been one of positivity, progression and perseverance. The LADO Service has continued to embed the working practices and processes introduced in 2017 and this has been positively received and recognised when subject to external review. The Ofsted focused visit (in March 2019) gave the LADO service the opportunity to demonstrate the development within the service and also allowed for reflection around the future progression.

3.44 The LADO Service continue to offer and deliver bespoke (single and multi-agency) training to various partners. Aside of the training, the LADO service also work with partners and identify opportunities to share briefings and invite agencies to engage in the training. This supports with developing and strengthening working relationships across Medway, knowing that the contact with the LADO service can cause some agencies concern and anxiety by the nature of the information they need to discuss and share.

3.45 The LADO Service will progress with a strategy to reach wider partners in Medway to ensure that agencies continue to consider and safeguard children in the community. The service has been working very hard over the past year to raise the profile of the LADO, it is an area of safeguarding that some find difficult or at times forget during the

safeguarding process. The LADO Service have an ongoing training calendar (for 2019/2020), in addition to providing bespoke briefing sessions to internal and external agencies, including conferences, learning events and local network meetings.

Ensuring children in secure units are safe

3.46 MSCB is unique in having both a Young Offenders Institution and a Secure Training Centre within its area with HMYOI Cookham Wood and Medway Secure Training Centre. This means that approximately a quarter of all the children in custody in England and Wales live in Medway. The Governor and Director of both establishments are statutory members of the Board and are well engaged in its work.

3.47 Following the work of the MSCB Secure Estate Task and Finish Group, the MSCB set up a Secure Estate Quality Assurance Group. The purpose of the sub group is to bring together professionals working specifically in this field to consider the specific safeguarding needs of this group of young people. The group also oversees the production of the Annual Review of Safeguarding and Restraint in the Secure Estate.

Challenges by MSCB

3.48 The Executive continues to maintain a Challenge Log which is reviewed at Executive meetings. The Challenge Log demonstrates how MSCB is challenging partners on their responsibilities and provides details about the action taken to address the concerns raised by MSCB. Examples of challenges made during the year include:

- All agencies were challenged to ensure full engagement with the development of the Multi Agency Safeguarding Hub (MASH). The MASH went live in April 2018, a Strategic MASH Board has been set up and MASH update reports were monitored by the MSCB Board
- The MSCB challenged the Youth Justice Board around concerns about late arrivals at HMYOI Cookham Wood and late arrivals often not having documents with them, the Board considered this poses potential safeguarding concerns. This issue was escalated to the Youth Justice Board and will be monitored by the Secure Estate Quality Assurance Group
- A challenge was raised by Medway Community Healthcare to Medway Council Legal Services about the late commissioning of chronologies. As a result the Head of Legal Service identified a combination of issues that had led to short turn around times for health care colleagues in preparing court statements. A number of actions were put in place to rectify this
- A challenge was raised with Medway Clinical Commissioning Group in relation to concerns that there was not a Designated Doctor for Safeguarding Children in place. The MSCB were assured that following the resignation of the previous Designated Doctor, the

CCG were seeking to recruit to the role and in the interim arranged cover from a Designated Doctor in Kent.

Section Four – Learning and Improvement

4.1 The MSCB has in place a Quality Assurance Framework and Learning and Improvement Framework. In addition to the programme of agency annual reports presented to the Board, Section 11 Audits, Case Reviews and the MSCB dataset, the framework sets out the programme of multi-agency themed audits for the year.

Section 11 Audits

4.2 Section 11 of the Children Act 2004 places a statutory responsibility on key agencies and organisations to make arrangements to ensure that in discharging their functions they have regard to the need to safeguard and promote the welfare of children. The Section 11 audit is a self audit and repeated by the MSCB in full every two years. The current section 11 audit process was agreed by the PMQA sub group in September 2017 and launched in February 2018 using a new excel spreadsheet format.

4.3 Part of the audit process, and to provide challenge and scrutiny, was to hold multi agency review panels. There were 4 panels which took place over June and July 2018. Members of PMQA and some section 11 champions also attended panels in addition to the panel reviewing their own returns, this provided further challenge and peer review.

4.4 A list of general questions was developed from reviewing the section 11 returns. These questions focused on both areas of challenge that were in common across agencies returns as well as areas where full compliance was recorded. The MSCB also identified individual questions for each agency where applicable in reference to areas where full compliance had not been reported or no actions recorded. In addition to the specific challenges made to individual agencies, the section 11 audit highlighted the following issues:

- There is no requirement in health to renew DBS checks every three years. The onus is on the staff to update the service if there are any changes. This issue needs to be reviewed by the MSCB
- There is a challenge of making sure those that attend MSCB sub group meetings are the appropriate representation in terms of what they can bring and what they are able to contribute. Some partners were not fully aware of all the MSCB sub groups
- Whilst agencies prioritise engagement of their front line practitioners in multi agency meetings, some agencies reported that it is difficult to monitor in terms of invitations being received and professionals attending
- Generally the new threshold document has reportedly been disseminated to staff through internal communications and is being built into training. Professionals are using it to help draft referrals
- There is a lack of supervision training available and training needs to include reflective practice, child focus and group supervision

although Health reported having clinical supervision training. Partners identified that training is needed on using the MSCB safeguarding reflective practice framework

- It was identified there is a lack of training in topics associated with children's mental health – this has been passed to the Learning and Development sub group
- Partners identified that the use of the Graded Care Profile (GCP2) is hard to monitor. Especially when the use of the tool may be for a case that doesn't need to be discussed with the service's safeguarding teams who would usually be the ones to monitor use
- Partners identified the need for training in gangs and missing children. It is important professionals understand the issues facing Medway youths and understanding the difference between gangs and youth violence
- The MSCB notification process is generally unused. To strengthen this the partners suggested separating the notification pathway from the referral of cases for review pathway. This has already been reviewed and updated by the Learning Lesson sub group

Multi agency dataset

4.5 The MSCB agreed a new multi agency dataset for 2018-19 following workshops held to agree what should be included in it. Partner agencies submit on a quarterly basis their agency data to the Performance Management and Quality Assurance (PMQA) sub group.

Serious Case Reviews/ Learning Lessons Reviews

4.6 Local Safeguarding Children Boards undertake Serious Case Reviews (SCRs) when children die or are seriously injured, and abuse and/or neglect are suspected or known to be a factor, and/or there are concerns about how local agencies worked together. The purpose of such reviews is to learn lessons and improve practice. Such reviews result in action plans that should drive this improvement.

4.7 At the end of March 2019, the MSCB had two SCRs that were in progress. The first SCR was referred in following a Serious Incident (SI) investigation carried out by Medway NHS Foundation Trust. The SI was carried out following a retrospective review of records which identified a failure to escalate safeguarding concerns in relation to sexual abuse. The Overview report will be published in 2019-20.

4.8 The second SCR is in relation to the death of a three year old following a referral from The Metropolitan Police for a Serious Case Review (SCR) which was made to another Safeguarding Board. The Overview Report will be published in 2019-20.

4.9 The MSCB has now published a SCR in relation to the abuse of children at Medway Secure Training Centre (STC) which first aired in a BBC Panorama documentary. The Independent review titled, 'Learning

for organisations arising from incidents at Medway STC' was published on 21 January 2019.

4.10 The purpose of the review was to identify learning and improvements to be made to safeguarding, both nationally and locally, as well as promote the welfare of children and to prevent or reduce the risk of recurrence of similar incidents. Alex Walters, a highly experienced and well regarded specialist in children's social work was appointed as the independent reviewer and Reg Hooke, a former head of the Metropolitan Police Child Abuse Command, chaired the review panel.

4.11 The review involved 14 agencies or organisations who all had involvement with Medway STC, either as commissioners of services within the STC or as local statutory agencies who had safeguarding responsibilities for the children. Extensive work was carried out including comprehensive Individual Management Reviews by all 14 organisations, information reports from six further organisations, individual meetings, interviews with children who had been at the centre at the time and staff at the secure estate. Other organisations who offer support through their helplines to children in custody, such as Childline and the Howard League for Penal Reform, were also contacted and meetings were also held with the Office of the Children's Commissioner, the producer of the Panorama programme and Her Majesty's Inspectorate of Prisons.

4.12 Medway STC was being run by G4S at the time of the undercover filming and transferred to Her Majesty's Prison and Probation Service in April 2016.

4.13 The review sets out a large number of recommendations and identified three primary areas of focus for learning:

1. How to create safe working cultures within organisations. This covers areas such as safe recruitment, policies, training and supervision of staff; the creation of transparent and effective arrangements for staff and children to raise their concerns with clear management oversight and whistleblowing procedures.
2. How to ensure that statutory agencies and their arrangements for responding to allegations/concerns about adults who are in positions of trust or peer abuse are effective in protecting children from abuse and that local monitoring is effective.
3. How to ensure appropriate and child focussed commissioning practice by national organisations responsible for the contracts for service provision including from the voluntary sector within the secure estate which are informed by local safeguarding arrangements.

4.14 Agencies involved in the review have prepared action plans to address the recommendations which are being monitored by the MSCB.

Multi Agency Audits

4.15 The Case File Audit Group (CFAG) is one of a number of sub groups of the MSCB and is the key mechanism for undertaking audits to identify good practice and multi agency learning.

4.16 Over 3 meetings the MSCB Case File Audit Group (CFAG) map 6 families within a theme. In the past themes have included children known to mental health services; and children on child protection plans with a component of domestic abuse. An overview report is completed to provide a key summary of the lessons from the audits and recommendations from the group. These recommendations are built into the MSCB Action and Improvement plan which is managed and implemented by the MSCB Learning Lessons sub group.

Themed audit: Neglect

4.17 In 3 of the 6 cases looked at in the themed audit of neglect, the panel concluded that the children had been adequately safeguarded. In the other 3 of the 6 cases, the panel found that the children had not been adequately safeguarded. The following key themes were identified:

- Professionals were going above and beyond expectations, including offering additional appointments, seeking support from charities, feeding/ clothing children
- The Graded Care Profile is not yet being consistently used in neglect cases
- There was a lack of response to professionals escalations of concerns and appropriate use of the challenge and escalation policy
- There was too much of a reliance on parents reporting their engagement with services or programmes with professionals not checking with the agencies
- There was a lack of understanding and professional curiosity around the understanding of adverse childhood experiences
- There was a lack of information sharing and evidence of services being missed from multi agency processes.

Themed audit: Child Sexual Abuse

4.18 In 5 of the 6 cases, the panel found that the children had not been adequately safeguarded. The following key themes were identified:

- Professionals need to have an increased knowledge of the support that is available for sexual abuse victims, pathways to services, thresholds and waiting lists
- The skill and knowledge base for professionals working with children who have been sexually abused or perpetrated sexual abuse needs to be strengthened
- The impact of sexual abuse across sibling groups needs to be considered more holistically, including those not sexually abused

- When cases with complex histories are handed over to other workers it appears some consideration of historical events and their continued impact is lost

Themed audit: Child Sexual Exploitation

4.19 For this themed audit partner agencies were asked to complete a new multi agency audit tool. 2 of the 6 cases were graded as good and 4 of the 6 cases were graded as requiring improvement. The following key themes were identified:

- The children identified as at risk, or being exploited, were beyond parental control. Evidence from the audit suggests that parents were unable to parent teenagers, or their style of parenting is inappropriate to the presenting risks, there were a lack of boundaries, and the inability to implement them
- Where cases involved teenagers there was a positive focus on trying to work with them but the role of fathers was missing from assessments
- Professionals need an understanding of risk associated with sexual health and sexual behaviours in children
- Parents displayed a lack of understanding of risk. Keeping children safe online education needs to be discussed with parents
- Siblings of those at risk of Child Sexual Exploitation need to be assessed for their own risk and the impact their siblings risk has on them
- There was a lack of escalation of concerns by professionals who could have taken the opportunity to call a professionals meeting when they have concerns about a family
- Earlier information sharing is needed to evidence the impact of emotional abuse and neglect on children

MSCB Training

4.20 One of the most immediate ways in which the MSCB influences the effectiveness of safeguarding in Medway is through running a range of multi agency safeguarding training sessions for professionals including courses on basic and intermediate child protection, child sexual exploitation, domestic abuse and Prevent. These have included half and full day training courses as well as shorter specialist workshops, usually 2 hours and online training.

4.21 Between April 2018 and March 2019, the MSCB provided multi-agency training across Medway. In total 52 sessions were held attended by 875 people in comparison to April 2017 and March 2018 when a total of 33 sessions were held and attended by 725.

Training Session	**Attendance 2018-2019**
Basic Child Protection	46

Child Protection Refresher	17
Child Sexual Exploitation (CSE)	154
Domestic Abuse, Stalking and Harassment (DASH)	26
Domestic Abuse	40
Domestic Abuse – Court Orders	
Gangs Awareness Raising Session	
Graded Care Profile	17
Taster: Impact of Parental Domestic Abuse	
Intermediate Child Protection	136
Local Authority Designated Officer (LADO) Awareness	108
Safer Babies	
Safer Recruitment	30
Think U Know - CEOP	
Learning lessons from multi agency reviews and Serious Case Reviews	34
Making referrals, understanding and applying thresholds in Medway	218
Drugs and Substance Briefing Session	31
Taster: Working with Young People: Listening and Communication	18
Total	**875**

4.22 The MSCB also supported the following conference sessions throughout the year.

Conference Training Session	**Attendance 2018-2019**
Medway Domestic Abuse Forum (MDAF)	193
AlterEgo - Chelsea's Story	472
Total	**665**

4.23 In July 2018, the MSCB commissioned a new e-learning provider comprising 30 courses with unlimited licences. The E-Learning has been reviewed to ensure MSCB can gain the necessary information regarding the use of the online training courses. Between April 2018 – March 2019, 364 delegates have completed MSCB E learning packages.

4.24 Evaluations continue to be completed at the end of each training session and post course evaluation are sent to delegates, if a response is not received managers are also emailed. The MSCB training officer now also attends Learning Lessons sub group meetings to ensure the learning from audits is immediately embedded in training.

4.25 In addition, during the year the following activity has been undertaken:

- Basic Child Protection training has been updated and signed off by the Learning and Development sub group.

- Intermediate Child Protection and Child Protection Refresher training has been updated and is currently going through quality assurance.
- Gangs and Youth Violence Training for professionals is currently being developed.
- MSCB training has been updated to include professional curiosity and escalation process and Sexually at Risk tool assessment, as identified by learning lessons sub group.
- Training evaluation feedback has increased from an average of 3.7 to 3.9, 4 being excellent delivery.
- 256 three month post evaluation were sent out to delegates of which 78 were returned. This is a 30% response rate.

Child Deaths

4.26 The objective of the child death review process, is to learn lessons and apply the learning to help prevent future deaths. Medway's Child Death Overview Panel (CDOP) was established in April 2008. In line with statutory guidance, it reviews every child death in Medway. The purpose is to identify trends and any matters of concern, where remedial action could be taken in similar situations to positively influence outcomes for children and young people.

4.27 The Director of Public Health chairs the CDOP. The chair reports directly to the MSCB main board meetings. The CDOP in Medway has been well supported by its constituent partners, with ongoing positive engagement with the Coronial service for Mid Kent and Medway.

4.28 There were 22 child deaths reported to the MSCB in 2018/19. Of these, 7 were deaths of children resident in other Local Safeguarding Children Board (LSCB) areas. There were 10 children normally resident in Medway who died in Medway, and 5 who died out of area. The Medway CDOP is responsible for reviewing all deaths of Medway resident children wherever they died and therefore there were 15 reported deaths in 2018/19 to review. Of these deaths, 9 were expected and 6 were unexpected (see Table 1).

Table 1: Overview of child deaths reported to MSCB in 2018-19

	Number of deaths
Total deaths reported to Medway MSCB in 2018-19	**22**
Non Medway resident children who died in Medway	7
Medway resident children who died in Medway	10
Medway resident children who died out of area	5
Medway resident deaths requiring review	**15**
Children resident in Medway – Expected death	9
Children resident in Medway – Unexpected death	6

4.29 During 2018/19 Medway CDOP reviewed 25 cases – 13 expected and 12 unexpected deaths.

4.30 At the end of March 2019 there were 10 outstanding cases due for review. Cases may not be reviewed in the year of death where not all the relevant information is available to CDOP. 5 of the outstanding cases were deaths within the last month of the year. The CDOP aims to review cases as soon as possible, however other processes for example post mortems, inquests and serious case reviews, delay cases being heard at CDOP. CDOP actively pursues outstanding information in order to review cases in a timely manner.

4.31 The majority of the deaths reviewed during 2008/09 – 2018/19 were caused by a perinatal/neonatal event (41.5% of cases). In 7 of the 7 perinatal/neonatal event cases reviewed in 2018/19, prematurity[2] or preterm labour was cited as the/one of the causes of death. The second most common cause was chromosomal, genetic and congenital anomalies (17% of cases).

4.32 There is confidence that notifications of all child deaths in Medway are captured. This is supported by a monthly return from the Medway Register Office, which details all Medway child deaths.

4.33 Working Together to Safeguard Children 2018 introduces new statutory requirements. The responsibility for ensuring child death reviews are carried out is held by 'child death review partners,' who, in relation to a local authority area in England, are defined as the local authority for that area and any clinical commissioning groups operating in the local authority area.

4.34 The new CDOP and Child Death Review arrangements will be published in June 2019 and be rolled out in September 2019.

[2] Prematurity occurs when a baby is born before 37 weeks. Normal gestation is 40 weeks.

Inspections

Joint Targeted Area Inspection

4.35 In June 2018 a Joint Targeted Area Inspection (JTAI) on Children Living with Domestic Abuse was undertaken. This was an evaluation of the multi-agency response to Domestic Abuse by four inspectorates: The Office for Standards in Education, Children's Services and Skills (Ofsted); Care Quality Commission (CQC); Her Majesty's Inspectorate of Constabulary and Fire and Rescue Service (HMICFRS), and; Her Majesty's Inspectorate of Probation (HMIP). The Inspectors found that, "Multi-agency working in Medway is not consistently effective in ensuring that the right children receive the right services quickly enough; some children are left in situations of unassessed risk. This is true both for individual children and at a strategic level in how partner agencies work together to plan and commission services. Although inspectors met staff who are committed to doing their best for vulnerable children, including those living with domestic abuse, and found that this strong commitment was shared at a strategic level by senior leaders from all agencies, this has not translated into similarly strong services being provided for all children".

4.36 The JTAI acknowledged that, "There is a shared commitment across the partnership to tackle domestic abuse. A 2015 needs assessment, followed up by a new 2018 domestic abuse joint strategic needs assessment, provides a clear understanding of the level and profile of need, and highlights gaps in service provision".

4.37 The partnership developed a joint action plan, overseen by the MSCB, that has the following clear themes resulting from the inspection:

- MASH
- Performance information, monitoring and evaluation
- Partnerships
- Training
- Workforce – Recruitment & Retention

Ofsted Focused Visit

4.38 In February 2019, Ofsted undertook a Focused Visit focusing on the Front Door and the management of allegations against professionals and carers. The focused visit found that the leadership team had secured marked improvements in the response to contacts and referrals since the JTAI, the MASH are increasingly effective and there had been an increase in the range of multi agency professionals linked to the MASH. The Focused visit also found the LADO (Local Authority Designated Officer) service had responded effectively to learning from the Medway STC SCR and the systems for overseeing progression and quality of work are robust.

4.39 The focused visit identified areas of improvement around the participation of health partners in strategy meetings, timeliness of contacts and referrals that are sent by police to the MASH and the quality of assessments and timeliness of initial visits.

Section Five – MSCB Budget

5.1 A summary of the accounts for MSCB for 2018-19:

MSCB Budget 2018-19

MSCB Income from Partner Agency Contributions 2018/19 (Outturn)

Partner Contributions 2018-19			
Medway Council	66.7%		(128,000)
NHS Medway CCG	3.1%		(5,969)
Medway NHS Foundation Trust	3.1%		(5,969)
Kent & Medway NHS & Social Care Partnership	3.1%		(5,969)
NELFT	3.1%		(5,969)
Medway Community Healthcare	3.1%		(5,969)
South London and Maudsley NHS Foundation Trust	3.1%		(5,969)
Kent Police and Crime Commissioner	8.0%		(15,434)
National Probation Service	1.0%		(1,848)
KSS Community Rehabilitation Company	1.4%		(2,772)
HMYOI Cookham Wood	1.9%		(3,570)
Medway Secure Training Centre	1.3%		(2,561)
Kent Fire & Rescue	0.8%		(2,500)
CAFCASS	0.3%		(550)
Other Income – Training			(7,325)
Contribution/Drawdown of Reserve			(38,266)
Total Income			**(238,640)**

MSCB Expenditure 2018/19 (Outturn)

		(£s)
Staff (including Independent Chair fee)		183,928
SCR costs (Chair and Author)		46,781
Other Staffing Costs (including Training)		598
E-learning Package		5,250
Kent & Medway Safeguarding Children Procedures (Tri.x)		2,267
Printing, Stationery, general office costs (including computer equipment)		4,953
Meeting and training event costs (including refreshments for all training events and SCR Panel meetings)		1,443
Travel costs		384
Total expenditure		**245,604**

MSCB Reserve carried forward to 2019/20 **£19,332**

Appendix One – Membership of MSCB

Membership of the Medway Safeguarding Children Board (MSCB) at 31 March 2019.

Name	Role	Agency
John Drew	Independent Chair	Independent
Paul Durham	Governor	HMYOI Cookham Wood
Mary Mumvuri	Executive Director of Nursing and Governance	Kent and Medway NHS and Social Care Partnership
Andrew Pritchard	Temporary Detective Chief Superintendent	Kent Police
Emma Vecchiolla	Head of Service	Kent, Surrey and Sussex Community Rehabilitation Company
Penny Giles	Head of Safeguarding	Medway Community Healthcare
Christine Impey	Head of Quality Safeguarding and Quality Assurance	Medway Council
Ann Domeney	Interim Deputy Director, Children and Adults	
Cllr. Andrew Mackness	Lead Member	
Ian Sutherland	Director Children and Adult Services	
Vacant	Designated Doctor	Medway NHS Foundation Trust
Karen Rule	Chief Nurse	
Tony Scudder	Lay Member	Medway Safeguarding Children Board
Jonathan French	Director	Medway Secure Training Centre
Jane Howard	Chief Executive Officer	Medway Voluntary Action
Andrew Willetts	Youth Offending Team – Head of Service	Medway Council
John Quinn	Assistant Director – Community Safety	Kent Fire and Rescue Service
Paula Currie	Student Support Manager	Mid Kent College
Tina Hughes	Senior Probation Officer	National Probation Service
Hannah Newens	Named GP for Safeguarding	NHS Medway Clinical Commissioning Group
Mary Mason	Designated Nurse for Safeguarding Children	

Tracey Creaton	Deputy Chief Nurse	
Steph Hammond	Head Teacher	Luton Infants School
Karen Bennett	Head Teacher	Will Adams Pupil Referral Unit (PRU)
James Williams	Director of Public Health	Medway Council – Public Health
Emma Addison	Named Nurse for Safeguarding Children	South London and Maudsley NHS Trust
Brid Johnson	Integrated Care Director	NELFT

Name	Role	Agency
Steve Hunt	Head of Service	CAFCASS
Domenica Basini	Assistant Director for Safeguarding and Quality	NHS England

Appendix Two – Agency Attendance at MSCB Board Meetings

Agency	18 May 2018	13 Jul 2018	28 Sep 2018	16 Nov 2018	25 Jan 2019	15 Mar 2019
Independent Chair						
Lay Member (1)						
Kent Sussex and Surrey Community Rehabilitation Company (CRC)						
National Probation Service						
South London and Maudsley NHS Foundation Trust (SLAM)						
Medway Youth Offending Team (YOT)						
Medway Council - Lead Member						
Medway Council - Children and Adults Service						
Medway Council - Children's Social Care						
Medway Council - Public Health						
Kent and Medway Partnership Trust (KMPT)						
Medway Foundation Trust						
NELFT						
Medway Primary Schools						
Medway Secondary Schools						
Medway Further Education College						
Medway Secure Training Centre (STC)						
Medway Youth Trust						
NHS Medical Clinical Commissioning Group (CCG)						
Medway Community Healthcare (MCH)						
HMYOI Cookham Wood						
Kent Police						
Kent Fire and Rescue Service						
Medway Voluntary Action (MVA)						
Named GP for Medway						

Agency	18 May 2018	13 Jul 2018	28 Sep 2018	16 Nov 2018	25 Jan 2019	15 Mar 2019
Children & Family Court Advisory and Support Service (CAFCASS)						
NHS England						

Attended Meeting
Meeting non attendance
Not a Board member at this time

Appendix Three – Glossary

CADS	Children's Advice and Duty Service
CAF	Common Assessment Framework
CAMHS	Child and Adolescent Mental Health Service
CAN	Children's Action Network
CCG	Clinical Commissioning Group
CDOP	Child Death Overview Panel
CFAG	Case File Audit Group
CIN	Child in Need
CRC	Community Rehabilitation Company
CSC	Children's Social Care
CSE	Child Sexual Exploitation
DANS	Domestic Abuse Notifications
DfE	Department for Education
DHR	Domestic Homicide Review
FGM	Female Genital Mutilation
HMYOI	Her Majesty's Young Offender Institution
KMDASG	Kent and Medway Domestic Abuse Strategy Group
KSCB	Kent Safeguarding Children Board
IRO	Independent Reviewing Officer
JTAI	Joint Targeted Area Inspection
LAC	Looked After Child
LADO	Local Authority Designated Officer
LGA	Local Government Association
LLR	Learning Lessons Review
LSCB	Local Safeguarding Children Board
MARAC	Multi Agency Risk Assessment Conference
MASH	Multi Agency Safeguarding Hub
MCH	Medway Community Healthcare
MFT	Medway Foundation Trust
MSCB	Medway Safeguarding Children Board
MSCP	Medway Safeguarding Children Partnership
MVA	Medway Voluntary Action
ONS	Office for National Statistics
PMQA	Performance Management and Quality Assurance
SAB	Safeguarding Adults Board
SCR	Serious Case Review
STC	Secure Training Centre
UASC	Unaccompanied Asylum Seeking Children
YOT	Youth Offending Team