

Report to: Blackburn with Darwen Health and Well-being Board

From: Nancy Palmer, Independent Chair of the Blackburn with

Darwen LSCB

Date: 23rd September 2013

TITLE OF REPORT:

LSCB Annual Report 2012-13 & Business Plan 2013-14

1. Purpose of the report:-

To update the Board on the effectiveness of the safeguarding children arrangements in Blackburn with Darwen. It sets out the activity of the LSCB in 2012/13 and the priorities for 2013/14.

2. Action required of the Health and Well-being Board:-

To note the report and prioritise the recommendations outlined on page 29 in the Health and Wellbeing Strategy.

3. Background

LSCB's were established in 2006 under the requirements set out in Section 13 of the Children Act 2004. Blackburn with Darwen LSCB has published an Annual Report and Business Plan document each year following the regulations coming into force. Previous documents can be accessed on the LSCB's website (www.lscb.org.uk).

4. Issues for consideration

Section 14 of the Children Act 2004 outlines the statutory functions of LSCB's and one of these functions requires the LSCB to publish its Annual Report and Business Plan.

The review of the local safeguarding arrangements and the priorities identified for 2013-14 in the document are applicable to all local authority portfolios and to the partners of the local authority that work with the borough's children and young people.

All member agencies of the LSCB are currently operating in an environment characterised by increasing demand for safeguarding and protective services but with limited and reducing resources due to budget restraints and structural changes within organisations. The priorities in the business plan provide the council and its partners with opportunities to work together effectively and efficiently to safeguard the children and young people of the borough.

The document will be a key evidence document in any Ofsted Inspection of Safeguarding and Child Protection. For individual partners, their commitment and involvement in meeting the priorities set out in the business plan will be a key area of judgement in their partnership work.

5. Recommendations

That the Health and Wellbeing Board note the report and ensure that the Health and Wellbeing strategy has regard to the recommendations on page 29 of the report.

Author: Nancy Palmer, Independent Chair of the Blackburn with Darwen LSCB

Date: 4th September 2013

Contact Officer: Linda Clegg, Director of Children's Services 201254 666435

Blackburn with Darwen

Local Safeguarding Children Board (LSCB)

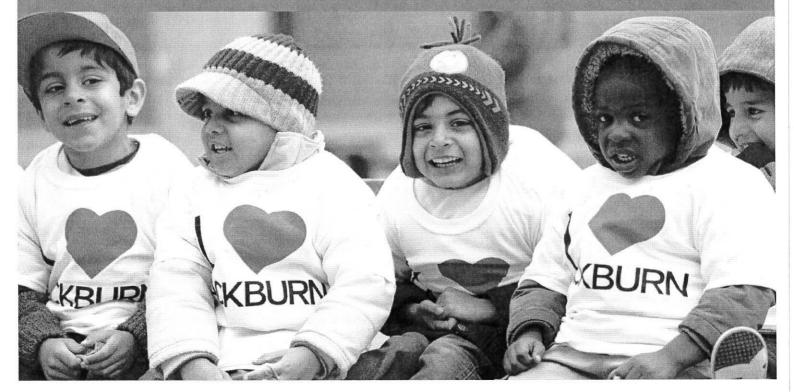
Annual Report (2012-13) Business Plan (2013-14)





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Introduction by the Independent Chair

Welcome to Blackburn with Darwen's Local Safeguarding Children Board's (LSCB) annual report for 2012-13 and business plan for 2013-14. This document sets out the activity of the Board through its various committees and provides an assessment on the effectiveness of agency's arrangements that are involved in safeguarding children locally.

The past year (2012-13) has continued to be a very challenging year for all agencies involved with safeguarding children - implementing their own sector changes through reforms to public services and realising efficiencies in the second round of national austerity measures. These changes are being made alongside the reforms the review by Professor Munro recommended in May 2011 and the subsequent revision of the Working Together to Safeguard Children guidance that came into force in April 2013.

In spite of the significant changes, there is continued commitment and dedication by staff in all agencies, at both strategic and operational levels, to maintain the safety and improve the wellbeing of the children and young people of this borough.

Whilst the task of responding to these challenges is great, I have every confidence that all agencies will respond efficiently and effectively to revise, where appropriate, our local safeguarding system.

All the policy activity has been within the context, locally in Blackburn with Darwen, of a change in leadership within the local authority senior leadership team, a change in leadership for the LSCB, a change in the lead member for Children's Services and significant re-organisation for a number of key sectors (Health, Police, Social Care) represented at the LSCB.

As the new Independent Chair of the Blackburn with Darwen LSCB I intend to build on the strong partnership and robust monitoring work that my predecessor, Laurence Loft had initiated as the first Independent Chair of the LSCB over the last seven years. I would like, on behalf of all partner agencies, to thank Laurence for his dedication and commitment to keeping children in the borough safe.

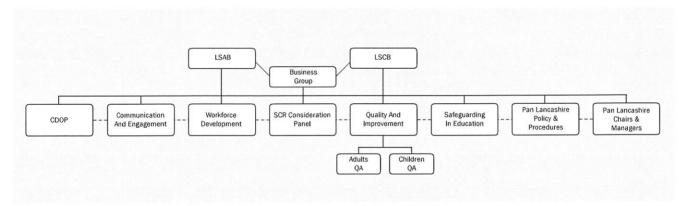
I look forward to working with the range of agencies, and where appropriate with children and their families, in the borough to ensure the safeguarding system keeps children in the borough safe.

Nancy Palmer

Independent Chair, Blackburn with Darwen LSCB

Committee Structure

Following the Peer Review in 2011, Ofsted Inspection in 2012 and implementation of the new Working Together to Safeguard Children guidance, the structure of the Board and its committees has been revised and the new arrangements implemented from January 2013. The committees are much more aligned with the Local Safeguarding Adults Board (LSAB) to promote joint working and create efficiencies. The new structure includes a business group which brings together the chairs of the committees, directors of children and adult services and the LSCB and LSAB chairs to ensure the business of the boards is planned collaboratively. The new structure is outlined below:



The objectives of each committee covering children's safeguarding are outlined below.

LSCB

- Strategic oversight of the Board's fulfilment of its statutory functions
- Strategic Partnership reporting on their fulfilment of their safeguarding responsibilities Health & Wellbeing Board, Children's Trust, Community Safety Partnership, Youth Justice Service, Engage, Multi Agency Public Protection Arrangements (MAPPA), Domestic Violence partnerships, etc.
- Examination and scrutiny of key safeguarding and child protection themes to ensure the quality of multi-agency arrangements and the effectiveness of services

Business Group

- Co-ordinate the business and set the agenda of the Board
- · Co-ordinate and monitor the business of the committees
- Provide guidance and direction to the LSAB/LSCB business of the Safeguarding Unit
- · Production of annual reports
- Strategic sign-off for serious case reviews (SCRs)

Pan-Lancashire Child Death Overview Process (CDOP)

- Undertake comprehensive and multidisciplinary reviews of child deaths so that the LSCB better
 understands: how and why children in the area die; use the findings to prevent other deaths; and
 improve the health and safety of our children
- Identify from death reviews significant risk factors and trends in individual child deaths and in the overall patterns of deaths in the area
- Ensure all unexpected deaths of children receive a co-ordinated response from all relevant agencies

Communication & Engagement Committee

- Multi-agency alignment of public safety messages, communication and engagement activities
- Raise the profile of the Board's activity on training and safety messages
- Communication to practitioners and the public of strategic and operational planning messages
- Multi-agency practitioner awareness of lessons from reviews, training opportunities and practice change
- · Multi-agency co-ordination of messages from participation and engagement of service users
- Direction on the maintenance and development of Board website and use of social media and technology for dissemination of safety messages

Workforce Development Committee

- Monitor the effectiveness of single agency and multi-agency training provision
- Plan and provide LSAB/LSCB courses through the Training Needs Analysis
- Collate and report single agency and multi-agency training activity data, effectiveness of training and impact on the quality of practice
- Use training evaluations to revise and improve multi-agency training courses and recommend improvements to single agency training
- Development and implementation of a Learning & Development Strategy
- · Development of E-Learning packages and monitor their effectiveness, impact and reach
- · Inform and implement the learning and improvement framework

Serious Case Review (SCR) Consideration Panel

- Consider if cases meet the statutory threshold for undertaking a SCR
- Commission SCRs
- Recommend cases for multi-agency reviews or individual agency reviews where they do not meet threshold for SCRs

Quality & Improvement Committee

- Monitor and analyse the LSAB/LSCB quality assurance frameworks
- Implement and monitor the LSAB/LSCB learning and improvement frameworks
- · Monitor and evaluate the effectiveness of single and multi-agency safeguarding activity
- Assess the effectiveness and impact of early help/prevention service provision
- Provide support and direction to the adult and children's quality assurance committees
- · Commission and sign-off of multi-agency reviews

Children's Quality Assurance Committee

- · Undertake and analyse Section 11 audits
- · Monitor action plans from the learning & improvement framework
- Undertake multi-agency reviews
- · Collate findings from case reviews and audits to inform the learning & improvement framework

Safeguarding in Education Committee

- Monitor the effectiveness with which schools, colleges and educational establishments fulfil their statutory safeguarding responsibilities
- Ensure effective safeguarding arrangements for children in education and learning settings outside maintained schools
- Monitor single agency arrangements and facilitate multi-agency working on digital and E-safety in learning settings
- Facilitate interagency communication and strengthen links between Primary, Secondary, Further/ Higher Education and work-based learning provision
- Lead on safer working practices and tackle issues relating to the safeguarding culture in educational establishments
- Monitor and develop safeguarding arrangements in line with statutory guidance including Ofsted inspection framework and disclosure and barring regulations

Pan-Lancashire & Cumbria Policies & Procedures Groups

- Develop and launch multi-agency policies and procedures on how different organisations will work together on safeguarding and promoting the welfare of vulnerable adults, children and young people
- Revise multi-agency policies and procedures informed by audit findings, case review findings, communication/participation findings, national guidance, research and best practice
- Develop policies and procedures across a wider footprint (sub-regional and regional) that ensures consistency for service users and service providers whilst retaining local determination of practice and management oversight

Pan-Lancashire & Cumbria Chairs & Business Managers Group

- Strategic direction on cross border/sub-regional work on safeguarding issues
- Sub-regional consultation on national safeguarding issues
- Commission sub-regional protocols, policies and procedures
- Share learning across the sub-region on Board leadership and governance issues

Relationship of LSCB with other partnership Boards - The LSCB, through the Independent Chair and officers within the Safeguarding Unit, attend and contribute to the working of a number of partnership meetings. The Safeguarding Unit in December 2012 mapped the most significant partnership meetings that are attended and can be found in Appendix 1. The key partnerships outlined in Working Together to Safeguard Children are listed below with a brief description of bi-lateral reporting arrangements.

Children, Young People and Families Trust - There are a number of connections with Blackburn with Darwen Children, Young People and Families Trust to ensure that work to monitor safeguarding and promote the welfare of children by partners is effective at both the strategic and operational levels.

At the strategic level, the Independent Chair of the LSCB and Head of Service for the Safeguarding Unit are members of the Children's Trust Board. The Safeguarding Development Manager for the Safeguarding Unit is also a member of the Children's Trust's Performance Management and Commissioning Group.

The Chair of the Children's Trust attends the LSCB and provides regular updates on progress in relation to Stay Safe priorities in the Children, Young People and Families Plan (also referred to as the Children's Plan). The LSCB is consulted and contributes to the annual needs assessment and plan of the Children's Trust. The 2010-13 Children's Plan prioritises actions from both the LSCB and Child Death Overview Process. The priorities for 2010-13 for the Children's Trust relevant for the LSCB to monitor are:

- · Reduction in the number of children and young people admitted to hospital;
- · A reduction in risk taking behaviour;
- A reduction in the numbers of homeless children and young people;
- Ensuring children and young people who are known to social services but not in care are safe;
- A reduction in the levels of infant and child mortality.

The scope and the governance of the Children's Trust is to be reviewed in 2013-14; how the LSCB contributes to the Trust's functions and role will also be refreshed to ensure the promotion and improvement of children's welfare remains key to driving improvements in their safeguarding.

Health and Wellbeing Board - The Independent Chair of the LSCB attends the Health and Wellbeing Board to present the LSCB's Annual Report. The Safeguarding Development Manager attends the Health and Wellbeing Board's group on implementing the local suicide and self-harm strategy. Officers from the Health and Wellbeing Board attend, when appropriate, the LSCB to consult on the priority setting for the Health and Wellbeing Strategy consult on the findings of the Integrated Strategic Needs Analysis. Officers from the Public Health team, which manages the business of the Health and Wellbeing Board, are members of the LSCB.

Community Safety Partnership - The Head of Service for the Safeguarding Unit attends the Community Safety Partnership Steering Group and the following links are made with groups within the partnership:

- The Head of Service for the Safeguarding Unit attends the Youth Justice Service (YJS) Management Board:
- The Head of Service for the Safeguarding Unit chairs the Channel Panel (Referral Panel to identify preventative work for children and young people at risk of violent extremism), and where relevant attends the local Contest Board:
- The Head of Service for the Safeguarding Unit is a member of the Lancashire MAPPA Strategic Management Board and the Safeguarding Development Manager attends the MAPPA Performance and Audit group;
- The Head of Service for the Safeguarding Unit attends the Strategic Domestic Abuse group and contributes to the task and finish groups on implementing the 2011-14 domestic abuse strategy. The Safeguarding Development Manager attends the operational group on Domestic Abuse, Forced Marriage and Honour Based Abuse;
- The Safeguarding Development Manager has regular liaison with the Drug and Alcohol Team (DAAT) to ensure commissioned services, polices and procedures are compliant with statutory child protection and safeguarding guidelines.

Relationship of the LSCB with Political Structures - The Executive Member for Children's Services attends the LSCB (as a 'participating observer') and the Director of Children's Services and Director of Schools and Education report through the Council's accountability structure to the Leader of the Council, Opposition Lead, Chief Executive's Strategy Group and Council Committees.







Budget & Resources

The Safeguarding Unit is funded by a range of agencies to deliver against the functions of the Boards across both the children and adult safeguarding agendas. Agreed contributions by partner agencies for 2012-13, including ad-hoc contributions were as follows:

Children's Services & Education	£77,100
Adult Services	£50,000
NHS BwD Care Trust Plus	£50,000
Primary & Secondary Schools	£32,900
Lancashire Constabulary	£13,260
Lancashire Probation Trust	£5,967
Training 2000	£3,000
CAFCASS	£550
Early Years Training Contribution	£1,500

Total £234,277

Contributions by partner agencies for the 2013-14 year will remain the same.

As well as the above financial contributions, many LSCB agencies provide their staff to deliver the multi agency training programmes and agencies commit staff time to attending as members of the committees.

Blackburn College and Newfield School continue to provide venues at no cost for the delivery of training and 40% of training sessions were delivered using venues at no cost.

Below is a breakdown of the Safeguarding Unit's spending for 2012-13:

Salaries	£212,090
Fees: Independent Facilitators,	
CDOP, TRI-X Site & Website	£27,779
Training Costs	£13,125
E-Learning Courses	£15,000
Office, Travel, Committee & Meeting costs	£8,210

Total £276,204

The additional £42,000 spent by the Unit has been met from reserves from previous year under-spends.

Attendance at Board Meetings

The attendance rates below cover the calendar year 2012.

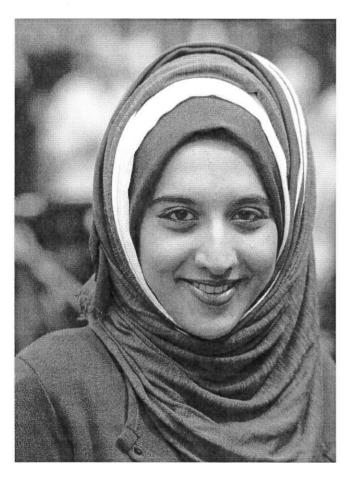
Organisation/Member	2012 Attendance Rate, Agency	2012 Nominated Member Attendance
Independent Chair	100%	100%
Lay Member, BwD Governor's Forum	100%	100%
Lay Member, BwD CVS Children & Families Forum	66%	66%
Executive Member, Children's Services	83%	83%
Director Children's Services/Director Children's Safeguarding and Protection	100%	100%
Education & Learning, Children's Services	28%	14%
Adult Services	29%	0%
Public Health	86%	71%
East Lancashire Hospitals NHS Trust	86%	86%
Lancashire Care Foundations NHS Trust (Adult Mental Health & Community Health Provider Services)	100%	43%
Great Manchester West NHS Foundation Trust (Adult Substance Misuse)	29%	29%
Via Partnership (Connexions Service)	29%	0%
Lancashire Constabulary (Force Public Protection Unit)	100%	71%
Legal Services, Blackburn with Darwen Borough Council	71%	43%
Youth Offending Team	100%	100%
Lancashire Probation Trust	100%	86%
Community, Voluntary Services (CVS)	71%	71%
Lancashire Council of Mosques (LCM)	86%	71%
Children and Family Court Advisory and Support Services (CAFCASS)	14%	0%
Primary Schools Representative	20%	20%
Secondary Schools Representative	57%	57%
Blackburn College	29%	29%
Children, Young People and Families Trust	71%	43%
Chair Serious Case Review Committee and Lead Officer CDOP and Safeguarding Unit	100%	100%
Chair Performance Management Committee/ Lancashire Constabulary, Divisional PPU	71%	71%
Chair Quality Assurance Committee/ NHS Blackburn with Darwen Care Trust Plus	100%	100%
Chair Education and Learning Committee/ Training 2000	86%	86%
Chair of Learning and Development Committee / Children's Services and Education	57%	57%
Chair Communications and Participation Partnerships Committee / Brook	100%	100%

Attendance at Board Meetings

The average attendance rates of all meetings of the committees are detailed below:

Committee	2011 Attendance Rate – average for all meetings
Learning and Development Committee	79%
Performance Monitoring Committee	47%
Quality Assurance Committee	86%
Education and Learning Committee	78%

The acceptable attendance rate at Board and Committee meetings remains at 75%.





Blackburn with Darwen: the place, the people and their needs

The Integrated Strategic Needs Assessment (ISNA) by the Public Health and Policy teams of the local authority has produced the following assessment in relation to identifying priorities to improve the outcomes for children and young people in the borough:

Context

The combined impact of poor housing, low incomes, deprivation and child poverty means poor health outcomes for our children and high levels of inequalities in health. Blackburn with Darwen had the highest rate of infant deaths (under one year of age) of any PCT or upper-tier local authority during the years 2008-10. The introduction of a new indicator in 2011 revealed that Blackburn with Darwen also had the highest mortality rate among 1-17 year-olds of any upper tier local authority in England. Investigating the causes of these deaths is difficult; however work is being undertaken to help overcome these obstacles.

With a very young population, addressing the health needs of children and young people provides crucial support for the future needs of the people of Blackburn with Darwen. Evidence shows that giving children the best start in life improves their life chances. For the children of the borough, child poverty is a fundamental determinant of inequalities in health with almost three in ten children living in poverty in Blackburn with Darwen, many of them in working families, reflecting low incomes as a key issue.

Although our children are active and less likely to be overweight than would be expected given our deprivation levels, there remain one in three that are overweight or obese by the end of primary education. As teenagers, our young people are more likely to be frequent consumers of alcohol, although the South Asian population also gives us a large group unlikely to consume alcohol at all. More than a quarter of young people smoke, and problem drug use is relatively high compared with the North West. Oral health is poor; rates of self-harm for young people are higher than the national rate; and deaths and serious injuries from traffic accidents for children are higher than nationally.

Demographics - Blackburn with Darwen has a very young population with almost three in ten residents aged 19 or younger. Each year there are 2,300 births in the borough contributing to the young age profile as there are around 1,000 more births than deaths each year. This annual increase of around 1,000 in population is counterbalanced by an estimated 1,000 more people that move out of the borough than move in, with one of the largest net losses being about 500 young people aged 15-19. This means that despite the high birth rates placing demands on health, social care and education services, the overall 0-19 population is projected to remain stable over the next 20 years.

Blackburn with Darwen: the place, the people and their needs

Child Poverty - Almost three out of ten children (29%) in Blackburn with Darwen are living in poverty, a rate which increases to four out of ten in Bastwell (37%), Sudell (39%), Wensley Fold (41%) and Audley (42%) and almost half of all children (48%) in Shadsworth with Whitebirk. As would be expected many of these children live in single or two-parent families that are dependent on benefits, but one in four live in working families.

The local authority undertook detailed research on child poverty in 2011 to fulfil the requirements for the Child Poverty Strategy. The research was undertaken to understand what poverty in general and more specifically child poverty means to local people. The outcomes highlighted challenges for children in poverty around their mental health and wellbeing, general health and the impact upon education. Issues such as peer pressure at school and lack of quality time for children with their parents were also identified as challenges for children in poverty.

Obesity - Children in Blackburn with Darwen are not as likely to be overweight or obese as would be expected given the levels of deprivation in the Borough, although the small proportion that are underweight is higher than expected. Although the percentage of year six children that are obese is five percentage points lower than would be expected, there are still more than three in ten (32%) children in the age group that are considered to be overweight or obese.

Young Lifestyles – Alcohol, illegal substances and smoking pose a significant threat to the health of young people in Blackburn with Darwen. Young people aged 15-16 are more likely to consume alcohol at least twice a week (17%) than those in the North West (14%), but are also more likely not to consume alcohol at all (28%, NW 18%), reflecting differing attitudes between ethnic groups. Substance misuse generally is similar to the North West, but worse than England, although the estimated rate of problem drug users aged 15-24 in Blackburn with Darwen is the fourth highest in the region. Smoking amongst young people is a further key issue, with more than one in four (26%) of young people aged 15-16 smoking, significantly more than in the North West (19%).

Physical activity – Almost two out of three (65%) of Blackburn with Darwen pupils do three or more hours of PE and school sports each week, higher than the national average (55%).

Infant and child mortality - This is a key issue for the borough due to the data that has come to light in recent months. In the three year period 2008-10, there were a total of 56 infant deaths in Blackburn with Darwen (i.e. deaths under one year), or 8.0 per 1,000 live births. This was the highest rate of any upper-tier local authority area and significantly higher than the England average of 4.6 per 1000. In addition to this, a new indicator measuring the mortality rate for children aged 1-17 (i.e. explicitly excluding infants) was introduced in 2011. Due to the small numbers involved, this rate was calculated over nine years (2001-09). Blackburn with Darwen had the highest rate of any upper tier local authority, and was still in that position when the indicator was updated using 2002-10 data. The combination of the two figures has led to the decision that reduction of infant and child mortality must be a key priority for the borough.

Blackburn with Darwen: the place, the people and their needs

Oral Health – Children in Blackburn with Darwen are more likely than average to have poor dental health. When last surveyed, five year olds in the borough had an average of 2.4 decayed, missing or filled teeth, compared with 1.5 for the North West and 1.1 nationally.

Wellbeing - Clear indicators for emotional wellbeing are not widely available, although the rate of hospital admissions of young people resulting from self-harm is higher in Blackburn with Darwen (253 per 100,000) than in the North West (208) or England as a whole (138).

Teenage pregnancy and sexual health – From their high point in 1998, rates of teenage pregnancy have fallen faster than regionally or nationally, placing Blackburn with Darwen within the most improved fifth of local authorities. Compared to the rest of England and the North West Strategic Health Authority (SHA) average, a relatively low proportion of young people are tested for chlamydia in Blackburn with Darwen, but the proportion testing positive is slightly higher than the national average.

Road Traffic Accidents – deaths and serious injuries in traffic accidents for children under 16 is a significant issue for Blackburn with Darwen, with the rate per 100,000 children (41.5) significantly higher than the national rate (23.6).

Key Considerations for the Health & Wellbeing Board

- The need to give our children the best start in life should drive development and delivery of care and support in the early years, with improved family support a key priority
- The need to provide and encourage active and positive choices for children and young people should drive strategic initiatives to support active lifestyles
- The need to support children and young people to contribute to thriving local communities.

From the ISNA the Health and Wellbeing Board has identified the following priority areas in their 2013-14 strategy:

- Give every child the best start in life prioritising the areas of mental health and child/infant mortality;
- · Promote good employment for all;
- Make leisure healthy;
- · Improve the quality of homes; and
- · Support independence and social inclusion in old age.

Case File and Practice Audits

The LSCB has undertaken a number of multi-agency audits during 2012-13 and a brief outline of the findings are provided below.

Child Sexual Exploitation (CSE) – Records of referrals to the Engage team in the first quarter of 2012-13 were used to complete the University of Bedfordshire CSE data monitoring tool and assess if local agencies had a sufficient understanding of the local nature, extent and response to CSE. The Engage team already produce their report card and the police produce a problem profile that are both shared with the Board. The audit highlighted that whilst most indicators in the Bedfordshire monitoring tool were collated between the Engage and police reports, some indicators around the risk/characteristics of the children, analysis of outcomes from service provision and impact of training provision were not collated. Both the police problem profile and the Engage team report card have now been amended to ensure the LSCB can be fully informed and local reporting is in line with national best practice.

Missing from Home (MFH) – The data verification exercise (recommended in the All Parliamentary Party Group (APPG) report on missing from home children) highlighted that locally between children's social care and police the numbers of children being reported missing was similar, however the numbers subject the different processes to protect them were different. To explore and understand this difference the LSCB agreed a three stage audit to look at the effectiveness of the Pan-Lancashire procedures for missing from home children. Stage 1 involved auditing case files with a range of agencies that work with children who go missing. Stage 2 was to involve working with a group of frontline practitioners to understand the results from stage 1; (as a result of the stage 1 findings, the processes within children's social care have been amended and a different team will now undertake work with children; it was decided that stage 2 will not be progressed due to this change); the final stage of the audit will seek the views and experiences of children and their families who have been involved in missing from home processes.

Safe Workforce – In 2010 all agencies of the Board self assessed themselves against the safe workforce standards set out in the Safeguarding Children and Safer Recruitment in Education guidance. In 2012 agencies were requested to update their self assessment so that the Board could monitor progress made between the two assessments. The 80 standards from the guidance were grouped into nine areas and in 2010 agencies required improvement in five of the nine areas. In the 2012 returns, agencies required further improvements in standards in only two areas; both areas involve the pre-appointment processes of employment rather than when staff are in employment.

Individual Agency Auditing of Safeguarding Practice – All agencies of the Board were requested to provide details of internal audits they had undertaken to monitor the quality of their safeguarding practice including action they will be taking to improve practice following the audit findings. Where agencies had undertaken audits, the findings highlighted that the audits concentrated on compliance with processes rather than outcomes for the children and families. Two agencies also provided evidence of how findings from the Board's case reviews had translated into audits of internal practice.

Voice of the Child & Early Help Audit – this audit is in the process of being completed and the main findings and action agreed will be reported during 2013-14 period to the Quality Assurance Committee.

The Quality Assurance Committee with direction from the new Quality Improvement Committee has set a timetable for 2013-14 and anticipates undertaking audits and data verification in the following areas:

- · Children who are offenders and victims of crime:
- Effectiveness of the Multi-Agency Safeguarding Hub (MASH) arrangements;
- Section 11 audit:
- · Review of safeguarding arrangements from learning highlighted in recent Ofsted Inspections; and
- Characteristics of practice from cases with good outcomes.

Multi-agency Case Reviews (MARs)

The LSCB undertook three MARs during the 2011-12 period and the findings have been collated and shared with agencies involved in the reviews. As one review was still subject to criminal proceedings at the time of the last annual report, wider dissemination of the findings has not been possible. The main themes from the findings of the three reviews are:

- A lack of shared multi-agency understanding of what constitutes 'good enough' parenting restricts practitioners from assessing a shared understanding of acceptable standards of physical and emotional care:
- Repeated exposure of professionals to intractable and long term family problems normalises
 practitioner's response, leading to over identification with parents and adversely impacting on
 practitioner's ability to understand deviant and risky parental problems;
- Assessment and management of risk, especially at a sub-significant harm level, is not managed at
 early help, targeted and universal service levels with the tools used, especially at the early help level,
 not assisting practitioners in this function;
- Individual incidents or crisis are viewed in isolation and inhibit the identification of patterns and inconsistencies in care provided by parents; this has a significant impact in identifying, early, issues like neglect and disguised compliance by parents and can impact in care planning that needs to be dynamic.

The revision of the Common Assessment Framework, training on risk identification, the implementation of the new assessment framework/single assessment and implementation of the recommendations from the Family Justice Review are all actions being taken to address the lessons from the three MARs. The LSCB will monitor the action plan produced from all three reviews to ensure practice changes are embedded and lead to improved outcomes for children.

Serious Case Reviews (SCRs)

There have been no referrals to consider cases for SCRs during the 2012-13 period.

The findings from all six previous SCRs and the findings from the MARs have been collated into a Learning and Improvement Framework so that it can inform auditing schedules and practitioner forum discussions.

The LSCB has been involved in co-writing the regional North West Learning and Improvement Framework that sets out the methodologies that will be used for case reviews, the framework of different types of reviews and case file audits as outlined in Working Together to Safeguard Children, and how learning will be shared regionally so that it can inform practice improvements across the region rather than just locally.



Performance Monitoring

The 2012-13 dataset identifies a number of areas where performance has improved and a number of areas where additional monitoring may be required in 2013-14 through the Quality Assurance Framework that will replace the dataset. These areas are summarised in the table below.

Areas of Improving Performance	Areas to monitor in 2013-14
Effective screening of rising number of contacts leading to lower number of referrals of cases requiring assessments	Whilst screening, especially through MASH is improving the percentage of referrals that are repeats, repeat referrals are higher in 2012-13 than 2011-12
Lower number referrals leading to reduction in the number of assessments, s.47 enquiries, initial child protection conferences, looked after children and social care caseloads; similar reduction in caseloads for police and community and secondary health services	With the introduction of the revised assessment frameworks and early help offer, the routes for non-accepted referrals and alternate offers of support for children and families will require monitoring to ensure an appropriate level of service is being offered
Increasing number of Initial and Core Assessments completed within statutory timescales	With the introduction of the Single Assessment and a single timescale, monitoring will be required of the timescales for completion of assessments as well as the internal checkpoints required by statutory guidance
Increase in the number of private fostering arrangements reported to, and hence managed by, social care	
Stability in the number of children reported missing from home	though with the introduction of the 'deferred deployment' pilot, a reduction in MFH reports would have been expected, especially a reduction in the number of MFH reports from Children's Homes
Stability in the numbers of offenders that pose a risk to children and number of young offenders	Clarification required of police data of children who are offenders and victims of crime to measure their safety
Increasing reports to the Local Authority Designated Officer (LADO) due to the improved processes and systems introduced after the 2012 Ofsted Inspection	but, further reporting required to ensure accurate recording of outcomes from investigations and action taken by employers to allow the LADO to report on how children are being safeguarded.

During 2013-14 the LSCB will begin to implement the national Children's Performance Improvement framework and the local priority areas to monitor will be included in the framework.

Training Provision

The BwD LSCB provided thirteen different courses through its annual training schedule and one Pan-Lancashire briefing on lessons from Serious Case Reviews. In addition to these face to face training courses, the LSCB also provided seven e-learning courses through the LSCB website.

Due to the changes in the law relating to when employers are required to obtain criminal record checks for their employees, the LSAB and LSCB held one briefing session during the year.

BwD LSCB Training – Thirteen courses through 46 sessions were planned and offered by the LSCB; twelve courses through 40 sessions were delivered – low bookings and availability of a trainer leading to one course and six sessions being cancelled. Of the 40 sessions of training delivered, sixteen (40%) in 2011-13 were delivered in free venues. The courses offered provided a capacity of 1,085 training slots and 949 (87%) of these slots were booked. 691 people of the 949 people booked on courses, attended the training courses. 16% of training slots booked were cancelled in advance of the course being delivered and for 11% of the slots, the person booking the course did not attend the training session.

Of people booking on courses, just over 60% were non-local authority staff from a range of agencies; of the local authority staff that had booked places, 87% were children's services & education staff.

Attendees at the training are asked to complete an evaluation form following the training session so that the LSCB can understand if the learning objectives are being met and plan any improvements/changes to the courses. Attendees found the courses helpful for the following reasons:

- · Provides information to improve knowledge on identifying risks and indicators of abuse
- Provides information on local service provision
- Provides information on local referral routes and the local Continuum of Need and Response
- · Provides information on what the multi-agency approach to working should be
- Provides information on local processes and procedures and how to meet statutory duties
- Provides information on how to share information.

Attendees are also asked how they will apply what is learnt from the training and how the training will impact on their practice; below is a summary of the main points recorded on how attendees intended to apply the learning:

- · Cascade and share learning within teams and organisations
- · Apply training in practice and amend agency procedures and service provision
- · Improve multi-agency and multi-disciplinary approach to working
- · Use knowledge of services to access these services
- · Improve information sharing and communication with other agencies
- Improve the process used to identify risk and make referrals; improve responses when risk/abuse is recognised
- · Improve relationships and trust with young people; improve focus on the child and their needs
- Access supervision and support from managers
- · Improve skills in undertaking assessments
- · Improve recording practice.

Training Provision

Pan Lancashire Serious Case Review (SCR) Briefings – Three sessions were provided at venues across Lancashire including one session at the Royal Blackburn Hospital. In total 200 people attended these sessions and two-thirds of staff attending these sessions were from children's services views (including multi-agency reviews), Child Death Overview Panel (CDOP) findings and national SCR findings. The briefing continues to be delivered by LSCB staff from all three Lancashire LSCBs.

E-Learning – During the 2012-13 period, a total of 2,069 people had accessed the seven e-learning courses provided by the LSCB; 60% of people accessing the e-learning courses accessed the Safeguarding Children course. 77% of people accessing e-learning courses completed and passed the relevant course they had accessed, compared to 72% in 2011-12 period.

Disclosure and Barring Service Event – The Disclosure and Barring Service (DBS) became operational in December 2012 replacing the services provided by the Independent Safeguarding Authority (ISA) and Criminal Records Bureau (CRB). This new organisation has responsibility to manage criminal record checks and receives referrals from organisations where there are concerns about an individual's suitability to work with vulnerable adults and children.

In January 2013, the LSAB and LSCB facilitated a 'duty to refer' event to raise awareness about the changes to the vetting and barring service; provide guidance about pre-employment checks; and update colleagues on the new definition of 'regulated activity'. In total, 300 professionals attended the event and since the event regular information updates have been made available on the LSAB and LSCB websites.



Consultations

The Children's Trust's consultation events in the 2012-13 period focused on capturing the voice, views and wishes of children who are being looked after, including the voice of foster carers. Two events were held, one on consulting to improve service provision and the second to train and seek the views of foster carers.

The main points raised from the consultation events were:

- Listen to children, being honest and open with them (including explaining things better) and act upon what children say
- · Ensure the right placement can be found
- · Help children achieve their education, health and career outcomes
- Help children develop their social skills and their interests/hobbies
- · Continuity in a social worker provides reassurance and reliability
- Foster carers have a significant role to play and it is vital to provide support to them
- For those leaving care, greater choice on when to leave care and having access to the right type of support from key workers.

Partners across the LSCB have reported on activity to capture the voice of the child in the work they undertake at both operational and strategic levels. The reported consultation activity can be summarised into four themes on outcomes achieved:

- Consulting children and parents/carers to assist in service development and policy refreshes –
 examples include children being consulted about the disability service's short breaks provision, the
 young carers service's restructure and leaving care supported lodgings provision
- Consulting children and parents/carers to assist in developing and improving child welfare/safety
 messages examples include new car safety messages, health and employment messages, induction
 pack for accessing health services for asylum seekers and child friendly leaflets for child protection
 and child in need processes
- Involvement of children in appointments examples include children interviewing applicants for the new LSCB Independent Chair role, social worker and team manager posts and children involved in providing appraisal comments for their social worker
- Children getting involved in delivering services or providing training for practitioners to highlight the
 child's 'lived experience' Lancashire Care Foundation's 'CREW' involvement in training (also in
 interviewing staff, feedback and service design), children involved in the sexual health service location
 changes and leaving care young people training foster carers.

Child Death Overview Panel

The Child Death Overview Panel (CDOP) reviewed 15 deaths for Blackburn with Darwen in 2012-13. In total, in the period 2008-13 since CDOP has been operational 99 deaths of children have been reviewed.

The CDOP, on reviewing each death, categorises the death using a standard typology and in the tables below the categorisation is presented for the past year and the five year period since CDOP has been functioning:

For the deaths reviewed in 2012-13:

Category 3 - Trauma and other external factors	below 5
Category 4 - Malignancy	below 5
Category 5 - Acute medical or surgical condition	below 5
Category 7 - Chromosomal, genetic and congenital anomalies	5
Category 8 - Perinatal/neonatal event	6
Category 9 - Infection	below 5
Total	15

For the 2008-13 period, all deaths were categorised as:

Total	99
Category 10 - Sudden unexpected, unexplained death	7
Category 9 - Infection	5
Category 8 - Perinatal/neonatal event	29
Category 7 - Chromosomal, genetic and congenital anomalies	39
Category 6 - Chronic medical condition	5
Category 5 - Acute medical or surgical condition	below 5
Category 4 - Malignancy	6
Category 3 - Trauma and other external factors	below 5
Category 2 - Suicide or deliberate self-inflicted harm	below 5
Category 1 - Deliberately inflicted injury, abuse or neglect	below 5

For the 2008-13 period, 17% of deaths reviewed were found to have modifiable factors compared to 23% in the North West and 21% nationally. The modifiable factors/risk factors in the family and the child's environment identified from the reviews included:

- parental smoking
- · domestic violence
- · parental mental health
- poor maternal health (high BMI scores)
- · poor housing conditions.

In terms of the parent and child interaction with service providers, the following modifiable factors were identified by the panel:

- poor access to service provision
- · poor engagement with services.

Examples of multi-agency work and outcomes that protected children and families in 2012-13

Example from the Young Carers Service:

A 13 year old girl was re-referred to the service due to her father's worsening health problems and mother suffering from stress. The 13 year old cares for her father alone during the night whilst mother works night shifts. The situation had left the child anxious, frightened and isolated affecting her ability to care for her father.

The school had identified the issues, referred her to the young carer's service and then played a vital part in delivering new services to ensure that her education and her social opportunities did not suffer. The young carer's service worked with adult services, the council's benefits advice team, the fire service, and provided funding so that mother could have respite opportunities. The service also provided one-to-one sessions for the 13 year old improving her confidence and skills to deal with her father's medical condition. The 13 year old also has a new dog making her feel more secure when caring for her father at nights.

Example from the Police/MASH:

During work with a child who was presenting with some of the indicators of being vulnerable to child sexual exploitation; intelligence from another child was used to query issues further which led to a disclosure of sexual abuse and grooming of five other children. All the children were provided health assessments, therapeutic care and support through the criminal justice process. The parents of the children were also provided with and accessed a support group ran by the Engage team's parent worker. The perpetrator was found guilty of the sexual offences and received a custodial sentence.

Example from the Early Years, Think Family Service:

A family consisting of a mother and three children (two teenagers) were nominated by one of the children's secondary schools for referral to the Think Family pilot due to a range of vulnerabilities (previous social care involvement, poor home conditions, poor school attendance, anti-social behaviours, mother's poor parenting skills due to depression). The children's schools, health agencies (both child health and adult health services), the local children's centre, a further education college, a training provider and social housing provider all worked together through the Common Assessment Framework (CAF) to co-ordinate services and access additional community resources. In addition to improving the health, safety, education and economic wellbeing outcomes for the whole family, the most significant change has been to improve vastly the family's social presentation from a family causing problems to one actively contributing to improving their community and assisting/advocating the services that assisted them.

Examples of multi-agency work and outcomes that protected children and families in 2011-12

Example from the Youth Offending Service:

A looked after young girl managed by the service was assessed with emotional and mental health concerns and a referral to mental health services was made to offer support to her. In recognition of the youth offending service's assessment of her learning style, the mental health service provided art therapy as a way of engaging her.

A previous care provider expressed concerns regarding the girl being at risk of sexual exploitation due to a friendship that had been struck up; the Engage team were informed and completed an assessment and the girl is engaging well with interventions from this service. Staff with the Engage Team feel her risk is now reducing.

Example from Lancashire Care Foundation Trust:

A parent of a child that a school nurse was involved with disclosed that she had a history of domestic abuse and was now moving to another locality. The nurse completed a CAADA¹ Risk Assessment with the client and whilst the risk score did not meet the MARAC² threshold, there were a significant number of risk factors identified.

The case was referred to Women's Aid in the family's new locality for a multi agency confrence and information was shared with the health visiting, school nursing and children's social care services in the new locality.

A multi-agency response was led by involvement of children's social care and Women's Aid, this included proactive cross boundary working by Blackburn with Darwen staff.

Example from the Domestic Abuse Partnership:

The Home Office 'Standing Together' programme undertook an inspection of domestic abuse services in 40 areas across the country in 2012-13. Blackburn with Darwen received the excellent rating and ranked first on the national league table with a score of 48 out of a possible 52. The assessors report concluded:

The partnership has many characteristics of effective partnerships: a history of multi-agency working; developed partnership structures; strong leadership; dedicated funding; good communication between partners; and an understanding of domestic violence in its widest social context. It has absorbed the lessons from domestic homicide reviews and several serious case reviews.

¹Co-ordinated Action Against Domestic Abuse (CAADA)

² Multi-Agency Risk Assessment Conference (MARAC)

There has been good progress made to complete and deliver against the priorities and actions set out in the last business plan. The table below RAG rates the completion of each priority; green for complete, amber where work is ongoing, and red where progress has been slow and the objectives of the task have not been fully realised.

Priority Area	Ac	Actions	Progress
Implementation of Munro recommendations	ĵ	Implementation of the Assessment Framework	All actions are ongoing with initial drafts of the frameworks and strategy now at consultation stages with partners
(Assessment Framework,	I	Development of a Quality Assurance Framework	
Quality & Learling Frameworks, Early Help Strateov, SCR changes and	ı	Development of a Learning & Improvement Framework	
workforce development)	Î	Development of a Early Help Strategy and support the 'Think Family' service developments	
	l	Review the frameworks through work with Pan- Lancashire and North West groups	
Implementation of findings of the LSCB Review recommended by the Peer Challenge Team	ı	Review the structures and governance arrangements of the Board	New Board structures and revised committee membership in place from January 2013; new Independent Chair of the LSCB commenced the post from April 2013
Continued strong focus on the impact of cuts on safeguarding and child	1	Finalise the report and action plan from the Impacts of Cuts analysis	Report complete and presented to the Board in 2012; lessons have been used in the 2013-14 budget setting process and is impacting on the development of the ioint commissioning
protection	1	Continue participation in local planning and commissioning of services to ensure safeguarding and the welfare of the child remain priority areas	principles for the Integrated Commissioning Unit

Priority Area	Act	Actions	Progress
Continue to develop the learning and development arrangements and ensure	1	Undertake a training needs analysis for multi-agency LSCB training	All actions completed; seven courses offered through e-learning, three SCR briefings, one DBS briefing and 13 courses through face to face training were accessed by just rover 3,000
sufficient capacity within the multi agency training pool	ľ	Review the training pool and training arrangements following the training needs analysis	practitioners
	I	Continue to provide specialist e-learning programmes	
	1	Develop and implement a local workforce development strategy	
Continue the development of evaluating the quality of single agency safeguarding training	I.	To review the method of how single agency training on safeguarding and promoting the welfare of children is evaluated focusing on type of provision, reach of training, quality and impact of training on practice	Tools to assist agencies in self-assessing their training courses have been developed and are available on the LSCB website; development of regional evaluation frameworks to be undertaken with the revised Working Together to Safeguard
	Ĺ	Review the evaluation frameworks through work with Pan-Lancashire and North West groups	
Strong focus on looked after children (LAC) and Child Protection (CP) numbers	ı	Monitoring of performance data and analysis of trends	Complete through the LSCB dataset
Ensure Mosque and Madresah safeguarding policy is communicated, implemented and monitored	1	Work with Lancashire Council of Mosques and the Pan-Lancashire LSCBs to communicate, implement and monitor the policy	Complete with a joint letter from the Pan-Lancashire LSCB chairs to all mosques in Lancashire to introduce and recommend implementation of the policy; and a second letter from BwD LSCB Chair to BwD mosques to recommend LSCB courses for mosque staff

Priority Area	Actions	Progress
Ensure learning from Serious Case Reviews (SCRs) and Multi-Agency Reviews (MARs) are communicated, embedded in practice and evaluate the impact changes are having on practice	 Learning from local reviews and national reviews collated regularly and communicated to all agencies Evaluation of impact changes are making to practice through audits and section 11 audits 	SCR briefings continue throughout the year across Lancashire and the content is regularly updated to reflect national lessons, lessons from local multi-agency reviews and CDOP findings. Audit questions now regularly include auditors assessing 'impact' and 'improvement of outcomes' in addition to measuring compliance with procedures
Ensure the SCR and MAR processes remain robust and fit for purpose	 Review the process to implement the Learning & Improvement Framework Review the processes through work with Pan-Lancashire and North West groups 	All actions are ongoing with initial drafts of the framework now at the consultation stage with partners across the region including the Independent Chairs network, Social Care Leads network and LSCB Business Managers
Work closely with the Community Safety Partnership (CSP) to ensure that MAPPA, MARAC and new domestic abuse arrangements are effective	 Regular reporting at Board level from the CSP to monitor and seek assurances of partnership arrangements 	Regular reporting established through the dataset and at the Board
Continued strong focus on children who are sexually exploited (CSE) and those who go missing from home (MFH)	 Audit and performance monitoring of CSE & MFH arrangements Co-ordinate work through Pan-Lancashire and North West groups and share/learn best practice through regional and national groups 	Audits complete and findings used to redraft the Pan-Lancashire strategies and procedures

Priority Area	Actions	Progress
Strengthen participation from children and look at developing stronger mechanisms around channels for their voices to be heard and acted upon	 all agencies the views and opinions of children they provide services to inform safeguarding practice and aid service development 	information on where improvements in arrangements are required; Children's Social Care have now a robust process of capturing quarterly the voice of the child and developing and monitoring voice/participation activity through the Participation Steering Group
Strengthen public safety messages undertaken individually or collectively	 Review the range of single agency safety messages to identify any gaps that multi-agency communications can assist in 	All communication activity is being reviewed by the new Communications and Engagement Committee
by agencies to ensure that parents, carers, children and the children's workforce are fully informed of the	 Development of child, parent/carer and practitioner appropriate communications 	CSE Awareness Week was delivered in September 2012 across Lancashire, including community events to inform of the risk factors and media access to the work of a number of the specialist CSE teams across Lancashire. CSE 'risk identification'
messages from the Board's monitoring and co-ordinating activity	 Review child, parent/carer and practitioner appropriate communications through work with Pan-Lancashire and North West groups 	posters designed based on the national guidance; distributed across Lancashire to be used by practitioners and in public settings.
		'Safer Sleep' campaigns have been delivered in the summer and winter by the Sudden Unexpected Death in an Infant (SUDI) Group
Implementation of the revised arrangements to investigate allegations concerning people working with children	 Revision of the processes and performance monitoring arrangements for LADO investigations 	Complete – the revised arrangements including delivery of a Management of Allegations training course has led to a 60% increase in referrals to the LADO

Priority Area	Actions	ns	Progress
Continue to monitor and evaluate the effectiveness of what is done individually and collectively by the agencies of the Board to safeguard and promote the welfare of children and advise agencies on ways to improve policies, procedures and practice	I I I I I I I I I I I I I I I I I I I	Implementation of the revised arrangements to investigate allegations concerning people working with children- Self assessment audits by agencies on how the voice of the child and early help is embedded within practice Self assessment audits by schools and learning institutions on compliance with s.175 & s.157 duties Continue to improve engagement with the education sector, particularly schools	Complete – revised arrangements to manage allegations now in place; voice and early help audit commenced in March 2013; toolkits for schools to self-assess their compliance with safeguarding standards have been developed and disseminated through the School's Bulletin
Monitor and develop safeguarding arrangements in education, including non maintained, free and studio schools, Mosques and UTCs	S := E & 	Continue to share best practice and feedback from local inspections Link with local providers and develop effective relationships across the Education sector, from Early Years through to Higher Education.	Ongoing work of the Safeguarding Education Committee
Strengthen e-safety messages and awareness throughout the Borough	1 1	Review the current e-safety policy and charter to ensure it reflects advances with media and technology. Develop key messages to raise awareness of potential risks	Review of the policy commenced in March 2013

Priority Areas, 2013-14

The priority areas for the LSCB business on during the 2013-14 period have been collated from the following sources:

- Ongoing business plan priorities from 2012-13
- Priorities identified by Board agencies at the Board's Development Day
- Priorities identified through committee business/members
- National priorities identified through Government policy and national reports.

A number of priority actions have been identified from these sources and the work for the LSCB for the 2013-14 period can be categorised into five broad themes:

- * Reviewing the quality of safeguarding practice; ensuring practice improves the safety and welfare of children
- * Development of the LSCB; ensuring the board fulfils its functions to help co-ordinate safeguarding activity and monitor safety of the local safeguarding system
- * Improving communication and participation; providing the tools and knowledge for practitioners, and safety messages for parents and children to help keep all children safe
- * Implementation of key strategic changes to the local safeguarding system like the Early Help Strategy and Joint Commissioning Principles; updating policies and procedures to assist practitioners in their work
- * Improving interventions and public services to reduce infant mortality rates.

In the action plan in the next section, detailed action points under each theme are listed including which committees of the LSCB will undertake the co-ordination of the work.

In line with Working Together to Safeguard Children guidance, the LSCB recommends the following priority areas of work for the Health and Wellbeing Board and its sub-group covering the Children's Partnership Board. From the monitoring and reviewing work undertaken by the LSCB, the LSCB recommends the following areas remain key to improving the safety of children in the borough and recommends they are priortised in the work plans of the Health and Wellbeing Board/Children's Partnership Board:

- Reducing infant mortality maternal health and paternal choices remain key to impacting on this
 area and will require concerted 'conception through to school ready' level work to improve and
 redesign services
- Accident prevention, including road traffic accident prevention
- Crime prevention involving children, including prevention of violent and sexual crimes.

LSCB Business Plan, 2013-14

Priority Area	Outcome to be achieved	Actions	Lead Committee	Timescale
Reviewing the quality of safeguarding practice	Ensuring practice improves the safety and welfare of children	 Evaluation tools developed for monitoring effectiveness of single agency training; single training to be evaluated with a regular program 	Workforce Development Committee	June 2014
		SCR learning to be impact assessed	Quality & Improvement (QI) Committee	December 2013
		 Monitoring of safeguarding arrangements in non- maintained schools and mosques 	Safeguarding in Education Committee	March 2014
		Review of E-Safety policies	Safeguarding in Education Committee	December 2013
		Monitoring MASH effectiveness	Quality Assurance Committee	December 2013
		Monitoring CSE/MFH effectiveness – revision of procedures	Pan-Lancs Policy & Procedures	December 2013
		Multi-agency Inspections preparation; review of local arrangements following lessons from inspections findings	QI Committee	November 2013

LSCB Business Plan, 2013-14

Priority Area	Outcome to be achieved	Actions	Lead Committee	Timescale
f the ntation of	Ensuring the board fulfils its functions to help co-ordinate safeguarding activity and	 Management and assurance of risks; partners and partnerships risk assurance for the Board 	QI Committee	March 2014
	monitor safety of the local safeguarding system	 Governance of Board: agenda setting; profiles of members; partnership involvement by members; attendance at committees/meeting; business planning and priority setting by partners 	Safeguarding Business Group December 2013	December 2013
		 Working Together Implementation: QA Framework/Minimum data requirements LI Framework/SCRs Training evaluation Thresholds/Assessment Framework Information Sharing Protocols 	QI Committee QI Committee Workforce Development Policies & Procedures Policies & Procedures	December 2013
		 Implementation of the revised Safeguarding Education guidance 	Safeguarding in Education Committee	March 2014
Improving communication and participation	Providing the tools and knowledge for practitioners,	Strengthen public safety messages from monitoring activity of Board	Communications & Engagement Committee	March 2014
	and safety messages for parents and children to help keep all children safe	 Direct engagement with schools, children and frontline practitioners 		
		 Effective communication of the Board's key messages 		
		 Service user involvement in service reviews and service design 		

LSCB Business Plan, 2013-14

Dringity Area	Outcome to be achieved Actions	Actions	Lead Committee	Timescale
Implementation of the	Updating policies and	Early Help Strategy agreement and	Children's Partnership Board March 2014	March 2014
Early Help Strategy and	procedures to assist	implementation		
Joint Commissioning	practitioners in their work			
Principles		 Development and agreement of multi-agency 		
		commissioning principles for safeguarding		
		services		
Improving interventions	Reduction in local infant	 Review all services for effectiveness in reducing 	Infant Mortality Group	March 2014
and public services to	mortality rates; reducing the	infant mortality		
reduce infant mortality	gap with regional, national			
rates	and statistical neighbour			
	rates			

Appendix 1 - LSCB/LSAB Groups & Partnerships

