Buckinghamshire County Council

Select Committee

Children's Select Committee

Date: Friday 24 January 2020

Time: 11.00 am (pre-meeting for Committee Members at 10.30am)

Venue: Mezzanine Room 1, County Hall, Aylesbury

AGENDA

10.30 am Pre-meeting Discussion

This session is for members of the Committee only. It is to allow the members time to discuss lines of questioning, areas for discussion and what needs to be achieved during the meeting.

11.00 am Formal Meeting Begins

Agenda Item		Time	Page No
1	**APOLOGIES FOR ABSENCE**	**11:00**	
2	**DECLARATIONS OF INTEREST** To declare any Personal or Disclosable Pecuniary Interests.		
3	**MINUTES** Minutes of the meeting held on Wednesday 27th November 2019 to be agreed as a correct record.		**7 - 16**
4	**PUBLIC QUESTIONS**	**11:05**	

Public Questions is an opportunity for people who live, work or study in the county to put a question to a Scrutiny Committee about any issue that has an impact on their local community or the county as a whole.

Members of the public, who have given prior notice, will be invited to put their question in person.

The Cabinet Member and responsible officers will then be invited to respond.

Further information and details on how to register can be found through the following link and by then clicking on 'Public Questions'.

http://democracy.buckscc.gov.uk/mgCommitteeDetails.aspx?ID=788

The following questions have been submitted by Mr V Nicholas.

(1) What timetable does the County consider to be most feasible for the re-opening of the secondary school in Burnham as a through school?

(2) In the short term - by the end of the Summer Term 2020 - what assets at the school can be made available for community use and by other key stakeholders?

Furthermore - what usage can be anticipated during the 2020/21 academic year?

We are all mindful that the School's Sports Hall was significantly funded by the local community Burnham Health Promotion Trust and the outdoor all-weather pitches are also a valuable community asset.

(3) What strategy and plans are being developed to develop post-16 and adult education in order to retrain and up-skill potential employees in such locations as Slough Estate and Heathrow Airport? Such provision was delivered on the existing site 30 to 40 years ago and it may now be timely to consider again such an initiative. We should also be mindful as to the benefit of collaboration with the Aspire initiative which is supported by SEGRO.

(4) Access and Egress to and from the existing site has always been problematic and the School's boundary in Stomp Road remains most unsatisfactory. What steps can be taken to ensure that this issue can be addressed in a constructive manner?

The following questions have been submitted by Mrs S Hodges.

(1) What training is provided and recorded for Educational Health and Care Coordinators to ensure they are fully up to date with current legislation and statutory requirements for the EHC plan Assessment and subsequent implementation if necessary and how is this reviewed?

(2) What training is provided to transport officers to ensure they are upto date with current statutory requirements and legislation? Too frequently incorrect information is cited.

5	**CHAIRMAN'S REPORT** For the Chairman of the Committee to provide an update to the Committee on recent scrutiny related activity.	**11:25**	
6	**CHILDREN'S SELECT COMMITTEE - A RETROSPECTIVE** An opportunity for members of the Committee to consider the work the Committee has undertaken over the last year and to discuss how this has contributed to driving improvements. The Committee will also be able to highlight specific issues that the new Unitary Council might want to monitor going forwards. **Contributors:** **All Committee Members**	**11:30**	**17 - 22**
7	**BSCB ANNUAL REPORT - INFORMATION ITEM** For the Committee to receive, for information, the Buckinghamshire Safeguarding Children Board Annual report for 2018-19.		**23 - 54**
8	**FAMILY SUPPORT SERVICE UPDATE** For the Committee to receive an update on the Family Support Service which was launched in September 2019. **Contributors:** **Mr G Morgan, Head of Early Help**	**11:35**	**55 - 60**
9	**CABINET MEMBER'S QUESTION TIME** For the Committee to ask Cabinet Members questions on current key issues for their portfolios. I. Mrs A Cranmer, Cabinet Member for Education and Skills II. Mr W Whyte, Cabinet Member for Children's Services	**12:00**	

10	**OFSTED MONITORING VISIT UPDATE** For the Committee to review and discuss the results of the Ofsted Monitoring visit which took place on 16th and 17th October 2019. **Contributors:** **Mr W Whyte, Cabinet Member for Children's Services** **Mr T Vouyioukas, Executive Director, Children's Services** **Mr R Nash, Service Director, Children's Social Care**	**12:20**	**61 - 70**
11	**IMPROVEMENT PLAN UPDATE** For the Committee to review and discuss the improvement plan. **Contributors:** **Mr W Whyte, Cabinet Member for Children's Services** **Mr T Vouyioukas, Executive Director, Children's Services** **Mr R Nash, Service Director, Children's Social Care**	**12:55**	**71 - 82**
12	**DATE OF NEXT MEETING** This is the final meeting of the Children's Select Committee.	**13:15**	

Purpose of the committee

The role of the Children's Select Committee is to hold decision-makers to account for improving outcomes and services for Buckinghamshire.

The Children's Select Committee shall have the power to scrutinise all issues in relation to the remit of the Children's Services Business Unit. This will include, but not exclusively, responsibility for scrutinising issues in relation to:

- Nurseries and early years education
- Schools and further education
- Quality standards and performance in education
- Special Educational Needs (SEN)
- Learning and skills
- Adult learning
- Children and family services
- Early intervention
- Child protection, safeguarding and prevention
- Children in care (looked after children)
- Children's psychology
- Children's partnerships
- Youth provision
- The Youth Offending Service

** In accordance with the BCC Constitution, this Committee shall act as the designated Committee responsible for the scrutiny of Education matters.*

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For further information please contact: Liz Wheaton on 01296 383856, email: ewheaton@buckscc.gov.uk

Members

Mrs P Birchley
Mr N Brown
Mr A Collingwood
Mrs I Darby
Mr D Dhillon (C)
Mr M Hussain
Mr N Hussain
Mrs W Mallen
Mr B Roberts
Ms J Ward (VC)
Ms K Wood

Co-opted Members

Mrs C Pease
Mr M Skoyles

Buckinghamshire County Council
Select Committee
Children's Social Care and Learning

Minutes

CHILDREN'S SELECT COMMITTEE

Minutes from the meeting held on Wednesday 27 November 2019, in Mezzanine Room 1, County Hall, Aylesbury, commencing at 10.34 am and concluding at 12.30 pm.

This meeting was webcast. To review the detailed discussions that took place, please see the webcast which can be found at http://www.buckscc.public-i.tv/
The webcasts are retained on this website for 6 months. Recordings of any previous meetings beyond this can be requested (contact: democracy@buckscc.gov.uk)

MEMBERS PRESENT

Mrs P Birchley, Mrs I Darby, Mr D Dhillon (Chairman), Mr M Hussain, Mr N Hussain, Mrs W Mallen, Ms J Ward (Vice-Chairman) and Ms K Wood

CO-OPTED MEMBERS PRESENT

Mrs C Pease and Mr M Skoyles

GUESTS PRESENT

Mrs A Cranmer and Mr W Whyte

OFFICERS PRESENT

Mrs K Collier, Mr G Drawmer, Mrs M Moss, Mr R Nash, Ms P Thompson-Omenka and Jack Workman

1 APOLOGIES FOR ABSENCE

Apologies were received from Mr Roberts, Mr Collingwood and Mr Brown.

2 DECLARATIONS OF INTEREST

Mr N Hussain declared that he was a contractor for bus and taxi services for BCC and worked with a number of Home to School transport companies in Buckinghamshire therefore he would not participate in the Home to School item.

3 MINUTES

The minutes of the last meeting were agreed as a correct record. There was a discussion about the assigned RAG status of the permanent exclusion item from the last meeting. Members requested an update on three of the recommendations in order to agree the RAG status which had been awarded for them. These items were covered under Cabinet Member's Question Time.

A Member asked for an update on the 11+ testing remedial actions which followed the recent testing incident. Mrs Cranmer, Cabinet Member for Education & Skills, advised that GL Assessment accepted all responsibility. Mr Drawmer, Head of Achievement & Learning, told the Committee that there had been a recent presentation to Head Teachers to brief them on the solution which would be applied to ensure fairness. GL Assessment had offered unreserved apologies and were working with Buckinghamshire Grammar School Head Teachers and Statisticians to ensure a valid approach had been taken. The solution would not be made public as it could unfairly advantage children who took the test in future.

In response to Member questioning about the responsibility of the tests, Mr Drawmer reiterated that Buckinghamshire Grammar Schools commissioned the test. The Council managed appeals, but was contracted to do so by Buckinghamshire Grammar Schools.

Mrs Cranmer offered apologies and sympathised with parents and children but she was confident that the solution would be fair.

4 PUBLIC QUESTIONS

There were no public questions.

5 CHAIRMAN'S REPORT

Members requested that the visit to Social Workers in High Wycombe was rearranged, which was agreed by Mr Whyte.

ACTION: Democratic Services to arrange visit with the Service Area

6 CABINET MEMBER'S QUESTION TIME

Mrs Cranmer asked the Committee to present their questions from the earlier permanent exclusion item. In response to questioning, Members were informed that:

- Mr Morgan, Head of Early Help, would continue to be the representative on the Bucks Inclusion Hub. He would deliver an update on Early Help at the next Select Committee meeting

- Details of the dates for the workshops and past attendance figures at network meetings and workshops would be sent to Members via email after the meeting

ACTION: Ms Thompson-Omenka

- The audit of Secondary Schools would be discussed within the side-by-side item

A Member asked for a follow-up update from the last meeting, where the Service area had been asked to provide details of current programmes which would raise standards and performance of non-selective children across Buckinghamshire. Ms Thompson-Omenka, Service Director Education, advised that an analysis of the attainment figures could now be undertaken as they had been validated. A report would come to the Committee when an Educational Standards item came onto the agenda,

ACTION: Democratic Services to schedule Educational Standards item for 2020

Mr Whyte, Cabinet Member for Children's Services reported that there would shortly be a number of Fostering and Adoption events at various locations across Buckinghamshire and asked members to promote them within their divisions.

He had attended an LGiU Bright Futures conference with his focus on Children's Services and had seen the challenges that children's services across the country were facing, on the 30th anniversary of the Children's Act. During the presentation on draft findings, Mr Whyte was reassured by the fact that everything that other Authorities had been implementing had already been done within Buckinghamshire.

Mr Whyte informed the Committee that the Early Help item which was planned for January would be a month early, so wouldn't be a full 6 month update. However, as there were no further Select Committee meetings scheduled prior to the formation of the new Council, it was agreed that the item would remain on the agenda at the next meeting.

7 INFORMATION UPDATE ON H2S TRANSPORT

Mr N Hussain left the room for the duration of this item.

Mrs Cranmer told the Committee that she had recently attended a meeting which gave a complete update on remedial actions. Home to School transport would sit within the portfolio of Richard Barker, the new Corporate Director of Communities.

As an overview, Mrs Cranmer told the Committee that:

- Less calls and messages had been received within the service area and those that had been received had been answered more effectively
- They had closed down all extraneous email boxes to reduce the likelihood that messages would get missed or sent to the wrong location.
- Communications had been analysed and improved, with teams given guidance on how to communicate better with stakeholders.
- A new team of people had been established to carry out special educational needs and disability (SEND) mobility assessments on Buckinghamshire students.

- There had been a complete reorganisation of the whole system, with the new Director of Resources holding responsibility for the function.
- The removal of free post-16 SEND travel, which would be replaced by a parental contribution system, had been delayed until the following year. This was to facilitate a robust communications process and to allow parents to apply for the necessary bursaries, confirm college placements and go through the appeals process if they weren't happy with the decision. This was expected to affect 440 children within Buckinghamshire.
- It was stressed that this was not intended to be a cost-cutting exercise but was intended to build resilience for SEND children and enable them to travel independently. An independent travel training scheme had been replicated from the scheme delivered in Nottinghamshire and there would shortly be a large train the trainer session delivered to Schools within Buckinghamshire. This would enable Schools to directly train students from November 2020.

The Chairman told Mrs Cranmer that he believed residents to be happy with the solution and communications as he hadn't heard back from them, but wanted to know that the Service Area would deliver effectively next year. Mrs Cranmer assured the Committee that they were definitely on track and she didn't believe another full system breakdown to be possible.

A Member asked about the likelihood of all of the commercial routes continuing, now that students were reliant on them, and whether there would be contingency measures in place should these stop running. It was hoped that plans would be in place so that their education and School attendance didn't get affected. Mrs Cranmer told the Committee that there were short-term contracts in place and new processes would be rolled out in time for next September. They would look at standards and make any adjustments based on these findings, with the goal to roll all routes out to the commercial sector, providing benefits to residents in rural areas. It was suggested that Mr Robson, Head of Integrated Transport, and Mr Shaw, Cabinet Member for Transportation attend a future meeting to provide technical and operational information.

A Member queried the current position involving taxi provision and associated contracts. Mrs Cranmer said that these were mostly for SEND students. Contracts were in place until 31st December, when they would be renegotiated and recommissioned. Mrs Cranmer expected a seamless transition in January 2020. The Chairman thanked Mrs Cranmer for her update.

8 INTEGRATED SEN UPDATE

Ms Thompson-Omenka, Service Director Education introduced the item and the following main points were noted::

- There had been an improving picture within SEN services and significant progress had been made. The table within the report showed the progress made with education health care plans (EHCPs).
- Integrated SEND had gone live in September. In April 2019, progress had been poor and the Service area felt they were heading in the wrong direction. Average time taken to complete an EHCP had been 31 weeks which wasn't acceptable.

- The national target for EHCP completion was 20 weeks. In order to meet this target the Service Area had to undertake a significant amount of work and issued a significant number of plans.
- There had been a significant number of complaints from unhappy parents who had been waiting excessively for EHCP completion.
- At present over 70% of EHCP's were delivered within the timescale and staff were working to continue to improve this figure. The average time taken to complete an EHCP was 25 weeks in October 2019.
- At the end of October 2019 the cumulative percentage of EHCP's completed within 20 weeks had been 32.8% and the Service area had ambitions to get this to 40% by December 2019.
- Buckinghamshire teams carried an average of 350 individual cases requiring an EHCP, while comparative statistical neighbours had a maximum of 180 individual cases.
- Healthcare Co-ordinators were being recruited to have oversight over the process.
- There had been some vacancies within senior posts within the service, which were due to be filled by January 2020. There would continue to be difficulties hiring workers within the main grades and also associates, but senior managers were working creatively to overcome this.

The Chairman requested to know what was being done differently to recruit Educational Psychologists. Ms Thompson-Omenka explained that they had run the recruitment campaign slightly differently, hosting an informal session and were anticipating applications from most of the individuals who had attended.

In response to questioning, Ms Thompson-Omenka told the Committee that:

- Specific metrics were tracked to identify trends, including children who were home schooled, children under child protection, young offenders, gender groups, children in care and children in need.
- The last 16 people who attended the informal session had been attracted via a creative social media campaign, which had been executed by the Human Resources (HR) team within a tight 3 week timescale. More creative recruitment tactics were planned, including a video which Ms Thompson-Omenka would be featuring in.
- The Service Area would consider handing out leaflets at the local train stations to London workers, as suggested by a Member of the Committee. This had been a successful tactic in the past when recruiting for other roles.
- They expected to recruit all 15 of the required Educational Psychologists from the last recruitment drive. If they managed to gain 12 new staff then caseloads would reduce to 150-180 per staff member. The service had been understaffed for a significant amount of time which had led to the backlog of work.
- Buckinghamshire was not thought to be unusual statistically in terms of the Educational Psychology and SEND services - it shared current national challenges.
- The success of the Service Area was attributed to the new Head of Service within integrated SEND and the support of their team. Improving the quality of the service and of reports had been high on the agenda. They always used parental views to critique the service and to feed into the care plan for their own child. The final EHCP's

contained the views of a range of relevant professionals, parents and often the child's own views.

The Chairman thanked Ms Thompson-Omenka for her update.

9 SIDE BY SIDE PROJECT UPDATE

Mr Drawmer, Head of Achievement and Learning, gave an update about the Side by Side School Improvement project. The following points were made:

- There was a modest amount of funding available for this project which had been allocated to Schools based on their level of need. If a School wanted to use additional support but wasn't identified as having a need for it, they were able to pay for the support.
- Schools were divided into three categories; Intervention Schools who had up to 18 funded days per annum, Prevention Schools who had up to 6 funded days per annum and Enhancement Schools, who didn't require much support but could access support if they funded it themselves.
- Schools could access group work and prevention conferences throughout the year.
- There was a current audit taking place across Buckinghamshire Secondary Schools. Furzedown and Chiltern Wood had been carrying out audit work to support teaching assistants. The council had been funding this work so that the Schools could release their staff to complete the audit.
- Across Chiltern and South Bucks, Stony Dean School had been carrying out work which focussed on reintegrating pupils into mainstream schooling. It was anticipated that this work would get broadened out into a wider SEND programme over time.
- Inclusion work and work to reduce permanent exclusions, while identifying best practice, had been taking place across the County, led by the Head Teacher at Aspire Secondary PRU.
- There had recently been a 2 day leadership conference at Bucks Academy for Head Teachers. This had been vital in supporting School leaders to develop the quality of their work and form networks of support.
- The Council had focussed on creating teacher networks so that they had been able to become ambassadors for the side-by-side project. 18 liaison groups were looking at running small research groups and would receive seed money so that they could improve performance across the County.
- All side-by-side project work was managed by the Council, through a small grant of £650,000 per year.
- Schools were prioritised based on the distance until their next Ofsted inspection and their last result. They were well-supported in the process leading up to an inspection. Larger schools also required additional support.
- Support was always tailored to each School's needs. The Council ensured that the right people were mentoring each School and that they had a thorough and correct understanding of the context of the School and the problems which it faced, to be able to assist effectively

- The success of the project had been measured through key performance indicators which included higher performing attainment 8 results, differences across selective and non-selective performance and Ofsted gradings, which were good or better.
- A Member suggested that it would be helpful to hear accounts from Schools who had been involved in providing support and those who had been supported. It was agreed that this could be brought to a future meeting.
- A Parent Governor Representative suggested that particular Schools within the enhancement group had not been getting support, despite paying into the budget. They wanted to know who they should contact as these Schools had been unable to find contact details for main project officers. Mr Drawmer advised that every Enhancement School could come through to the School Improvement Team to request support. School grading and allocation to the prescribed categories was fluid and could be assessed again when a School neared their Ofsted inspection cycle. Schools could request that the Council revise their categorisation once they have analysed their risk assessments and looked at data and vulnerability.

The Chairman thanked Mr Drawmer for his update.

10 CHILDREN'S MENTAL HEALTH SERVICES

The Chairman welcomed all contributors who were in attendance and acknowledged that they represented a range of partner organisations who were involved in providing mental health services to children and young people.

Mr Workman, Specialist Commissioning Manager, told the Committee that the provision of effective mental health services and widening access for people who wanted to access these services was a nationally mandated expectation. Buckinghamshire had been fortunate enough to be one of the first 50 sites to be included in the trailblazer project (implementing mental health support teams in schools and improving waiting times for young people accessing CAMHS services).

Dr Connolly, Consultant Clinical Psychologist at Oxford Health NHS Foundation Trust, discussed new services for looked after children and the fact that Oxford Health had good working relationships with Buckinghamshire Social Care. Social Care and CAMHS had developed a working party that meets regularly to review the Strengths and Difficulties Questionnaire (a statutory mental health screening tool for Looked After Children). This was to ensure children received the right support at the right time.

The Chairman asked about actions which had followed the increased drive to improve access to NHS-commissioned services and whether the prevalence of mental health issues had increased nationally. Ms Clarke, Service Director at Oxford Health NHS Foundation Trust told the Committee that routes of access had been opened up to allow children and parents to self-refer. Mr Workman said that the service had increased the percentage of people who were able to access services and this was monitored at a national level, based upon the local prevalence to ensure they could meet service demands.

A Member questioned how open and honest parents had been when referring their own child and whether they tended to hide problems. Ms Clarke assured the Committee that they usually received good quality referrals from parents and parents tended to accurately predict the main areas which children would need help with.

A Member asked for an update about waiting times for eating disorder appointments and specialists as they had experienced issues 10 years ago. Ms Clarke told the Committee that 2015 had been a transformational year for CAMHS services, as it had been identified nationally that young people with eating disorders had been poorly served. The waiting times to see patients within the eating disorder service were accurate, with 100% of urgent referrals receiving assessments within a week and 84% of non-urgent referrals receiving an assessment within 4 weeks.

Dr Roberts, Clinical Director for Mental Health Clinical Commissioning Group (CCG) informed the Committee that a patient would initially be able to access an urgent same-day appointment with their registered Doctor and that a referral would go in straight away with no delays. Dr Rowsell, Head of Psychological Therapies – Oxford Health NHS Foundation Trust, said that the number of patients accessing the CAMHs eating disorder services had grown but this hadn't led to delayed referrals.

Dr Connolly told the Committee that the service carefully triangulate data about each child within a range of different settings including home, educational and clinical. This builds up a full and complete picture of child behaviour and needs from a range of reliable sources.

A Member asked about how the service quickly supplies help to schools before problems escalate and pupil behavioural issues set in. Dr Connolly told the Committee that the Looked After and Adopted Children Team tended to action referrals within 5 working days, but they faced some challenges as more than half the looked after children population had been placed outside Buckinghamshire.

Ms Hadwin, Head of Service for CAMHS, reported that they were a provider of mental health training for professionals and that the single point of access had a qualified clinician on hand to provide assistance to referrers. There had also been direct provision into Schools who had requested support and there was a vision that additional support would be rolled out to all schools as highlighted in the NHS long-term plan for mental health.

Mrs Moss, Head of Integrated Commissioning, informed the Committee that actions which were taking place within mental health services in Buckinghamshire mirrored the actions timetabled within the NHS long-term plan and that funding for these initiatives was being issued in waves. They would always bid for funding for the voluntary sector and prioritised the recruitment of staff who could work effectively with individual pupils and children with high needs.

In response to Members' questions, the following main points were raised:

- Many behavioural escalations could be dealt with within school settings. Dr Rowsell informed the Committee that mild to moderate anxiety and depression could be dealt

with effectively in Schools. Mr Workman reported that mental health awareness training was being rolled out to staff within Schools, which provided a toolkit for providing support to children and young people once they had been discharged from the CAMHS service.

- Ms Hadwin said that there was a co-funded post in the Pupil Referral Unit (PRU) so that children were able to get immediate help and to support children to get back into mainstream school as soon as possible.
- Dr Rowsell discussed the age range and types of behaviour which were prevalent in the CAMHS service. A child of any age could be seen if there was evidence that an intervention was required. Very young children would usually only receive a service if they displayed moderate to severe mental health issues. Ms Hadwin said that nobody would be turned away from the service. Through the single point of access, if CAMHS services were not appropriate for a child, it was possible to receive signposting, advice and support from reputable third parties.
- Dr Connolly told the Committee about a recently established service called ReConnect within CAMHS which had received national acclaim. The service was created for parents who have neglected or abused their children and had the main aim of stopping children going into care. This service was specifically for parents of children under the age of two years.
- A Member congratulated all partner agencies and commended the enthusiasm of all contributors. When asked whether there was thought to be any gaps in service provision, particularly for looked after children (LAC) who had been placed out of County and the usual protocol, Dr Connolly said that the child's social worker would assess the situation, phone the single point of access for consultation. CAMHS would in the first instance support access to local CAMHS services, if there were long waits or difficulties then CAMHS would travel out of county to ensure the assessment took place. Dr Connolly informed the Members that CAMHS had placed a Psychologist within the main social care building which had helped to improve outcomes and co-ordination of care.
- Mrs Moss said that the long-term plan would be to widen access to mental health services nationally and to improve working with children who had very complex needs by giving them the right type of placements. Dr Roberts said that there was also a vision to extend the service so that it catered for young people up to 25 years old.
- Ms Hadwin reported that the main way in which they wanted to make improvements to the service was by combining pathways, to create a more efficient patient journey and improve outcomes for children. They wanted to look at partnership working to make all pathways into the service more efficient
- Mr Nash, Service Director Children's Social Care, said that the service faced challenges rather than having significant gaps. There had been more challenging demographic issues in Buckinghamshire and the children and young people who had been placed outside the county had more needs, were often at crisis point and would respond detrimentally to frequent changes of address. He felt that they were now better informed about how to deal with children who were at crisis-point.
- A Member asked about what restrictions had been placed on social media access for children within residential homes. Dr Connolly said that there were challenges with

restricting children's Wi-Fi access but that they were strict about the types of media accessed.

- Ms Hadwin said that they had been utilising School staff well and ensuring that they had the right skills to deal with complex issues. Training had already beien delivered to 1197 professionals and was also being offered out to about 360 parents who had expressed an interest. A lot of bespoke training had been offered to parents on the topic of anxiety.Feedback from schools had been largely positive.
- Ms Bark told the Committee that an SEN lead within a setting would tend to identify any issues and quickly source a solution - providing the right thing to the right person at the right time, as timing was crucial. Mr Whyte told the Committee that they had been working with staff and children as early as possible, to provide an early intervention. Dr Rowsell said that Kooth had been crucial in providing an early source of support for all children over the age of 11 and had been implemented successfully across the county.

The Chairman thanked all contributors.

11 COMMITTEE WORK PROGRAMME

The Committee's work programme was discussed. The next meeting would be the last meeting before the new Council was formed and would include:

- Ofsted monitoring visit update
- Early Help - 5 month update
- Bucks Safeguarding Children Board Annual update
- Ofsted improvement plan progress

The Chairman hoped to include an update from a visit to social workers within the High Wycombe office. A Member requested that the Select Committee included an item which looked at the work programme and monitoring which would be carried across to the new authority.

12 DATE OF NEXT MEETING

The date of the next meeting will be 24th January 2020 at 10 am in Mezzanine Room 1, County Offices, Aylesbury.

CHAIRMAN

CHILDREN'S SELECT COMMITTEE

RETROSPECTIVE

FOREWORD

Cllr Dev Dhillon

"I took on the role of Chairman of the Children's Select Committee because I care deeply about children across Buckinghamshire and wanted to ensure that Council services support them to achieve the best outcomes. The Committee considers all areas of the Council's children's services including social care, early years, education, Special Educational Needs and Disability provision, adult learning, child psychology services, youth provision and youth offending. The Committee comprises of 13 Councillors and 2 co-opted Parent Governor Representatives. We meet between 4-6 times a year and we often encourage residents to contact us with any concerns, issues or topics which they feel would be appropriate for the Committee to address, such as Home to School transport and Early Help. Some of the most important monitoring which we undertake is around the Ofsted Improvement Journey, regular Educational Psychology updates and Educational Standards within Buckinghamshire. We hold the Cabinet Member to account and give residents a voice for the issues which matter."

KEY ISSUES CONSIDERED BY THE COMMITTEE OVER THE LAST 2 YEARS

- Early Help services
- Educational Psychology Service performance
- Buckinghamshire Safeguarding Children Board performance
- Preventing bullying in Schools
- Permanent Exclusions Inquiry
- The Ofsted improvement journey
- Support for care leavers
- Development of children's residential care homes
- Elective home education
- Educational Standards
- Home to School transport arrangements
- Autistic Spectrum Disorder service provision
- Fostering and adoption services
- Children's mental health services
- Voice of the Child Inquiry

PERMANENT EXCLUSION INQUIRY

Department for Education data for 2015/16 showed Buckinghamshire as one of the highest permanently excluding authorities in England, which inspired the CSC to carry out an inquiry in December 2017. Following a series of meetings, observations and desk research, working with Buckinghamshire's maintained Schools and education partner agencies, the Committee produced a report to Cabinet.

Cabinet accepted the majority of recommendations which the working group made and, as from October 2019, the Primary School exclusion rate had markedly improved to 33% lower than the national average and the Secondary School exclusion rate had dropped to 30% lower.

EDUCATIONAL PSYCHOLOGY SERVICE PERFORMANCE

The Committee have kept keen oversight of the EPS over the last two years, monitoring the performance and staffing of the service to ensure the children who have additional needs, can receive appropriate services in a timely and effective way. There have been issues nationally with meeting time frames and coping with the demand for Education, Health and Care Plans (EHCPs), however, Buckinghamshire County Council is now on track and has caught up with the backlog of these plans.

SOCIAL WORKER ENGAGEMENT SESSIONS

The CSC have hosted a series of drop-in sessions across Buckinghamshire where the focus has been on the well-being of staff based at these locations and also on gaining valuable front-line feedback to assist the service area on their improvement journey. All of these sessions have been well-attended and feedback has been shared with the senior leadership team to inform them of the views gained from staff.

VOICE OF THE CHILD INQUIRY

Using desktop research and an online survey for Buckinghamshire children, the CSC completed an inquiry looking at how well BCC commissioned services, Youth Services and Children's Social Care listened to children's opinions and feedback, and used them to inform services improvements, planning and delivery.

As a result of this inquiry, 18 months on, the Bucks Family Information service now hosts a 'Youth Space' site, where children and young people can freely give their views, including a 'You said, We did' section, where young people can see evidence that they were listened to and clearly signposted services for their information. As corporate parents we value every child and want to improve outcomes for all of them.

OFSTED IMPROVEMENT JOURNEY

It has been important for the CSC to have regular updates on the Council's Ofsted improvement journey on our agendas. It is vital that members have an understanding of both national and local issues and the Committee has taken a supportive approach, as we want to see the Council's Children's Service providing good services for children in Buckinghamshire. Monitoring by the CSC has taken place in a mixture of public and private sessions and the Committee has been able to offer feedback and make recommendations as a critical friend.

'Voice of the child' inquiry makes recommendations to county council

Listening more to the views of young people will enhance the quality of public services in Bucks, according to a County Council watchdog.

The Children's Social Care and Learning Select Committee, made up of Buckinghamshire county councillors from across the political divide, has recommended eight measures to improve the council's engagement with young people.

These include making sure sufficient listening tools such as books, games and toys are readily available to social workers, establishing a participation group for disabled children and creating a specific website providing a way for youngsters to give their views.

The committee's Voice of the Child inquiry found that young people are willing to give their views and generally trust the council to keep those views confidential if required. However, information on how views can be given and how they have been taken into account in shaping services needs to be clearer, it said.

It found examples of good practice, such as the Mind of My Own app which makes it easier for young people to communicate with social workers. The committee said that officers who worked with young people understood the importance of listening to their views and found examples of where this had led to changes, such as to mental health services, care plans and the quality of accommodation.

But it said there were inconsistencies in the way views were recorded and shared and a lack of specific resources which would help engage children.

EARLY HELP SERVICES

Children's Services took the decision to redesign their early help services at the end of 2017, as they wanted to improve the effectiveness of the service and ensure it was targeting the right people. This led to a public consultation with Buckinghamshire residents to help shape the new service. Unfortunately, residents questioned the validity of the consultation and this led to a call-in which was considered by the CSC. After hearing evidence from members of the public and the service area, the CSC made recommendations to run a modified consultation, which was then accepted

CHILDREN'S MENTAL HEALTH SERVICES

The CSC held a themed meeting with partners, to look at developments and changes to mental health services since the government's green paper had been introduced. This had been identified as a key area of importance nationally and would have a huge impact on future outcomes for children within Buckinghamshire. The meeting addressed any barriers to accessing the services and looked at the success of partnership working

PUBLIC ENGAGEMENT

Public questions are encouraged at the start of each meeting and Members of the public are invited to attend and personally ask their questions directly to Cabinet Members. The Chairman also regularly actively encourages residents to suggest any pertinent topics for scrutiny at future meetings. Questions can be submitted through the Council website or emailed directly to the Committee. Over the past 12 months there have been questions on issues such as Home to School transport, foster carer safety and consultation accessibility.

ONE COUNCIL, NEW OPPORTUNITIES

The launch of Buckinghamshire Council in April 2020 provides opportunities for the Select Committee to reflect on the achievements of the Committee over the last few years and to make suggestions for future areas of work for the new authority.

Home to School Transport cuts criticised by parents

Published by Local Democracy Reporter Jasmine Rapson at 2:32pm 3rd December 2018.

Facebook Twitter Pinterest WhatsApp Email

A council consultation into plans to cut school transport has been criticised for not being accessible for parents who have children with special educational needs (SEND).

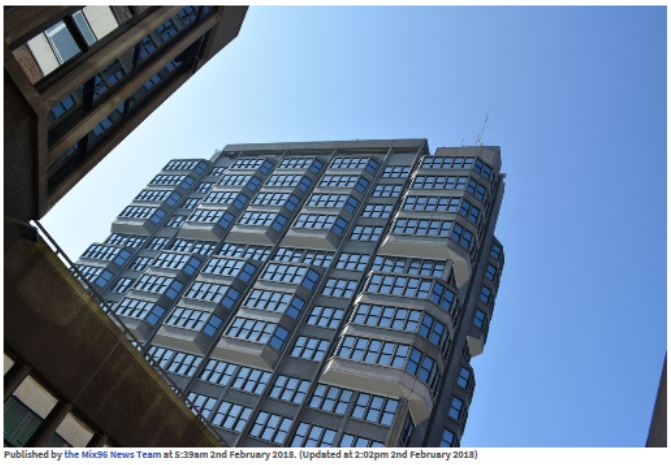
Mum, Sarah Hodges, told members of Bucks County Council's (BCC) children's select committee (November 27) that she struggled to attend the evening consultation sessions as it is difficult to arrange care for her daughter.

BCC launched a consultation on the overhaul of the service in October after growing pressures saw the authority bust its school transport budget by £1.3 million.

The cuts could mean parents of young people aged 16 to 18 with special needs may have to pay for their child's travel.

Other potential changes include scrapping free transport arrangements for pupils travelling from Iver to The Chalfonts Community College and Ivinghoe to Cottesloe School, in Wing, as well as using more public transport services.

UPDATED: Challenge to Bucks Children's Centre closures rejected



Published by the Mix96 News Team at 5:39am 2nd February 2018. (Updated at 2:02pm 2nd February 2018)

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UPDATE

A Buckinghamshire County Council committee has rejected a challenge over plans to close children's centres.

The call-in has been discussed for over two hours today, mostly around the process the Council took when consulting people on their early help plans.

This means the plans will now go ahead, but with some recommendations to change things slightly it appears.

EARLIER

Bucks County Council is today responding to a challenge of their decision to close 35 Children's Centres around the county.

Earlier this month proposals for an 'early help service' run from up to 9 hubbed centres was approved.

Three councillors called that decision in - which means the decision could be reversed.

What's going on?

If you've not been following the big proposed changes to Children's Services in Buckinghamshire, here's the story so far...

Last year, Bucks County Council proposed a major shake-up of Children's Services. They released proposals

Plan to tackle social care recruitment crisis in Bucks

Published by Charlotte Fisher with contributions by Local Democracy Reporter Jasmine Rapson at 7:50am 20th January 2019.

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The director of the county council's children's services has assured councillors there are robust plans in place to hire social care staff to tackle challenges recruiting in the department.

This week children's social care leaders were grilled on Ofsted's latest monitoring report for the failing service – which found current social workers have been left with large caseloads due to a high turnover of staff

Reducing exclusions of vulnerable groups in schools a priority, says BCC

Published by the Mix96 News Team at 5:45am 19th October 2017.

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Bucks County Council say reducing the number of permanent school exclusions is a key priority for their education strategy over the next four years.

They added that there will be an increased focus on positive outcomes for vulnerable groups.

It's after government stats revealed the number of permanently expelled black and mixed ethnicity students is about three and a half times higher than for white kids.

The stats

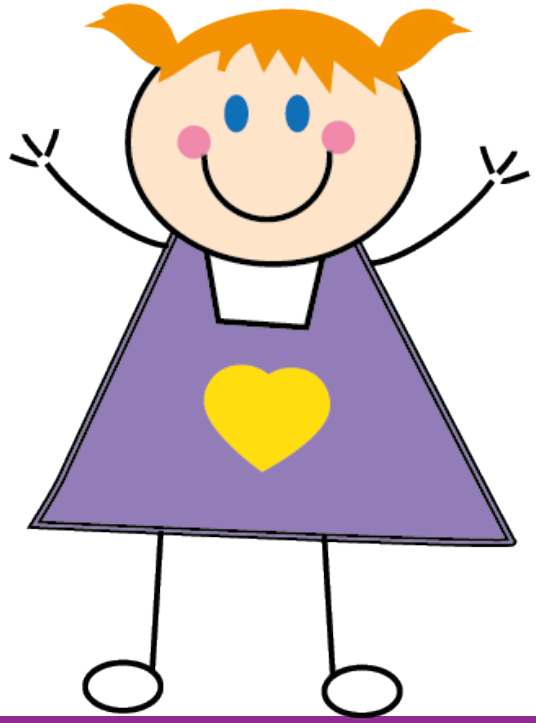
Percentage of permanent exclusions by ethnicity for Buckinghamshire (%)

BUCKINGHAMSHIRE SAFEGUARDING CHILDREN BOARD

Annual Report
2018-19

Buckinghamshire BSCB Safeguarding Children Board

CONTENTS



FOREWORD

Welcome to the Annual Report of the Buckinghamshire Safeguarding Children Board (BSCB) for 2018/19.

We have been busy making the changes needed to take us from the Safeguarding Children Board to the Safeguarding Children Partnership. Alongside this, there has been a great deal of hard work that has continued under our subgroups. This report sets out what the subgroups have been doing and how their work has benefited children.

Knowing that further work is needed to consistently deliver better outcomes for children and young people in Buckinghamshire, we have started the journey to having greater focus on the results of our partnership. To support that we have relooked at our scrutiny function and our role in driving good practice, making sure we know what the experience is for children in Buckinghamshire and that we are being a critical friend to partners. We have been working hard on our structures and ways of working so that we can understand more about the impact of our work in the wider workforce. This has enabled us to support the wider improvement journey for Buckinghamshire. Some of our work, such as multi-agency audits, workshops and learning events, helps us to widely disseminate our messages.

It has continued to be a very challenging time for the Board with initial changes to our structures and ways of working, as well as changes in the membership and chairing of the Board's subgroups. In addition, we said goodbye with our thanks to our Independent Chair, Fran Gosling-Thomas, who left us after four years of dedication and hard work.

As we move from the Board to the new partnership arrangement and different way of working, there is no doubt we have all been committed to positive changes, to making best use of resources and the talents of the wide range of people who contribute to the work of the Board. Thanks are due to the support team who administer the work of the Board and to our partners for ongoing commitments, their time and energy.

We hope that this report gives you some insight into the work of the Board, where it will go next as we become a partnership in June 2019 and how to contribute to improving outcomes for children. We are committed to our work with our wider partners so please look out for conferences and learning events as well as the published arrangements on our website in 2019.

BUCKINGHAMSHIRE DEMOGRAPHICS

6,000 babies are born each year and the current child population is:[1]

32,390	36,950	35,460	30,430
0-4 years	5-9 years	10-14 years	15-19 years

Buckinghamshire has a population of

540,050

(midyear estimate for 2018)

Buckinghamshire has much better educational attainment than the national average, a highly skilled workforce, and lower levels of poverty and unemployment. Buckinghamshire is ranked as the second least deprived county in England.[6]

The ethnic profile of Buckinghamshire is broadly similar to that of England and Wales, with the majority of the population of white ethnic origin (86% in 2011)[2]. Of these, 5.3% are of non-British white origin.The largest non-white ethnic group is Asian/Asian British, accounting for 8.6% of the Buckinghamshire population (England & Wales 7.5%). Over 60% of the county's Muslim population is in Wycombe district area. The age structure in the non-white population is very different, with a much younger population compared to the white population.

20.9%

of children living in the area come from a minority ethnic group, compared with 21.5% for England as a whole.

18.2%

of primary school children have a first language other than english (England average: 21.2%) and in secondary schools the figure is 16.9% (England average: 16.6%).[3]

5.3%

of Buckinghamshire households were classed as lone parent households with dependent children, compared to 7.1% in Engand.[4]

9%

of babies (540 babies) were born to lone parents in 2015 in Buckinghamshire, with lone parent families more prevalent in these deprived areas of the county.[5]

9.5%

of children under 16 years of age lived in low income families in 2016, compared with 12.9% in the South East and 17% in England.

8.3%

of children in nursery and primary school were eligible for and claiming free school meals in 2019, compared to 15.7% in England.

5.3%

of children in secondary school were eligible for and claiming free school meals in 2019, compared to 14.1% in England.[7]

Buckinghamshire has a number of pockets of significant deprivation, with some areas in Aylesbury Vale falling in the second most deprived decile. The geography and location of the county also lead to some specific challenges. For example, across the Buckinghamshire Thames Valley Local Enterprise Partnership area, 8.2% of households are in the most deprived 10% of areas nationally in terms of barriers to housing and services. This reflects low income relative to high housing costs and the distance to services in more rural areas of the county.[8]

Deprivation can have a significant and lasting impact on children and therefore it is important that agencies providing and commissioning services in Buckinghamshire understand local need and can target services accordingly.

- Children living in the most deprived areas of Buckinghamshire are more likely to be underweight at birth and die in the first year of life than those living in the least deprived areas.
- At the end of the first year of primary school, 41% of those living in the most deprived areas have a good level of overall development, compared to 69% in the least disadvantaged areas.
- Children and young people from more disadvantaged areas have higher admission rates to hospital for a range of conditions, including chest infections and asthma, injuries, self-harm and substance misuse.[9]
- There is a strong link between levels of deprivation and the likelihood of children having contact with Children's Social Care. Local analysis indicates that children in deprived areas are 2.5 times more likely to be on a child protection plan than the Buckinghamshire average.[10]

THE WORK OF THE BOARD

This year the board agreed its business plan and strategic leads for each priority:

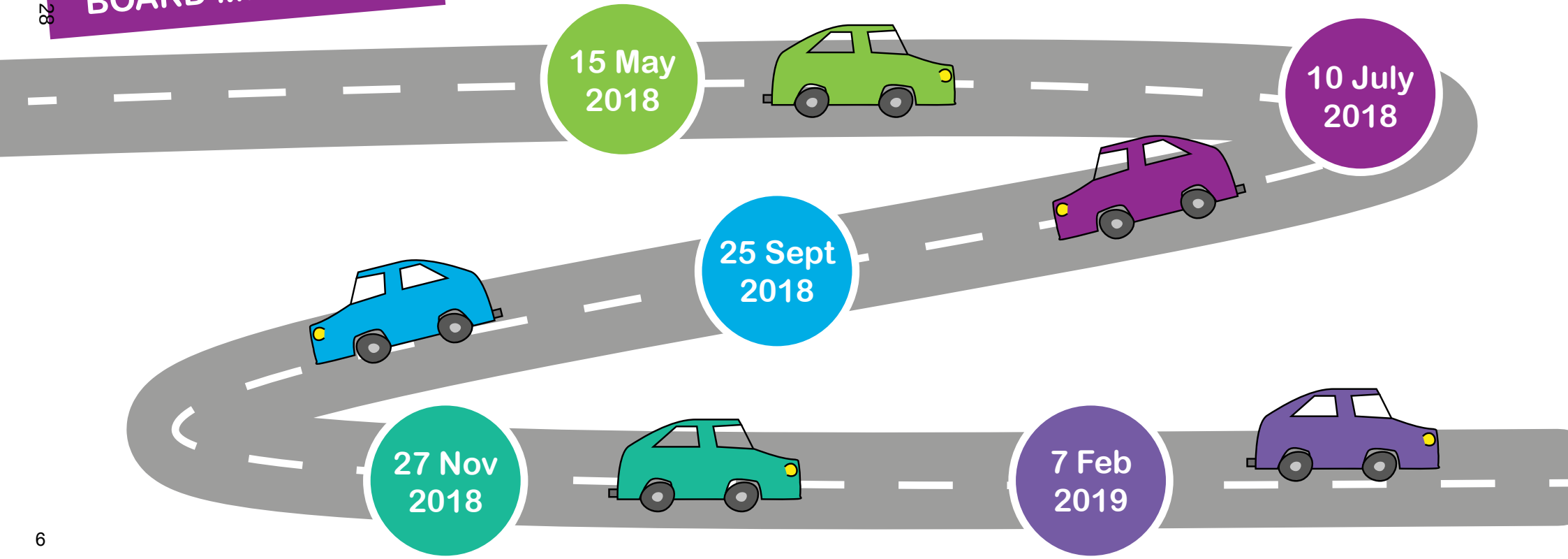
- Domestic Abuse: Thames Valley Police
- Neglect: NHS Buckinghamshire Clinical Commissioning Group (BCCG)
- Child Exploitation: Buckinghamshire Healthcare NHS Trust
- Early Help: Buckinghamshire County Council (BCC) Education and BCC Early Help
- Partnership High Level Improvement Plan: BCC children's social care
- The Board transformation plan BSCB and key partners: Thames Valley Police (TVP), BCC, BCCG

The Board met four times before starting to reform as part of the new arrangements required in the Wood Report.

The newly formed Executive Group met for the first time this year to start planning the new structures. Please check our website to get the updated structure, priorities and plan for implementation.

BOARD MEETINGS

(Click on the dates for more information)



15 May 2018 Board Meeting

What did we do?

- We looked at the data around domestic abuse (DA) and how we could collect and scrutinise data.
- We discussed our risk log – risks to children were focused on neglect and non-accidental injuries to babies.
- We heard updates from colleagues tackling child protection and modern slavery.
- We updated the Board about how we were progressing in line with the Wood report.

What difference did that make for children?

- We recognised a need to get better at evidencing what was going well and to identify things that were not working (data).
- We shared information about the current needs of children so that services could respond to them better.

10 July 2018 Board Meeting

What did we do?

- We heard about a planned review of exploitation by heads of service.
- We requested that the DA action plan be shared with the Board to understand our role within it.
- We continued to plan what data we would collect and how we would scrutinize it.
- We responded to the risk log review and heard that the Performance, Quality & Assurance (PQ&A) subgroup have commissioned an audit to look at the experience of children and families where Non-Accidental Injury (NAI) has been identified, and recommendations made in Serious Case Reviews (SCR) concerning NAI to see what progress has been made.
- We discussed merging the Child Death Overview Panel (CDOP) with Oxford. Working Together 2018 (WT) guidance clearly states that each CDOP should be carrying out 60–120 death reviews each year and Buckinghamshire does not currently meet this level (currently around 40 per year). WT states that in this case CDOPs need to join together to meet the criteria and have sufficient cases to learn lessons from.
- We presented the first paper on the proposed new model (from the working group). The Board agreed to accept this new working model but wanted more detailed proposals.
- The Business Plan was then reviewed and agreed by the Board, strategic leads agreed.
- We reviewed the Female Genital Mutilation (FGM) action plan and shared feedback with colleagues from the Health and Wellbeing Board (HWB).
- A report was shared with the Board regarding re-referrals into children social care following a recent audit carried out by the PQ&A subgroup. They looked at re-referrals over a period of six months to check for reasons why. As a result, we created a learning log that could be shared with partners.
- We reviewed the CDOP annual report and requested further details about rise in suicides.

What difference did we make for children?

- We ensured that our priorities and how we looked at data were more focused so that we could understand whether we were meeting the needs of children.
- We created learning resources so that a wider group of professionals who support children could benefit from the work of the Board.

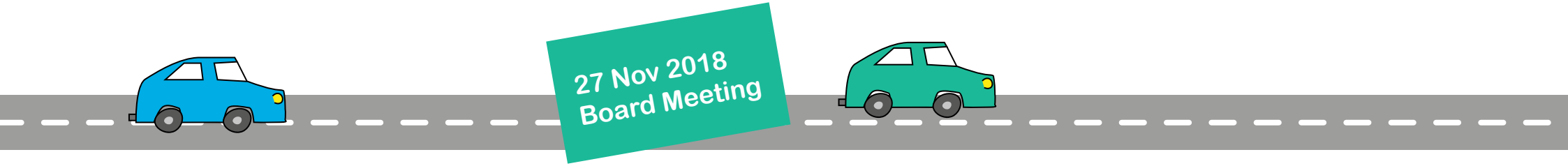
25 Sept 2018 Board Meeting

What did we do?

- We received an assurance report from health colleagues on the prevalence of FGM in the county.
- We presented two possible models of dashboard (data) and debated what questions do we actually want answering on behalf of children. We agreed to look at other areas (best practice).
- We checked progress on our risk log and identified that children who were looked after were not receiving health assessments in the required timeframe. This became a priority area.
- We received a further report on new arrangements including a structure chart and agreed that the partnership would be called Buckinghamshire Safeguarding Children Partnership.
- We heard the findings from the review of the Child Sexual Exploitation (CSE) SCR, issues included:
  - » Communication and coordination of relevant updates and reports about the details of several recommendations
  - » Absence of impact and outcome measures to know what difference has been made and if anyone is better off
  - » Lack of 'grip and pace' to progress several recommendations
  - » Lack of clarity about subgroup ownership and accountability
  - » Absence of the user voice.

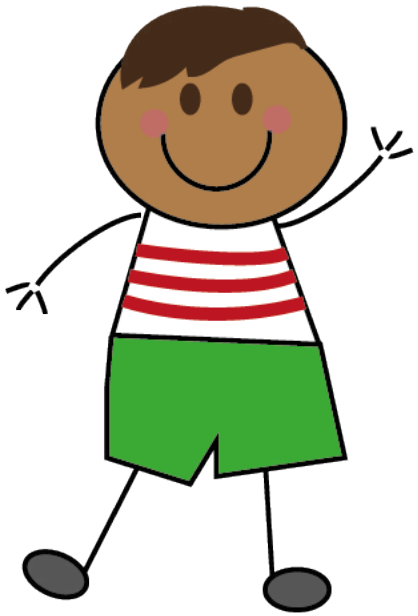
Parents and survivors have said:

- There needs to be a simple but strong and effective message to raise awareness of the issue.
- There had previously been an Exploitation Conference held and they would like this to be repeated as soon as possible.
- At the conference they would like both local voices to be heard as well as national representation.
- Some other areas use an 'Experts with Experience Panel' to review any policy changes, etc. to ensure the voice of the victims/survivors is heard and incorporated.
- They would like a mentoring scheme to be developed so that those who have been through the process could support those who have just entered into it.
- The Board was concerned about this report and agreed that the recommendations should be monitored by the child exploitation subgroup.
- We tightened the way we worked by agreeing that the terms of reference (TOR) for all subgroups should ensure that there are clear timescales and an escalation process if these are not being met. It was agreed that all subgroups should demonstrate clear reference to the principles and findings outlined in the CSE review report.
- We agreed to sign off the action plan from the Baby Q task and finish group.
- The Board agreed to sign off the Baby S SCR report and also agreed that publication would be delayed until the end of the criminal proceedings.
- We heard from the findings from the CDOP annual report that the review time for cases was better than the national average. There had been an improvement in the Rapid Response process and that links with other CDOPs had been made.
- We received an update on the Early Help review which aimed to ensure services are delivered appropriately and proactively.
- We were updated about a Thames Valley wide bid for funding from the Home Office regarding youth violence and early intervention.
- The Family Nursing Partnership Annual Report was provided to Board Members for information.



What difference did that make for children?

- We scrutinised and held ourselves to account for some of the successes and delays in implementing the CSE SCR action plan. We planned to ensure all actions were completed.
- As part of that scrutiny we heard the voices of families and stayed informed about a wide variety of service areas. This ensured that we could understand the experiences of children in different parts of our partnership.



What did we do?

- We continued to check progress against our risk log. From this and the child protection conferencing report we discussed the issue of professionals gaining an understanding that they need to share reports with families before conferences. We also identified the need to look at pre-birth assessments and whether they are consistently understood and made use of.
- We received assurance regarding domestic abuse from Safer Stronger Buckinghamshire Partnership Board (SSBPB), but having further questions we agreed to request an agenda item at their Board.
- A new risk was highlighted regarding the disbanding of the Prevent Board and the removal of some Prevention Officer posts. We received assurance that the Local Authority had a county-wide remit to the Prevent agenda which would continue.
- We shared a detailed arrangement plan for new partnership arrangements, which had been updated to include the twice yearly safeguarding partners information events.
- We were sad to say goodbye to both Carol Gorley, who has been a Board Administrator for five years, and our Independent Chair, Fran Gosling-Thomas, who advised Board members that after four years she would be standing down as Chair of the BSCB. Both Fran and Carol were thanked for their hard work during their time with the Board.

What difference did we make for children?

- We ensured that we linked with other Boards so that we could work together better where there was an identified area of risk.
- We ensured that we understood and sought assurance on changes or plans that could affect the experience of children in services.
- We demonstrated that we wanted to be part of improving the experiences of children receiving services.

7 Feb 2019 Board Meeting

What did we do?

- We agreed the proposed partnership model and agreed that domestic abuse should be a cross board first priority for this group.
- We agreed what we required from our data dashboard.
- We scrutinised the risk log and decided that there needed to be an emphasis on a specific risk and evidencing the outcome. This will be agreed within the subgroups to ensure that the risks are as up to date as possible and we are clear what good looks like.
- We agreed there would be future updates about the relationship between the improvement plan and the risk log/business plan for this group.
- We agreed that we wanted information from each subgroup about progress against their current work plan, so that the Executive could get a shared understanding of the work of the partnership.
- We agreed that this group will take the lead in ensuring that learning from reviews is communicated to their services.

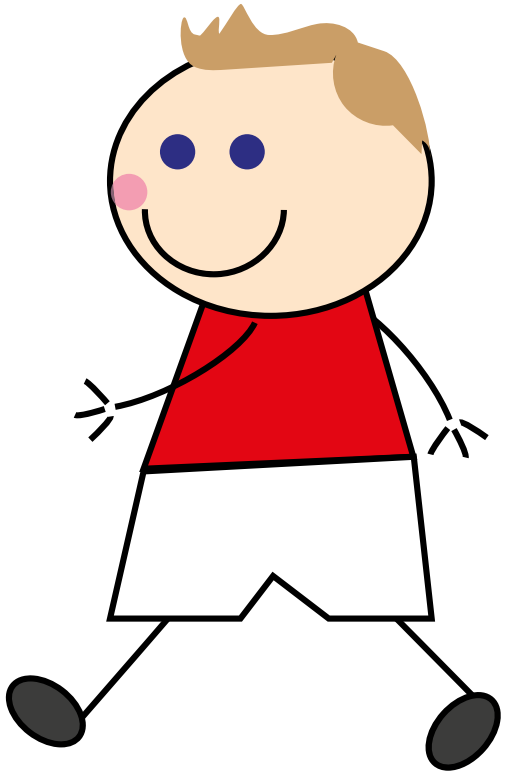
It was agreed that the executive group would retain the current business priorities:

- » Domestic abuse
- » Neglect
- » Child exploitation
- » Early Help
- » The Partnership High Level Improvement Plan
- » The Board transformation plan

In addition, it was agreed that the group needed to have a terms of reference and business plan going forward.

What difference did we make for children?

We continued to ensure that our focus was on the areas that impact children the most. We started the process of ensuring our new model improves our scrutiny and assurance function.

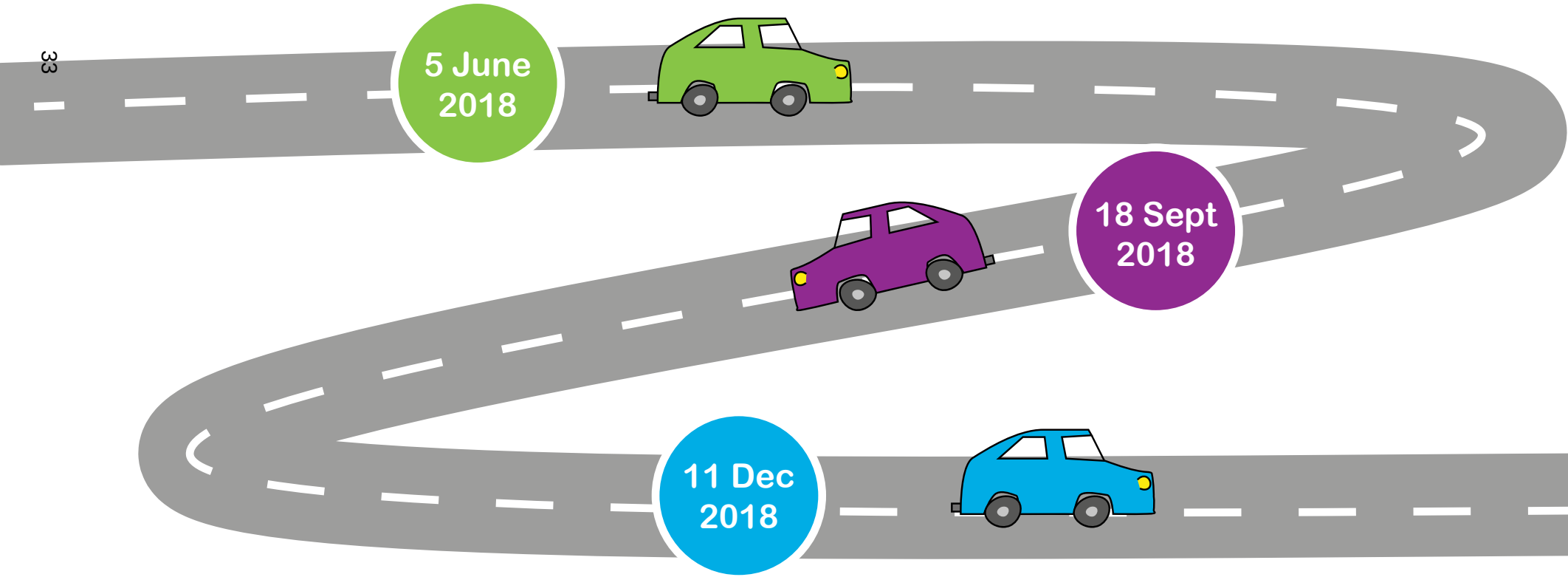


SUBGROUPS

To support and inform the Board we continued to have a number of subgroups. Pages 10 - 24 sets out what our subgroups did and what difference that made to children.

E-SAFETY SUBGROUP

To ensure there is a coordinated partnership approach to e-safety (click on the dates for more information).



5 June 2018
E-safety Meeting

What did we do?

- We created a map of e-safety activity with the help of students, parents and professionals across Buckinghamshire during 2017-18. This showed that there was an increase in training provided to parents and professionals, and a reduction in direct training provided to students.
- We learned about the presentations McAfee give to companies and at corporate events in order to target parents /carers as attending school parents' evenings was not reaching enough people.
- We learned about the Facebook sheet of apps being used by teenagers that parents may not be aware of (a copy of this is attached to the minutes). At least one new app is produced each day (some statistics can be found here).
- We had two presentations from McAfee. The first outlined the work that McAfee does with school students and adults, part of which included their sponsorship of Bletchley Park and the e-safety display there. The other presentation covered the pack they use with 11 – 14 year olds (there are several packs to suit differing age groups).
- We promoted and rolled out a cybercrime theatre project.
- We discussed the plans for the E-Safety Conference for students on 6 July 2018, which is aimed at secondary school students, ideally those in their school councils. There are spaces for 100 students. The speakers/presentations for the day have been confirmed (apart from SWGfL) and they will be:
  - » Katie King, who is Director of Transformation at Digital Leadership Associates,and Founder of AI in FM and content marketing agency Zoodikers. Katie will give the keynote address (focusing on the positives of the internet for careers etc.)
  - » Two workshops looking at cyberbullying, the dark web and other negative aspects of the internet. The students will be split into year groups for the workshops, one for Years 7 – 9 and the other for the older students.
  - » Equaliteach, who will focus on fake news and how students can interrogate the internet to ascertain the truth.

What difference did that make for children?

We were better informed, ensured that presentations, resources and events, such as plays and conferences, reached as many children as possible.

18 Sept 2018 E-safety Meeting

What did we do?

- Learned from a speech given by the Home Secretary Sajid Javid that the time from a first contact to a child being sent sexual images is now approximately 45 minutes and there are thought to be 80,000 groomers across the UK.
- Discussed referrals into the county regarding radicalisation and the links to online safety.
- Reviewed the current work plan: all actions had been completed and RAG rated green.
- Subgroup members agreed that a lot of the actions from the last work plan were effectively business as usual and should continue.
- Agreed further Child Exploitation and Online Protection (CEOP) training session for professionals. Currently 20 people have signed up.
- Heard about the success in procurement of European funding for approximately 175 million euros to develop and promote an online safety resource for children with autism.

What difference did that make for children?

- We recognised that we needed to get better at evidencing what was going well and also spotting when things were not working (data).
- We shared information about the current needs of children so that services could better respond to them.

11 Dec 2018 E-safety Meeting

What did we do?

- Wycombe District Council told us about their work in assemblies speaking to over 2000 secondary school pupils about online grooming and social media propaganda for the extreme right wing and Daesh. We have talked to young people about critical thinking skills and not impulsively liking or sharing posts or memes without checking the source, whether it be a group or individual. I have used the example of Donald Trump retweeting Britain First, who supported the murder of Jo Cox MP.
- Discussed Islamophobic online content and how young people may not appreciate the historical context of some of the materials. This was seen as an emerging concern for children in Buckinghamshire.
- Discussed the issues that children may face when gaming (e.g. fortnite) and issues of online exploitation involving requesting and sharing explicit images.
- Sungroup members agreed that they would try to hold more joint presentations so that the police can cover the legal side of issues when McAfee present to schools and young people. They planned to discuss this further outside of the subgroup meeting.
- Heard about the pre-school programme to teach three year olds about e-safety (using Smartie the Penguin story book to do this).
- Discussed changes to staffing to support Prevent and whether this created a risk for children (due to changes in Home Office funding). Wycombe Community Safety Partnership is proposing to fund one of the posts so that Workshop to Raise Awareness of Prevent (WRAP) training can continue in the area.
- Agreed the production of a guide for refuges, specifically for people affected the use of smart technology (i.e. Alexa) in relation to domestic abuse (the use of apps can enable control of heating, lighting, security). This would need to include a guide about settings and how to block devices.
- Agreed that this group would not be a subgroup under the Board due to the move to the new partnership structure, but that it was important the new partnership needed to stay linked into this group.

What difference did we make for children?

More children, including those at a younger age, were able to benefit from learning about online safety, and more professionals had shared information about the issues that were affecting them.

LEARNING AND DEVELOPMENT SUBGROUP

The Learning and Development (L&D) subgroup seeks to make sure that the professionals working with children and young people in Buckinghamshire have the necessary skills to ensure children and young people access the right help at the right time.

The L&D subgroup held one meeting and concluded their work on 18 October 2018.

What did we do?

Reviewed the work plan and agreed that:

- Joint learning events were now taking place with the Buckinghamshire Safeguarding Adults Board and Chairs of the various Boards are looking to introduce a joint pathway outlining services.
- The 2017-2018 L&D Framework was finalised and published on the website. This will be reviewed under the new arrangement.
- The Multi-Agency (M/A) Training Pool remains in constant flux due to high staff turnover within agencies and also the suitability of candidates being put forward for this role. Managers and agencies were asked to carefully consider the staff they put forward for this role in future. The group reshared the BSCB Partnership Agreement, which outlined the essential requirements individuals should have, including the following:
  - » Training/facilitation experience and skills with groups.
  - » A minimum of two years professional experience working specifically with child protection issues, as a member of a statutory or voluntary agency.
  - » Experienced in attending and contributing to child protection conferences.
  - » Current knowledge of child protection policies and procedures in Buckinghamshire.
  - » Up to date on government agendas.
- The group agreed that multi-agency training should be kept but there is a need to review the M/A Training Pool membership, commitment of members and challenges faced.
- Single Agency Child Protection Training Support Group (SASG) was reviewed and although the general feeling from those who do attend is that these meetings are invaluable, many members do not attend and have very little contact with BSCB in general. The group discussed how to escalate this with managers to ensure that the Board and the new arrangement has the resources it needs.
- The group agreed that the one day 'Everyone's Responsibility' and the two day 'Working Together in Safeguarding Children' courses will continue to promote Early Help, and Early Help is also referred to in other courses.
- The group was informed about the move from a Local Safeguarding Children Board to a Multi-Agency Partnership for safeguarding arrangements with three key partners.
- Going forward, Learning and Development will not be a group in its own right but will be a fixed item in all the groups.

What difference did that make for children?

- Children could be assured that the people who were training staff who work with them are up to date, committed and share an understanding of the need to act as early as possible.
- Children and their families benefit from a more joined up approach which will help us to meet their needs better.
- Ensuring that staff are properly trained in safeguarding will now be something that all subgroups will have to discuss.

SAFER EMPLOYMENT SUBGROUP

This is a multi-agency group whose purpose is to support best practice and seek assurance that:

- Appropriate recruitment, selection, vetting or checking, training, monitoring and supervision arrangements are in place for people working with children and young people, on either a paid or voluntary basis.
- Safeguarding allegations against members of staff or volunteers are thoroughly and proportionately investigated and that all appropriate lessons are learned.

The Safer Employment subgroup meeting was held and the business of the group concluded 19 September 2018.

What did we do?

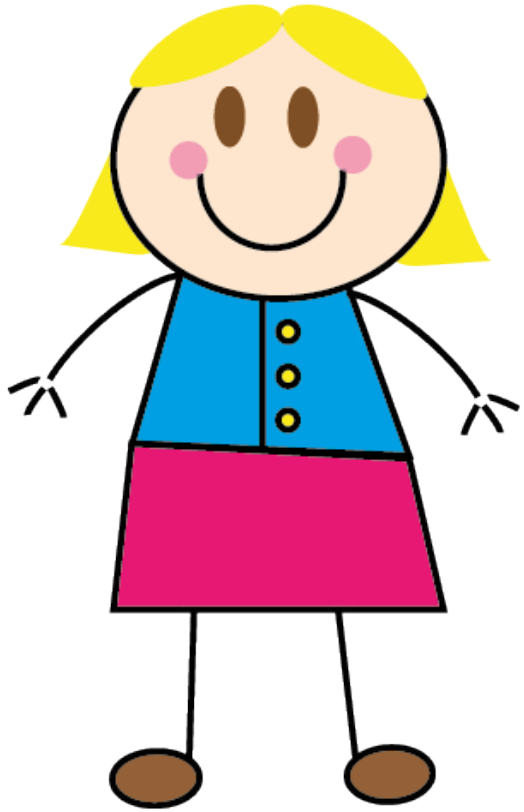
The group reviewed the work plan for 2017-18 and any actions not RAG rated green.

One of these was the need to set up a group looking at Client Transport Safeguarding. The group identified a suitable meeting which was being led by the local authority and would now be attended by a member of the BSCB support team.

It was agreed at the meeting that the workplan could be closed. The governance for safer recruitment in the new structure, in relation to keeping policies and training under review, will be agreed in the new arrangements.

What difference did that make for children?

- The BSCB completed all of its agreed pieces of work, which meant that children could be assured that a wide range of agencies are signed up to ensuring their safety.
- Children can benefit from a more consistent approach to safe recruitment and to recruitment which has paid attention to lessons learnt from national sources.

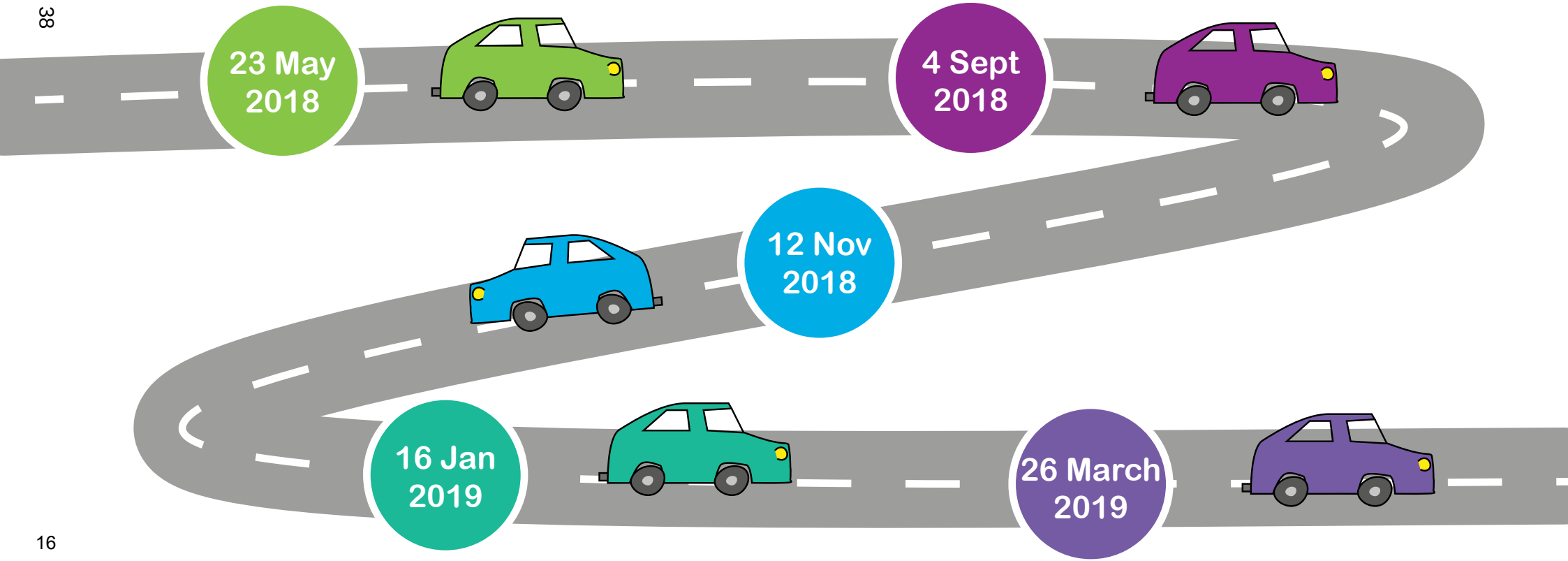


CHILD EXPLOITATION SUBGROUP

The Children and Young People's Exploitation subgroup is a multi-agency forum which aims to:

- Support the strategic development of an effective and coordinated multi-agency response to all forms of child and young people's exploitation, including actual or likely significant harm due to child sexual exploitation, criminal exploitation ('county lines'), modern slavery, trafficking, radicalisation, exploitation as a result of being lesbian, gay, bisexual and transgender (LGBT) and in respect of being a missing child/young person.
- Provide assurance about the way agencies are working individually and collectively to safeguard and support children and young people at risk of exploitation.
- Oversee and monitor the delivery of any multi-agency action plans and recommendations designed to safeguard and protect children, including children and young people with disabilities, who are at risk of harm as a result of exploitation.

(Click on the dates for more information).



23 May 2018 Child Exploitation Meeting

What did we do?

- We agreed to develop some clear best practice guidelines about creating and using videos as a method of raising awareness with young people.
- We revised the terms of reference to ensure that the group kept up to date with the needs of children.
- We revised the workplan and decided to identify the three key priority areas for children:

1. To carry out a review of all CSE SCR recommendations, which included meeting key partners responsible for delivering these actions, and consulting with a group of survivors and their families to obtain their perspective and test out the findings of the CSE SCR action plan.
2. To create a profile using the the VOLT (Victim, Offender, Location and Themes) model as a framework. It was felt that it was necessary to establish what exploitation looks like locally to enable more specific targeting when providing support and raising awareness.
3. To agree a scorecard so that we could evidence and scrutinise what impact we are having on the profile priorities.

- The meeting also sought assurance about the work around taxi driver training. From September 2018 all drivers and Passenger Assistants (PAs) that work on Client Transport Services will hold a Buckinghamshire County Council (BCC) ID badge. This badge confirms that:

  - The holder has been recruited in line with BCC safer recruitment processes.
  - The holder has undergone an enhanced DBS (Disclosure and Barring Service) check.
  - All new and renewed DBS checks have been risked assessed to ensure the holder is suitable to hold a BCC ID badge and work on client transport contracts.
  - All applicants have attended a basic communication assessment and have demonstrated they can communicate effectively in English, (reading, written and spoken) so they can better communicate with parents/carers, passengers, establishments and emergency services.
  - All drivers and PAs will have completed a three to four hour standard safeguarding awareness session and completed a brief assessment around their understanding of the subject.

- Only once all the above have been met will the driver or PA be issued a BCC ID badge, which will remain valid for three years, after which the entire process begins again.
- The meeting heard about some ‘mystery shopping’ activity in the Chiltern and South Buckinghamshire areas regarding Hotel Watch. These activities are carried out every six months using police cadets as the young people. There had been positive improvements for hotels that had previously failed the scheme.

What difference did that make for children?

- Children would be able to see much clearer what the purpose of the group is and what we want to scrutinise.
- Changes have been made which will help to make children safer in BCC licensed taxis.

4 Sept 2018 Child Exploitation Meeting

What did we do?

- We agreed the work plan and decided who was leading each aspect. The review of the previous serious case review would be led by senior managers to ensure that the partnership had done what it said it would do.
- We discussed the role of the awareness raising group which looked at the engagement and communications aspects of this work. A mapping had been undertaken but direction was needed to now use this information. The group also agreed that we needed to review the RUWise2it website and social media content, making use of the voices of young people.
- The group benefited from a visit by members of the CSE National Working Group: Steve Baguley, Head of Safeguarding in the CSE Response Unit of the National Working Group and his colleague, Kev Murphy, attended to update the subgroup meeting on CSE and exploitation generally across the country. They shared up to date research and resources that the group could share more widely.
- We kept a high level of challenge on the issue of a recommendation on the CSE SCR action plan which has not yet been completed.
- Safeguarding/CSE training for taxi drivers, who are licenced by the district councils, had been developed but had not yet been implemented or evaluated.
- We received an update on the Hotel Watch scheme and were made aware of establishments who had not performed well.

What difference did that make for children?

- We understood that the materials and approaches we take on this subject need to be better informed by children and young people.
- On behalf of children, we pursued a high level of scrutiny into areas where there had not been as much progress.

12 Nov 2018 Child Exploitation Meeting

What did we do?

- We welcomed a new chair to the group.
- We received information about the recent review into the Swan Unit, which was set up following the CSE SCR to deal specifically with CSE-related referrals, and found that it no longer reflected the needs of children and families. The focus on CSE meant that often other forms of exploitation were not considered. A plan which should see a move to an exploitation hub was due to complete by March 2019.
- We maintained scrutiny into the outcome of the review of the CSE SCR. Agencies who had taken part in the review were invited to a meeting with the BSCB Chair, Fran Gosling-Thomas, in early December so that they could discuss at what stage they were with the recommendation and what evidence they could provide to show that changes have been made and established.

What difference did we make for children?

We maintained grip and pace on the scrutiny so that children could be assured that we fully completed the action plan we signed up to.

16 Jan 2019 Child Exploitation Meeting

What did we do?

- We received an update on the ongoing dialogues between the local authority (and chair of the subgroup) and the district councils with regard to taxi driver training.
- We agreed about the engagement of a consultant to look at the impact of exploitation-related Board work, such as previous serious case reviews, polices and procedures. They will be undertaking a deep dive audit of children's experiences of services when they have been identified as subject to or at risk of sexual exploitation. It is part of a 'distance travelled' audit the group requested.
- We heard about the CSE SCR review meeting which took place 13 December, chaired by the BSCB Independent Chair. It was explained that the Board is currently reviewing the pace and robustness of previous SCRs across a number of themes.
- We looked at a list of actions relating to the CSE plan which required input from the group. These were discussed and the action plan was updated with the information from the meeting.
- We heard that interviews had started for the Swan Unit/family worker role.
- The group started to scrutinise the new communications plan and agreed with the proposed spend for 2019 (taxi sticker campaign) and promoting the numbers for reporting. It was agreed that agencies would need to measure the impact, e.g. any increase in reporting. We agreed that we need SMART business objectives from the subgroup in order to drive communications activity in 2019/20.

What difference did that make for children?

- We kept up the scrutiny so that children could be assured we had made use of the learning from the serious case review.
- We started to produce new ways of raising awareness that would make a clearer impact for children.

26 March 2019 Child Exploitation Meeting

What did we do?

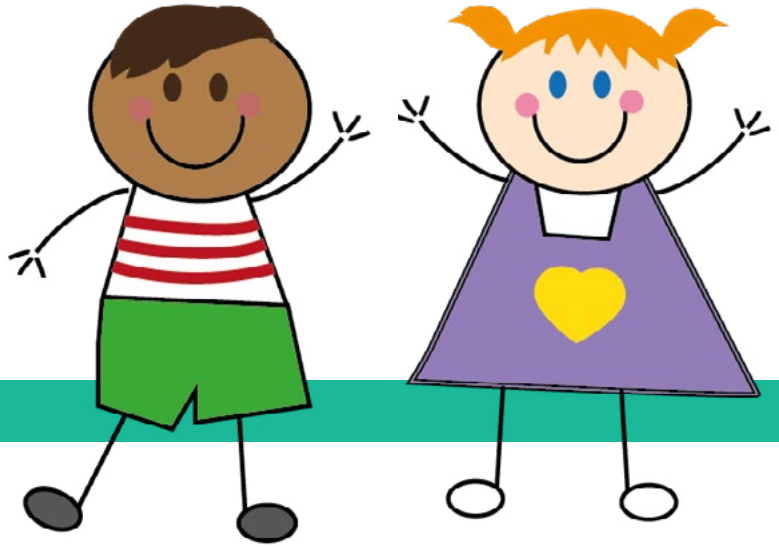
- BSCB team started planning multi-agency workshops to raise awareness about definitions and services related to exploitation.
- We heard about the introduction of ELPIS (data analysis system focused on missing people) which would make best use of data about missing people and we agreed that we needed to adopt that in Buckinghamshire.
- We shared information from the contextual safeguarding network to broaden our understanding of the issues that children face in relation to exploitation.

What difference did we make for children?

- We made sure that we planned workshops for as many relevant people as possible, to ensure that we all understand what exploitation is and why it is important to act on it.
- We agreed to make use of evidence-based tools so that we can respond in the best ways to the needs of children when they are vulnerable.

POLICY & PROCEDURE SUBGROUP

To ensure there are up to date multi-agency safeguarding policies and procedures for Buckinghamshire which are easily accessible and well embedded across partner organisations.



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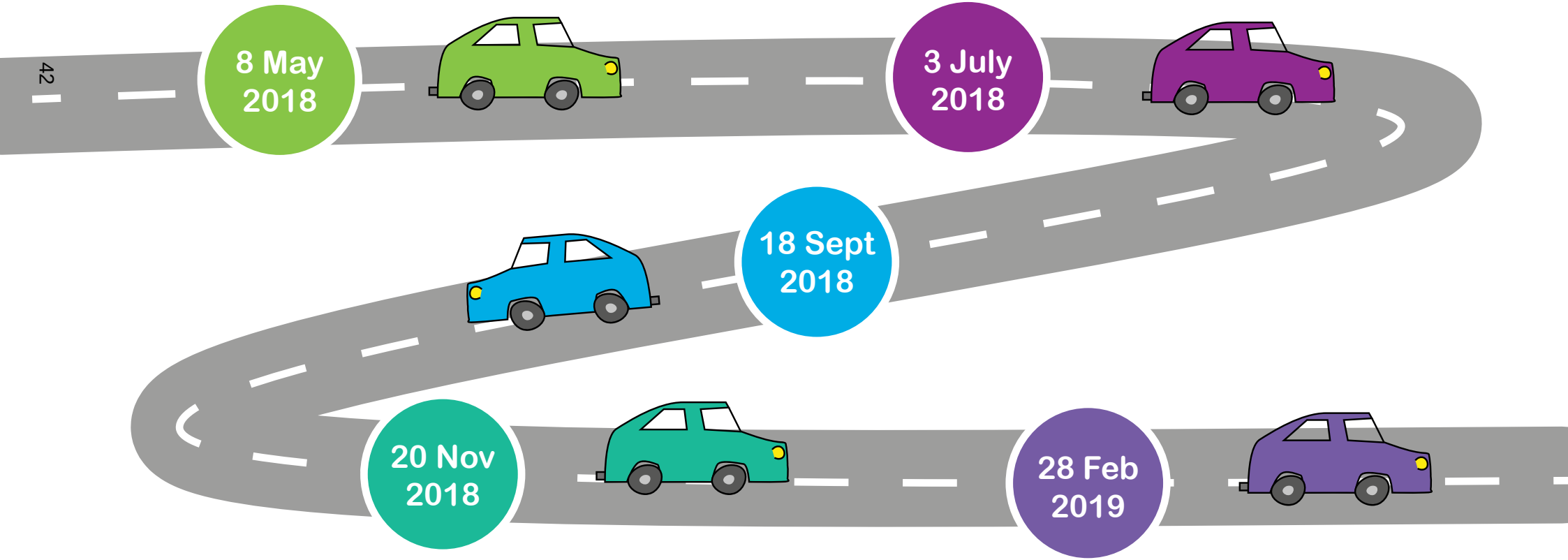


8 May 2018 Policy & Procedure Meeting

What did we do?

- We looked at improving attendance and engagement in this work, including improving engagement with the voluntary sector. We agreed that hearing the voice of the child was key.
- We shared the update from the neglect conference and as a result agreed improvements that were needed in our neglect policies and guidance.
- The subgroup reviewed all items identified on the forward plan as due for sign off/verbal update at the March meeting.
- We finalised the escalation procedure and made that available on our website.
- We finalised the "Children Living in Households Where There is Substance Misuse Guidance".
- We fully updated and signed off the joint protocol between Buckinghamshire Safeguarding Children Board, Buckinghamshire Safeguarding Adults Board, Safer Stronger Buckinghamshire Partnership Board and the Health and Wellbeing Board.

What difference did that make for children?

A number of key pieces of guidance were made available. This meant that anyone working with children could better understand how to respond to their needs and how to appropriately challenge things if they did not agree. Having information publically accessible helps to ensure children are safeguarded in a range of settings.

3 July 2018 Policy & Procedure Meeting

What did we do?

- We reviewed all our compliance and information sharing policies in relation to the General Data Protection Regulation (GDPR). As a result, the wording in all our polices was updated.
- We shared and discussed the Domestic Abuse Strategy so that we could offer feedback from a children's perspective.
- We continued to receive updates for our delayed reporting policy.

What difference did we make for children?

We spent time ensuring that we understood the new GDPR requirements so that we were sharing and storing data appropriately.

18 Sept 2018 Policy & Procedure Meeting

What did we do?

- We were invited to review and feedback on a proposed Local Area Policy for the provision of a needle exchange programme for young people under 18 (including young people under 16). The subgroup supported this sensitive and considered piece of work which was seeking to safeguard some of the most vulnerable children.
- We considered a revised copy of the Early Help Strategy prior to the start of the consultation.
- We received amendments to our Honour Based Violence/Forced Marriage Guidance from subgroup members. This was then updated and published.
- We looked at a good example of an Unidentified Adults Toolkit from Hampshire and agreed that, as this related to learning outcomes from serious case reviews, it would be valuable to share with Buckinghamshire colleagues. We were later able to upload this.

What difference did that make for children?

We supported the implementation and sharing of key polices and tools which, by signing off such policies and adopting toolkits from other areas, we sought to improve knowledge and insight to benefit practice.

20 Nov 2018 Policy & Procedure Meeting

What did we do?

- We gave feedback on a session held specifically for staff in the new Young People's Substance Misuse Service. While this received positive feedback, it also reinforced need for the promotion of safeguarding tools and better integrated working between statutory and specialist services.
- We agreed to extend the remit of this group to include practice as part of the move towards the new arrangement. The TOR and plan would also be reviewed to reflect this.

What difference did we make for children?

- We increased the reach of the group by training substance misuse workers, ensuring that children who access those services are supported by staff who are up to date and aware of the procedures in Buckinghamshire.
- We challenged ourselves to ensure that under the new arrangements we will look at how changes in policy affects practice and, accordingly, what difference that makes to children.

28 Feb 2019 Policy & Procedure Meeting

What did we do?

- We stayed informed about the BSAB transitions audit.
- We heard about the new local child safeguarding practice reviews process.
- We discussed how we would fulfil the new practice element of our work: we would seek to understand what happens when policies and procedures are published. How are they embedded? How can we evidence the impact on front line practitioners and the children/families they support?
- We discussed some of the challenges in getting timely updates on policies and looked at two different providers to help us do this.

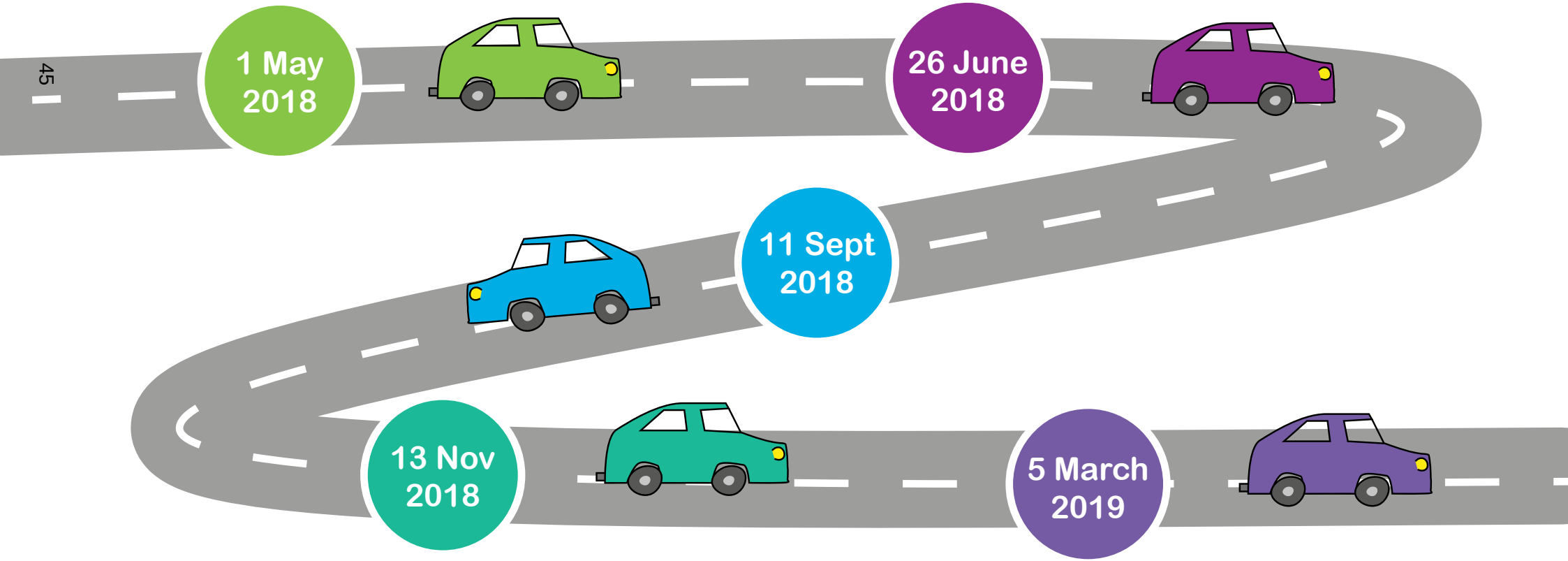
What difference did we make for children?

We ensured that, going forward, our work will capture the impact of policies and guidance by making better use of the voice of the child.

PERFORMANCE, QUALITY & ASSURANCE SUBGROUP

To coordinate quality assurance and evaluate the effectiveness of what is done by BSCB partner agencies, individually and collectively, to safeguard and promote the welfare of children.

(Click on the dates for more information).



1 May 2018 Performance, Quality & Assurance Meeting

What did we do?

- We took a detailed look at the data on the current dashboard.
- We looked in detail at what audits we were planning and how we will undertake them. We decided to do four focused audits per year led by subgroup members and using a variety of methods, such as case studies, table top and online. This model will promote an open and honest discussion and will allow agencies to identify ways to improve their processes for safeguarding children.
- We agreed to create a proforma to support this audit model. All sessions will be required to agree recommendations and develop a clear and concise action plan. We agreed that all appropriate frontline staff are invited to attend these sessions and subgroup leads will allocate responsibility for updates on all recommendations.
- We learned from the completed audit 'Children with Disabilities', and the BSCB support team agreed to develop a learning sheet for the website along with an action plan which will be shared with the Board.
- We looked at some challenge questions raised by child exploitation group and from CDOP. There were a number of issues that were identified, including the transition from children to adult services and how the young person felt about these changes, as well as information sharing between agencies and a noted reliance on parental reporting.

What difference did that make for children?

We made sure that the issues we planned to examine were ones affecting children the most and we looked at ways to make sure we capture their voices more clearly. We took notice of what other groups were raising with us and looked at how our work might get assurance on these issues.

26 June 2018 Performance, Quality & Assurance Meeting

What did we do?

- We signed off a completed audit regarding children in need and reviewed the draft learning log for the children with disabilities audit.
- We discussed a report that was shared following some workshops we commissioned on information sharing, and talked about how it related to the audit plan.

What difference did we make for children?

We agreed to share learning with our partners following an audit so that people who work with children can have access to the same information.

11 Sept 2018 Performance, Quality & Assurance Meeting

What did we do?

- We continued to scrutinise the CSE SCR actions to ensure progress was made.
- We agreed that SCRs, like audits, need to have clear and measurable recommendations, which can be achieved and evidenced by agencies. These recommendations should be child-focused, with improvements in outcomes for children as key consideration.
- We looked at how the SCR subgroup and PQ&A work together. The PQ&A role is to seek assurance from the reviews that lessons are being learnt and that practice is improving.

What difference did that make for children?

We ensured that the actions that had been agreed to benefit children were progressing as planned.

13 Nov 2018 Performance, Quality & Assurance Meeting

What did we do?

- We took feedback from a peer review, with Hampshire having undertaken a health check on the CDOP group.
- We discussed a planned review of the Multi-Agency Safeguarding Hub (MASH) /Swan Unit processes as cases were taking too long to review.
- We reflected on a planned learning event following an escalation to the Board. Facilitators had been identified and the content agreed.
- We reviewed the move to partnership arrangements. It was agreed by the subgroup that a full review on how we work as a group would be hugely beneficial moving forwards.
- We discussed membership, attendance and expectations reviewed by the Chair.

What difference did we make for children?

- We kept up a level of scrutiny in order to be assured that the partnership was working effectively for children.
- We agreed to look at our own processes and expectations so that this group could ensure we were benefiting children.

5 March 2019 Performance, Quality & Assurance Meeting

What did we do?

- We agreed further improvements to our data collection to ensure that:
  - » the data collated should only be information that is already collected via agency systems.
  - » the data should focus on the five key priorities agreed for the new partnership in 2019/20: Domestic Abuse, Neglect, Exploitation, Transitions and Early Help. The dataset should pull together a clear and considered overview of these issues on a local level.
- We focused in this meeting on the journey of the child through children's social care data including Local Authority Designated Officer (LADO) data.

What difference did we make for children?

We sharpened our focus on the data that agencies collect in order to better understand the current experience of children and increase the amount of data available to the Board.

CHILD DEATH OVERVIEW PANEL

The death of a child is always tragic and leaves families with a sense of shock, devastation and loss. However, it is important that we review child deaths to see whether we can learn any lessons to improve the health, safety and wellbeing of other children, or to improve the support for bereaved families. As set out in Working Together 2015, the BSCB has a Child Death Overview Panel (CDOP) which fulfils this function.

PANEL MEETING	NO. OF CASES REVIEWED	HIGHLIGHTS
11 May 2018	4	• Following a recent death, which was not notified to CDOP, a case study was written for circulation to all GP practices to help them to think about when they may need to share information they receive.
6 July 2019	2	• The panel invited a member of the suicide prevention group along to hear what the group was doing to help prevent young people taking their own lives in Buckinghamshire, and what resources there are to support schools around this. • New guidance, Working Together 2018, was launched and the panel looked at various models for CDOP and agreed a proposal to be put to the new safeguarding executive partnership to take CDOP forward.
21 Sept 2018	2	• A representative from Hampshire CDOP attended the panel meeting to conduct a peer review.
16 Nov 2018	6	• A significant rise in number of deaths in this period caused concern but there appeared to be no pattern and all were unavoidable. • A representative from Berkshire CDOP attended the meeting to improve cross-border working. • The new Child Death Review Guidance has been published and the panel looked at this in detail to see what changes needed to be made to current working practices to ensure compliance.
18 Jan 2019	6	• A Freedom of Information (FOI) request was received and completed.
15 March 2019	4	• It was agreed to change panel meeting days to Tuesdays to facilitate attendance at panel by the CCG Named GP and Coroners Officer. • Further work has been undertaken with Oxon CDOP in preparation for joint working from 1 April.
TOTAL	**24**	

WORK OF THE BOARD

In addition to our priorities and meetings, there are pieces of work the Board undertake as part of our business; administering and supporting serious case reviews and ensuring training is provided and quality assured for partner agencies.

SERIOUS CASE REVIEWS

Working Together 2015 states that a Serious Case Review (SCR) must be undertaken by Local Safeguarding Children Boards (LSCBs) where:

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

8 subgroup meetings were held (the frequency increased due to demand and increased emphasis on implementing learning).

We commissioned learning materials as a result of the Baby Q review which will be on our website in 2019.

We planned our first partner conference around the recurring themes from the thematic review of ten years of serious case review – these were domestic abuse, parental learning disabilities and exploitation.

We signed off a SCR report which cannot currently be published.

3 large scale reviews were held.

- A review, in partnership with the local authority, including partner agencies, of the actions from the Stony Dean serious case review (published July 2009). The review was held on 6/12/18.
- We reviewed all the evidence against the action plan arising from the CSE SCR (published April 2017). The review was held on 13/12/18.
- A thematic review of 12 serious case reviews published by BSCB from 2009-2019, which were broken down into two themes. The reviews that came about as a result of suicide and non-accidental injuries in babies. The review was held on 6/2/19.

We notified the new National Panel for Child Safeguarding Practice of reviews of five new serious case reviews – (see the practice guidance, terms of reference and information about reviewers here)

Family T	23/07/2018
SYV	15/10/2018
Baby N	16/01/2019
Child AA	13/03/2019
Baby V	14/01/2019

To read any of our serious case reviews please visit: https://www.bucks-lscb.org.uk/serious-case-review/

TRAINING

41 full day courses offered by the BSCB Training Team in 2018-19.

624 attendees.

7 were cancelled either due to trainer illness (2), independent trainer no longer being available (1) or low enrolments (4).

The courses offered were:

- Everyone's Responsibility.
- Working Together to Safeguard Children.
- Protecting Disabled Children.
- Neglect.
- Working With Challenging Families.
- Domestic Abuse and Child Protection.
- Parents with Mental Ill Health.
- Child Protection.
- Child Sexual Exploitation.
- Family Outcomes Star.

In addition, the Children Board also commissioned an independent trainer to deliver four sessions on information sharing which was offered in conjunction with the Adults Board. 54 people attended these sessions.

13 awareness-raising/bespoke training sessions offered by the BSCB Training Team in 2018-19.

102 attendees.

2 were cancelled either due to low enrolments.

These sessions included:

- The Role of the LADO.
- Good Practice for Child Protection Conferences.
- Child Protection Conferences – Manager's Responsibility.
- Child Sexual Exploitation - a bespoke session for a Buckinghamshire County Council children's home.

In January 2019, our online booking system went live. There have been a few glitches as with any new system but on the whole it is working well for administering bookings.

What went well:

- Good multi-agency attendance.
- Positive feedback from attending delegates.
- The efficient use of resources resulted in a significant contribution being made to the overall board budget.

What didn't go so well:

- The evaluation aspect of the online booking system does not provide useful information.
- Trainers in the training pool are diminishing and there is a lack of commitment from some on the pool (e.g. one course per year).

HOW WERE WE FUNDED?

We are funded by contributions from partner agencies. For 2018/19 these were:

Buckinghamshire County Council	£105,683.00
Buckinghamshire County Council	£50,000.00
Thames Valley Police	£24,290.00
Buckinghamshire Clinical Commissioning Group	£70,180.00
Probation Community Rehabilitation Company (CRC)	£1,735.00
National Probation Service	£1,227.00
Wycombe District Council	£10,633.00
Aylesbury Vale District Council	£10,633.00
South Bucks District Council	£5,317.00
Chiltern District Council	£5,317.00
CAFCASS	£550.00
Oxford Health (CAMHS)	£8,000.00

WHAT'S NEXT FOR THE BOARD?

We are becoming Buckinghamshire Safeguarding Children Partnership and will be publishing our new arrangements in June 2019.

Buckinghamshire
Safeguarding Children Partnership

SOURCES

[1] Mid-year population estimates 2018. Available from: www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/datasets/populationestimatesqualitytools
[2] 2011 Census
[3] 2018 data from Local Authority Interactive Tool. Available from: www.gov.uk/government/publications/local-authority-interactive-tool-lait
[4] 2011 Census
[5] Director of Public Health Annual Report 2016/17: From The Very Beginning. Available from: http://www.healthandwellbeingbucks.org/jsna-dphar
[6] 2015 Indices of Multiple Deprivation. Available from: www.buckscc.gov.uk/services/community/research/deprivation/
[7] 2018 data from Local Authority Interactive Tool. Available from: www.gov.uk/government/publications/local-authority-interactive-tool-lait
[8] 2015 Indices of Multiple Deprivation. Available from: www.buckscc.gov.uk/services/community/research/deprivation/
[9] Buckinghamshire Director of Public Health Annual Report 2014/15. Available from: www.buckscc.gov.uk/media/2672362/1405_Bucks_Council_Report_FINAL_v2.pdf
[10] Customer Segmentation presentation (June 2014) Buckinghamshire County Council Research Team

Report to the Children's Select Committee

Title:	Family Support Service Update
Committee date:	Friday 24 January 2020
Author:	Cabinet Member for Children's Services
Contact officer:	Gareth Morgan, Head of Early Help

Purpose of Agenda Item

This report provides an overview of the progress made since the implementation of the new Family Support Service (FSS) in September 2019. Given that the service has only been operational for a little over 4 months, it is too early to provide robust evidence of impact and as such, this update focuses on (a) staffing, (b) service delivery, (c) financial savings and (d) the re-purposing of former children's centres, in line with the Cabinet decision of 4h March 2019. An annual report will be written this time next year on the impact of the new service and its progress against delivering the ambitions set out in the Early Help Strategy.

Content of the report

Staffing

1. The FSS is now fully staffed having been through a rigorous and transparent recruitment process which has brought together a new and vibrant service structure. The integrated service offer is now strengthened by having a wide range of skills and experience covering all aspects of our new early help offer, which extends to families with children aged 0-19 (25 with SEND). A significant amount of induction has been completed with every member of the service, which included 4 days of initial training with all staff on the new service approach and ambitions of the service. Additional IT training and practice input will ensure that the service is well-placed to deliver against its objectives by maintaining a knowledgeable, motivated and sustainable workforce.

2. The Chiltern and South Bucks Locality Team recently had the pleasure of hosting the Chair of Buckinghamshire's Safeguarding Partnership for a day and the feedback

received from Francis Habgood demonstrates that already, the emerging behaviours and culture the service wanted to create are being displayed which will help us realise the ambitions of the Early Help strategy. Francis Habgood said, ***"This did not feel like a team that had been in existence for less than 3 months. They appeared to be working well together, benefit from the mixed skills of the team and are integrating well across other parts of Children's Services (this was a point that was stressed in the meetings). The single location of all the teams certainly helps that integration as does the attitude of the managers."***

Service Delivery

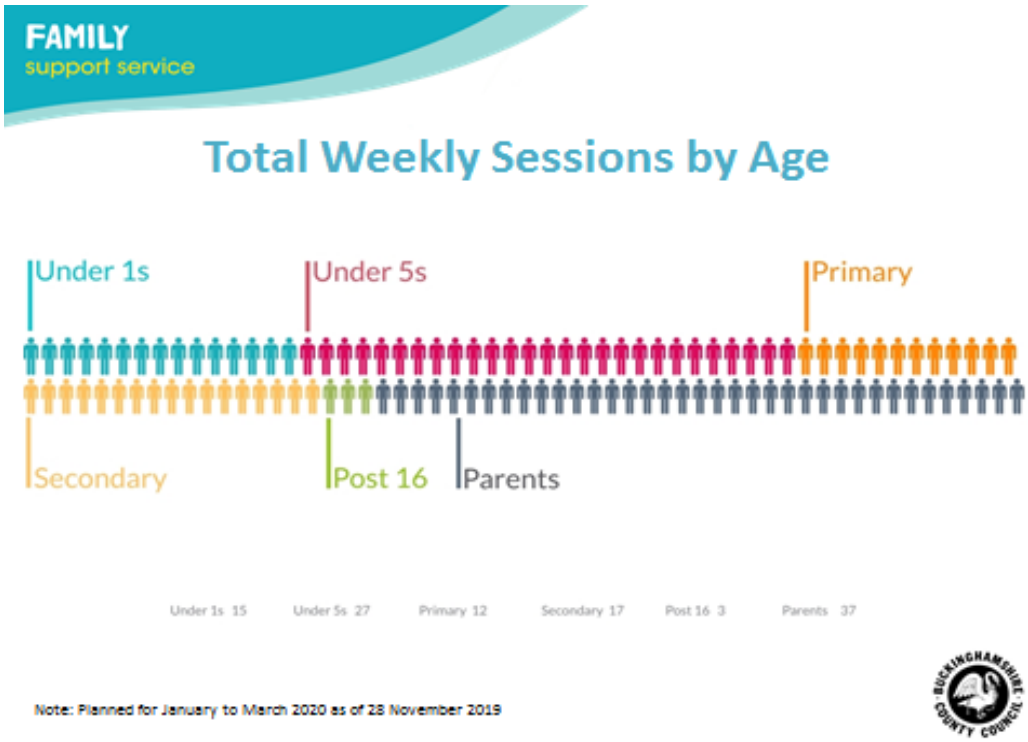
3. A core aspect of our service offer is to respond effectively to emerging and escalating need within families, to prevent things getting worse and play an active and influential role within the wider Children's Services provision. To that end, support is accessed and offered through a variety of pathways ranging from the Buckinghamshire Family Information Service, which offers a wide range of universal support, information and advice to parents and young people, including the Local Offer for families and children with SEND. We are in the process of developing an enhanced on-line offer which will enhance the user experience of the site, guide people effectively to appropriate help and support and be compatible with the new Council's digital platform.

4. FSS provides support for children and young people through community based-support at 16 retained Family Centres where our bespoke timetables are being developed to enable service and partner-led activities to be provided which are reflective of local needs. During the consultation and in our implementation plan we have been very clear that we wanted to expand the support offered from Family Centres to add value to the universal and health offers traditionally available through children's centres. Although the development of our localised programmes was delayed during the summer, as a result of the legal challenge to the early help review, we already have a good range of delivery across our centres which will be added to further throughout this year.

5. We are working with a wide range of agencies and stakeholders to develop localised delivery and bespoke family support offers across all sites, whilst maintaining support for existing clients, from the now integrated range of services, including Youth, Family Resilience and Children's centres.

6. Our sessional programme is building on what was available during the first 4 months of operation and from January includes the following range of provision.

7. One of the significant enhancements in service provision is the expanded offer to families; children and young people aged 0-25 through the Family Centre network. Although there continues to be work to do, we are already seeing an increased range of age-related activities taking place across our sites, with approximately 40% of sessions focussed on early years, 30% on parents and families and 30% on school-age children and young people.



8. We have seen an increase in visitors to the family centres by 16% since the FSS launch, with parents and children attending the activities and sessions available. Although it is not possible to provide a direct comparison with commissioned provider numbers, the occupancy rate and increasing footfall are positive early indicators for the new service.

Partners delivering sessions in Family Centres

9. We have 11 Partners and/or other BCC teams regularly using the centres. Other teams such as Children's Social Care, Fostering teams or CAMHS are also making increasing use of the centres for one to one sessions and individual family support work as and when space is available in the centres. Examples of the partner delivered sessions currently being delivered are shown in the table below.

Partner	Ages	Need	Theme
Bucks Adult Learning	Predominately Parents of 2 to 5 years One Primary School Age	Low income, below Level 2 Home-schooled	Crafts, Cooking Science, Maths
Citizens Advice	Parents of all ages of children Young People 15 years plus	Universal	Budgeting, Healthy Eating, and Financial Capability
Health Visitors	0 to 5 years	Universal	Health Checks
Midwives	Pregnancy and up to 10 days	Universal	Health Checks of Mother and baby
Family Drug and Alcohol Court Team	Parents of all ages	Families going through the court process with Drug and Alcohol issues	Drug and Alcohol support group
Public Health SPARKS	7 to 13 years 13 years plus	Universal	Focusing on Getting Active and Healthy Eating
NHS Perinatal Service	Parents of Under 1s	Mental Health Support	Group sessions on Wellbeing
Action 4 Children	Under 5s	SEND	Short Breaks Respite Care
Child Bereavement	0 to 19 years	Families affected by bereavement	One to one and Family Counselling sessions
Sparkles	0 to 5 years	Children with Downs Syndrome	Play sessions
Barnardo's	13 years plus	Mental health issues	Group counselling sessions

10. The flexibility of our offer enables providers to deliver key services from family centres from the heart of local communities. Recent feedback received by the Service from a Victims First caseworker: **"Good morning, just wanted to send this email to thank all staff at Newtown Children's Centre for allowing us to use the meeting rooms. Meeting in this setting makes massive difference to most of our clients, as it allows them to express themselves in privacy and share their emotions. Massive thank you."**

11. It remains an ambition of the service to build on this early work by engaging with communities, voluntary groups and partner agencies to maximise the use of our family centre facilities across the County.

12. We have already achieved 68% average family centre usage (during core hours) but recognise that there is more to do to increase this figure and make greater use of family centres as community hubs during extended hours, where currently take-up is limited to a small number of sites. We are actively pursuing new opportunities to build on this really positive starting position.

Family Support

13. Direct, family support is at the core of the FSS offer – providing hands-on, practical support to families facing multiple, complex and enduring issues and building resilience for families to enable them to become more independent and able to better manage issues that arise in the future without the need for formal intervention. Working with families in this way provides both preventative support and ongoing support as families step away from statutory support services to help them sustain the changes they have made and reduce the likelihood of future escalation of risk. Operating across the County in three locality teams, by December the FSS was supporting 1027 children in 375 families, in addition to delivering the family centre universal offer, group work including parenting as well as individual coaching for vulnerable young people, such as NEET support.

Finances

14. The new service was delivered within the available resources identified in the Council's medium term financial plan and has achieved £2.5 million savings in this financial year and thereafter an ongoing, full-year saving of £3.1 million.

Property

15. As a result of the Cabinet decision to implement a new early help delivery model, a number of children's centres were closed. We are working hard to ensure that by securing alternate arrangements at all sites, we will create enhanced local provision, support early years and community need and reduce ongoing running costs to the

Council for these 19 buildings. The transfers of buildings completed to date, has created additional child care provision in areas of high need, school-led family support and community-based early years provision. It is anticipated that the remaining transfers will be completed before the end of the financial year.

Performance reporting

16. Data reflecting the volume and range of service activity is being monitored however it is too early to be able to evidence the impact of the new service delivery in terms of outcomes for children and families. A data set which will reflect performance and report on the impact being achieved has been agreed and is expected to be available for the new performance year.

Buckinghamshire County Council

Select Committee

Children's Select Committee

Report to the Children's Select Committee

Title:	Ofsted Monitoring visit update
Committee date:	Friday 24 January 2020
Author:	Cabinet Member for Children's Services
Contact officer:	Tolis Vouyioukas – 01296 382603

Purpose of Agenda Item

The purpose of this report is to present the findings of the latest Ofsted monitoring visit to the Children's Select Committee.

Content of the report

1. On 16 and 17 October 2019, Ofsted conducted their fourth monitoring visit since the local authority was judged inadequate in January 2018. The monitoring visit reviewed the progress the local authority has made in respect of the arrangements for supporting children in care, including:

    - The understanding and application of thresholds for children in care.
    - The quality of planning, oversight and review of children in care, including those that have returned to the care of their parents.
    - The quality and timeliness of direct work with and for children, including life story work.
    - The quality and timeliness of supervision, management oversight and decision making, social work capacity and caseloads.

2. A range of evidence was considered for the visit, including electronic case records, discussions with social workers and their managers, and reviewing supporting documentation. In addition, the Cabinet Member for Children's Services was

interviewed and inspectors also met with young people in care to gain their views and experience.

3. This visit confirmed the same areas the service had already identified as areas of concern. The report also highlighted that the leadership team has an accurate understanding of what needs to be done, and that our improvement activity is appropriately targeted. The main contributing factor which is hindering the pace of progress is the significant difficulties in recruiting high quality, experienced social workers and managers. During all monitoring visits the Council's self-assessment presented to Ofsted was accepted in full and Ofsted did not identify any areas of concern the service was not aware of and had not identified already.

4. The key findings as detailed within the monitoring visit letter are set out below:

    a. The leadership team have an accurate understanding of the quality of services and improvement activity is appropriately targeted.
    b. Leaders have focused on improving compliance across the service, particularly where there have been concerns about children's safety.
    c. Some inadequate practice continues to have a negative impact on the quality of services to children in care, leading to drift and delay for some children.
    d. Challenges in recruiting social workers and managers, and continued high staff turnover, means that it is difficult to consistently ensure basic practice standards.
    e. Progress is less evident in respect of services to children in care, than in other parts of children's services seen during previous monitoring visits.
    f. Weaknesses in supervision and management oversight, have a negative impact on children's experiences and on the timely progression of their plans.
    g. Some areas of practice are slowly improving, such as the availability of local placements for children and the effectiveness of independent reviewing officers.
    h. When children come into care, social workers and managers are thoughtful in trying to identify the right home for them.
    i. Most children live with families or in homes where they are well supported and cared for.
    j. The quality and effectiveness of care planning is poor. The quality of children's care plans varies significantly.
    k. Social workers visit most children according to their needs. For a minority of children, visits are not frequent enough.
    l. Some purposeful direct work takes place to understand children's views. However, this is not evident for all children who need it.
    m. Not all children living in long term arrangements have been formally matched with their carers.

n. The implementation of the quality assurance programme has had a positive impact in some parts of the service. However, there has been insufficient focus on auditing cases from the children in care service.
o. The corporate parenting board has matured in its approach since the last inspection and concerted efforts by the partnership and the corporate parenting board has led to some improvements in the timely completion of health assessments, but this has not been sustained over time.

5. The next monitoring visit is due to take place in Spring 2020.

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18 December 2019

Mr Tolis Vouyioukas
Buckinghamshire County Council
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Dear Tolis

Fourth monitoring visit of Buckinghamshire children's services

This letter summarises the findings of the monitoring visit to Buckinghamshire children's services on 16 and 17 October 2019. This was the fourth visit since the local authority was judged inadequate in January 2018. The visit was conducted by Donna Marriott and Nicola Bennett, Her Majesty's Inspectors.

There is evidence of limited improvements having been made to services for children in care since the last inspection. Work to improve the availability of local placements for children is beginning to deliver results. Independent reviewing officers (IROs) now maintain greater oversight of children's plans. However, poor practice remains, which continues to have a negative impact on the timely progression of children's plans and prevents some children from achieving timely permanence.

Areas covered by the visit

During this visit, inspectors reviewed the progress made in respect of the support provided to children and young people in care. A range of evidence was considered for the visit, including electronic case records, discussions with social workers and their managers and reviewing supporting documentation. Inspectors also met with senior and political leaders and young people in care.

Overview

Progress is less evident in respect of services for children in care than it is in other parts of children's services seen during previous monitoring visits. Leaders have focused on improving compliance across the service, particularly where there have been concerns about children's safety. Progress has been hampered by difficulties in recruiting to a critical management post. Consequently, some poor practice continues to have a negative impact on the quality of services to children in care, leading to drift and delay for some children. Some areas of practice are beginning to improve, for example the availability of local placements for children and the effectiveness of independent reviewing officers (IROs).

The leadership team has an accurate understanding of the quality of services, and improvement activity is appropriately targeted.

Challenges in recruiting social workers and managers, and continued high staff turnover, mean that it is difficult to consistently ensure basic practice standards. Children confirmed this, telling inspectors that they continue to experience too many changes of social workers. This, combined with weaknesses in supervision and management oversight, has a negative impact on children's experiences and on the timely progression of their plans.

Findings and evaluation of progress

When children come into care, social workers and managers are thoughtful about trying to identify the right home for them. Most children live with families or in homes where they are well supported and cared for. Carers are committed to the children they look after and demonstrate care and ambition for them. Focused work is beginning to deliver results, leading to an increase in the number of foster families and children's homes. However, further work is required to increase the number of local foster families because too many children continue to live too far from home. Despite this, children who live at a distance from their family and friends are well supported.

Since the last inspection, work has been done to strengthen the response to unaccompanied minors when they first arrive in the area. Care is taken to identify the right accommodation, and young people are provided with the support they need to make a successful transition to life in Buckinghamshire. However, some challenges remain. There is further work to do to ensure that the transferring of children's cases from the emergency duty team to the day team is consistently effective. Visits to these young people do not always take place in a timely way to ensure early assessment of risk and need.

Social workers visit most children with frequency that is appropriate to their needs Although, for a minority of children, visits are not frequent enough. Some purposeful direct work takes place to understand children's views. However, this is not evident for all children who need it, and some wait too long to get help to understand their life stories and experiences. Not all children who would benefit from advocacy and independent visitors have access to these services.

The quality of practice remains too variable, with delays in recording evident. Case summaries provide a good overview of the child to enable workers to quickly understand their experiences. At the time of the last inspection, chronologies and assessments were not consistently being updated in response to children's changing circumstances. This makes it difficult to understand children's lived experiences. Assessment and progress reports provide an updated assessment of children's experiences. However, most lack sufficient detail to support professionals in understanding children's current needs.

Children's health needs are assessed, but not always in a timely manner. Concerted effort by the partnership and the corporate parenting board has led to some improvements in the timely completion of health assessments, but this has not been sustained over time. Considerable work has taken place to strengthen access to emotional well-being services, including enabling foster carers to access the child and adolescent mental health service (CAMHS) directly.

Social workers focus appropriately on children's educational needs. Personal education plans are completed in a timely manner, and the virtual school is proactive in providing comprehensive and rigorous oversight of children's progress. Staff from the virtual school visit children when they come into care, and they are strong advocates of promoting children's access to education and learning opportunities.

When children go missing, or there are concerns regarding potential exploitation, the response is not sufficiently robust. Return home interviews (RHIs) sometimes do not happen or they are delayed. When they do take place, they are comprehensive, and risk is assessed. However, information from RHIs is not used consistently to inform the assessment, or the child's plan. Although some effective work takes place to respond to children at risk of exploitation, there is variability in the quality of practice. Risk assessments are not always completed or updated, and planning is not consistently robust. Strategy discussions, in response to increasing concerns, are not always timely, nor do they consistently lead to effective safety plans for children.

The quality and effectiveness of care planning is poor. The quality of children's care plans varies significantly and too many lack important details. Changes in social workers mean that it takes time for new workers to get to grips with children's plans. Managers do not consistently oversee children's plans to ensure that actions are progressed at the pace needed.

Most children live with carers who meet their needs well. Care plans are reviewed regularly, and children participate as appropriate. IROs demonstrate far greater rigour in identifying and responding to shortfalls in practice than they did at the time of the last inspection. IROs' scrutiny of children's plans is now more evident in children's files. They challenge poor practice, and the systems for overseeing this have improved. However, this challenge is not always responded to, or acted on, by team managers. Consequently, this is not yet having a demonstrable impact on ensuring that actions are completed, or that children's plans are progressed at the pace needed. Although IROs ensure a focus on early permanence, they are not consistently driving plans to formalise matching for children with their long-term carers.

When children first come into care, there is a better awareness of the need to promote early permanence. Examples of effective and child-centred work are evident. Careful consideration is given to whether children can return to their birth families. Since the last inspection, senior managers have ensured better oversight of the day-to-day arrangements for children who return to live with their parents. However, there has been a lack of urgency in ensuring that these children's plans for

permanence are progressed and that care orders are discharged in a timely way. New arrangements are not always identified or assessed promptly.

When children cannot return to the care of their birth families, many benefit from living with connected carers, special guardians and adoptive families. Some children's plans for permanence are progressed with the pace and attention needed. Assessments of connected carers are thorough, providing the detail needed to inform good decisions. Children are supported to remain with carers, promoting their sense of belonging. Those children for whom adoption is their plan increasingly move to live with their adoptive families more quickly.

Not all children living in long-term arrangements have been formally matched with their carers. This means that there is uncertainty for children, which can impact negatively on their sense of belonging. At the time of the monitoring visit, leaders had already developed a plan to respond to these shortfalls. This included work to progress permanence plans, refresh procedures and introduce permanence tracking, but this has been impeded by the challenges recruiting to the ongoing recruitment challenges.

Political leaders are committed corporate parents. They have ensured that there is the financial and political focus needed to support service improvement. The corporate parenting board has matured in its approach since the last inspection. The board is appropriately constituted and informed by the work of the 'We do care' Children in Care Council, which regularly shares its views and reports to the board. The board is appropriately reviewing areas of practice, having moved from a strong focus on performance data in 2018. However, there is insufficient structure to focus the board's activity, and no work plan, targets or delivery dates. It also lacks a focus on demonstrating what difference it makes in delivering improvements for children in care.

A tenacious and appropriately targeted recruitment campaign has had limited success in recruiting sufficient staff. Social worker turnover continues to contribute to some high caseloads and delays in implementing children's plans. The quality and effectiveness of management oversight continues to be inconsistent and is sometimes poor. A lack of management direction on children's cases, particularly when they are first allocated to social workers, contributes to drift and delay for some children. Supervision, although now more evident on children's case files, does not take place consistently, and where it does, it is not of the quality needed to ensure that plans progress.

The implementation of the quality assurance programme has had a positive impact on some parts of the service. However, there has been insufficient focus on auditing cases from the children in care service. This is because resource has been focused on improving practice in those parts of the service where the greatest risks were evident. Team managers are not sufficiently engaged in audit activity, which hampers leaders' work to embed the practice changes that are needed.

Thank you and your staff for your positive engagement with this monitoring visit. Please also thank the young people who gave up their time to meet with inspectors. I am copying this letter to the Department for Education. It will be published on the Ofsted website.

Yours sincerely

Donna Marriott
Her Majesty's Inspector

Children's Services Improvement Plan

December 2019

Introduction

In November 2019, the Improvement Board and the Senior Management Team (SMT) of Children's Services recognised the need to update the improvement plan in light of the progress made to date. This new version reflects the fact that different parts of the service have improved and developed at a different pace; some more than others. It is also the case that the focus of SMT has been to prioritise the service areas in need of immediate attention and this has meant that other areas of development have been delayed. In addition, the ability to recruit the right calibre of staff at first and second line management levels has a direct bearing on the pace and sustainability of service improvement.

Given the above, it is important to have an improvement plan that identifies actions and tracks progress at a service area level and by locality. This will allow differences in progress to be better understood and provide a more accurate picture of the effectiveness of services to vulnerable children and young people.

Priorities

The evidence from audits, case sampling and general feedback indicates that there are some overarching actions that, in the event that they are delivered consistently, will bring about improvements in a number of areas. This relates to the frequency and quality of management oversight and supervision and the impact this has on outcomes. Another related area is the quality of case recording and the ability of the service to identify the individual needs of the child or young person. If this area improves, it will also positively impact on the quality of assessments and plans, therefore all teams have priorities relating to:

- Management Oversight and Supervision.
- Case Recording.
- Understanding the history.
- Identifying the individual needs of each child.

Whilst it is recognised that different teams are in different places in terms of their stability, vacancy rates and average caseloads all efforts must concentrate on the timely implementation of improvement actions. These factors may well influence progress rates across the service; however, our expectation is that all teams, regardless of their circumstances, must make progress.

There are a number of requirements that need to be implemented in order to progress these plans:

1. Heads of Service must ensure that every team meeting, every touch down and every supervision with individual social workers has a focus on the actions from the plan. Given the actions are very much linked to casework, it is not anticipated that this will significantly add to workloads.
2. Once a month, SMT will visit one of the three social work delivery locations in the county and spend the whole day looking for evidence of progress against the improvement plan. This will include looking at cases, asking social workers to talk through their case work, checking supervision and management oversight and generally gathering evidence. These days will be mandatory for the whole of SMT.

In addition to the above, there are a number of overarching themes that need to be addressed in order for the service to achieve the necessary improvements. These actions can be found in the final section of the plan.

1. First Response (MASH)

What do we want to see?

1. Professionals identify children and young people in need of help and protection. They make appropriate referrals to children's social care and are able to access social work advice. There is a timely and effective response to referrals, including out of normal office hours.
2. Professionals understand thresholds and this leads to children and families receiving effective, proportionate and timely interventions, which improve their situation.
3. Children and families experience child protection enquiries that are thorough and lead to timely action, which reduces the risk of harm to children.
4. Neglect, sexual abuse, physical abuse and emotional abuse are effectively identified and responded to. Children and young people who live in households, where at least one parent or carer misuses substances or suffers from mental ill-health or where there is domestic violence, are helped and protected.
5. Social workers recognise the factors that can make children more vulnerable and tailor their interventions appropriately. This includes, but is not limited to, disabled children, children who are privately fostered, children not attending school, vulnerable adolescents and children at risk of radicalisation or exploitation or becoming involved in gangs.
6. Children and young people who are missing from home, care or full-time school education (including those who are excluded from school) and those at risk of exploitation and trafficking receive well-coordinated responses that reduce the harm or risk of harm to them. For those who are missing or often missing, there is a clear plan of urgent action in place to protect them and to reduce the risk of harm or further harm.
7. Information-sharing between agencies and professionals is timely, specific, effective and lawful.

What needs to change?

1. Managers in the MASH ensure a timely and effective response to concerns regarding domestic abuse. The recently introduced daily triage meetings provide a forum for reviewing lower risk domestic abuse notifications from the police. These result in timely and appropriate decision-making about next steps, but no record is kept of these important decisions. This has the potential for the assessment of risk or need to not be informed by important historic information.
2. When children need protecting, the response is mostly effective, but the threshold for child protection intervention is not consistently applied. Although managers in the MASH recognise when children are at risk of, or have suffered from, significant harm, strategy discussions are not consistently held in a timely manner, which causes unnecessary delay and leaves children in situations of unassessed risk of potential harm. In addition, in a small minority of children's cases, not all relevant agencies are consistently engaged in strategy discussions, particularly health partners.
3. There is lack of consistent and effective management oversight and supervision.
4. Improve the quality of case recording to ensure that the reader can easily understand the application of thresholds as well as the presenting issues.

Ref	***Outcome***	***Lead***	***RAG***
1.1	Regular supervision takes place which promotes a reflective and analytical approach to children and families' needs. Supervision is utilised to increase workers' confidence, competence and their ability to think critically leading to improved decision making and effective interventions with children and families.	Team Manager and Assistant Team Managers	
1.2	Regular management oversight to be consistently evident in decision making and easily located on the child's case file.	Team Manager and Assistant Team Managers	
1.3	Cases consistently demonstrate an understanding of the history and take that into account when applying threshold.	Social Workers	
1.4	Analysis and recommendations consistently link to threshold guidance.	Social Workers	
1.5	All relevant agencies are consistently engaged in strategy discussions/meetings to inform identification of risks to	Head of First Response and	

	children, when assessing the need for child protection intervention.	Team Manager	
1.6	Staff understand and effectively apply threshold for child protection intervention to minimise delay in convening strategy discussions/meetings.	Head of First Response and Team Manager	

2. Assessment Teams

What do we want to see?

1. Assessments and plans are dynamic and change in the light of emerging issues and risks.
2. Assessments are timely and proportionate to risk, informed by research and by the historical context and significant events for each child.
3. Assessments lead to direct help for families if needed and are focused on achieving sustainable progress for children. Help given to families is proportionate to the level of need.
4. Information-sharing between agencies and professionals is timely, specific, effective and lawful.
5. Decisions are made by suitably qualified and experienced social workers and managers. Actions are clearly recorded. Systematic and effective management oversight of frontline practice drives child-centred plans and actions within the timescales appropriate for the child.
6. Children, young people and families benefit from stable and meaningful relationships with social workers. They are consistently seen and seen alone by social workers if it is in the best interests of the child. Practice is based on understanding each child's day-to-day lived experience. Children are safer as a result of the help they receive.
7. Children and young people are listened to. Practice focuses on their needs and experiences and is influenced by their wishes and feelings.

What needs to change?

1. Improve the quality of assessment and planning to ensure that risk is identified and responded to promptly, especially when risks escalate.
2. Ensure that assessments and plans identify the unique needs and experience of each individual child, particularly when they are part of a large family of brothers and sisters.
3. Assessments, including those of unborn children, are too descriptive of families' circumstances and some lack insight into the child's experience.
4. Ensure that care plans for children reflect their diverse needs and individual identities, and are realistic about achieving change. The quality of children's plans is too variable.
5. There is lack of consistent and effective management oversight and supervision.
6. Social workers do not demonstrate enough professional curiosity to find out what is happening for children to understanding what life is like for them.
7. The quality of children in need and child protection plans is too variable. Plans include too many actions, making it difficult for families and professionals to understand where to focus their attention. In addition, some plans do not explain the consequences or contingencies if the changes are not made.
8. The majority of care plans are not up to date or specific enough to understand the child's lived experiences or the risks and difficulties that they face.
9. Sometimes initial visits to children take too long and there can be gaps in visiting after initial intervention.

Ref	***Outcome***	***Lead***	***RAG***			
			Aylesbury	**Wycombe**	**Chilterns**	**Overall**
2.1	Regular supervision takes place which promotes a reflective and analytical approach to children and families' needs. Supervision is utilised to increase workers' confidence, competence and their ability to think critically leading to improved decision making and effective interventions with children and families.	Team Managers and Assistant Team Managers				
2.2	Regular management oversight to be consistently evident in decision making and easily located on the child's case file. Management oversight should demonstrate the clear rationale, assessment of risk and evidence base for decisions, including the anticipated impact on the child.	Team Managers and Assistant Team Managers				
2.3	Where required, cases consistently have succinct, clear chronologies and case summaries which support the reader to understand the child's current circumstances quickly.	Social Workers				

2.4	Assessments effectively identify and analyse risks and needs including current and historic factors, are individualised for each child in the family, take account of the child's identity and routinely consider parental capacity.	Social Workers				
2.5	Robust child-centred plans are SMART, reflect the needs identified in the assessment, timely and reviewed to mitigate against drift and delay.	Social Workers				

3. Help and Protection

What do we want to see?

1. Children in need of help and/or protection have a plan setting out how they will be helped, how their needs are going to be met and how risk will be reduced within the timescales appropriate for the child. If families refuse to engage, clear contingency plans are in place. These are based on the assessment of need and risks to the child.
2. Decisive action is taken to avoid drift and delay. Plans and decisions are reviewed regularly.
3. Alternative decisive action is taken if the circumstances for children do not change and the help provided does not meet their needs, or the risk of harm or actual harm remains or intensifies.
4. Children who need protection are subject to a child protection plan that identifies the work that will be offered to help the family and the necessary changes to be achieved within appropriate timescales for the child or young person
5. Plans address all the identified needs from assessments. They are clear and easily understood. Families understand what is expected of them, and others, and by when and what will happen if they fail to make the expected progress
6. Children, young people and families benefit from stable and meaningful relationships with social workers. They are consistently seen and seen alone by social workers if it is in the best interests of the child.
7. Children and young people are listened to. Practice focuses on their needs and experiences and is influenced by their wishes and feelings. Children, young people and families have timely access to, and use the services of, an advocate. Feedback from children and their families about the effectiveness of the help, care or support they receive informs practice and service development.
8. Information-sharing between agencies and professionals is timely, specific, effective and lawful.

What needs to change?

1. Where stable, frontline managers are in place it is bringing increased rigour in ensuring appropriate supervision and case direction takes place. There is more to do to ensure managers consistently identify and address drift, delay and poor practice.
2. Significant action has been taken to improve the quality of assessments, but too much variability remains. Assessments often lack sufficient analysis to adequately identify need, manage risk and take effective decisions regarding next steps.
3. There is lack of consistent and effective management oversight and supervision.
4. Assessments do not always capture the impact of identity, culture and diversity on children and families' experiences including family dynamics and history.
5. There is inconsistency in the quality and effectiveness of plans within Help and Protection. More work needs to take place to ensure plans focus on clear, time bound interventions aligned to assessed need. Plans should be closely monitored with regular analysis that considers the impact of intervention on improving outcomes.
6. Contingency plans are not always in place, making it difficult for parents and professionals to be clear about the consequences should progress not be achieved.
7. Social workers visit children regularly and in some cases build effective relationships with them, taking time to understand their experiences; however practice remains inconsistent with not all children visited in accordance with their needs and visits are not always appropriately recorded

Ref	***Outcome***	***Lead***	***RAG***			
			Aylesbury	***Wycombe***	***Chilterns***	***Overall***
3.1	Regular supervision takes place which promotes a reflective and analytical approach to children and families' needs. Supervision is utilised to increase workers' confidence, competence and their ability to think critically leading to improved decision making and effective interventions with children and families.	Team Managers and Assistant Team Managers				
3.2	Regular management oversight to be consistently evident in decision making and	Team Managers				

	easily located on the child's case file. Management oversight should demonstrate the clear rationale, assessment of risk and evidence base for decisions, including the anticipated impact on the child.	and Assistant Team Managers				
3.3	Cases consistently have succinct, clear chronologies and case summaries which support the reader to understand the child's current circumstances quickly.	Social Workers				
3.4	Robust child-centred plans are SMART, reflect the needs identified in the assessment, timely and reviewed to mitigate against drift and delay.	Social Workers				
3.5	Assessments are routinely updated every six months for those under 1, every 12 months for those over 1 and whenever there is a significant change in a child's circumstances. This includes those on CIN plans.	Social Workers				

4. Children in Care and Care leavers

What do we want to see?

1. Children and young people become looked after in a timely manner and in their best interests. Decisions that children should be in care are based on clear, effective, comprehensive and risk-based assessments, involving, if appropriate, other professionals working with the family.
2. All agencies and professionals work together effectively to reduce any unnecessary delay in receiving support and achieving permanence for children.
3. The wishes and feelings of children, and those of their parents, are clearly set out in timely and authoritative assessments and applications to court. Assessments of family members as potential carers are carried out promptly to a good standard.
4. Children's care plans comprehensively address their needs and experiences, including the need for timely permanence. Children's plans are thoroughly and independently reviewed with the involvement, as appropriate, of parents, carers, residential staff and other adults who know them. Plans for their futures continue to be appropriate and ambitious.
5. Children are seen regularly and seen alone by their social worker and children understand what is happening to them. Children have positive and stable relationships with professionals and carers who are committed to protecting them and promoting their welfare.
6. Children in care and care leavers are helped to understand their rights, entitlements and responsibilities. Children and young people have access to an advocate and independent visitor when needed. Care leavers are well-informed about access to their records, assistance to find employment, training and financial support.
7. The local authority celebrates the achievements of children in care and care leavers. It shows it is ambitious for their futures.
8. Children in care and care leavers are in good physical and mental health, or are being helped to improve their health. Their health needs are identified and met.
9. Children and young people make good educational progress at school or other provision since being in care. They receive the same support from their carers as they would from a good parent.
10. Care leavers have timely, effective pathway plans (including transition planning for children in care with learning difficulties and/or disabilities). These plans address all young people's needs. Reviews of plans for care leavers are thorough and involve all key people, including the young person, who understands their pathway plan and contributes to its development.
11. Information-sharing between agencies and professionals is timely, specific, effective and lawful.

What needs to change?

1. The detailed knowledge individual social workers have about their children is not always reflected in the information recorded on case files.
2. Poor historical leadership in both CiC teams has resulted in gaps in knowledge and practice amongst the workforce.
3. There is lack of consistent and effective management oversight and supervision.
4. Actions to address poor practice has led to turnover of staff and caseload pressures. This has not assisted in ensuring that there is consistency and good planning for our children and young people.
5. Achieving consistent levels of compliance has been and remains variable.
6. Audits and case sampling indicate that there needs to be improvements in understanding the history (chronologies), current assessments, permanency tracking and the ability to plan effectively. This is particularly apparent with older long term LAC.
7. Continue to improve the performance to ensure that the health needs of children in care are met through timely health assessments and care leavers have access to their health history.
8. Joint work with CAMHS has and is improving, particularly in relation to local LAC. Challenges remain in some instances for out of county LAC.
9. Responses to changing circumstances of children and young people are not always robust or timely enough.

Ref	Outcome	Lead	RAG		
			North	South	Overall
4.1	Regular supervision takes place which promotes a reflective and analytical approach to children and families' needs. Supervision is utilised to increase workers' confidence, competence and their ability to think critically leading to improved decision making and effective interventions with children and families.	Team Managers and Assistant Team Managers			
4.2	Regular management oversight to be consistently evident in decision making and easily located on the child's case file. Management oversight should demonstrate the clear rationale, assessment of risk and evidence base for decisions, including the anticipated impact on the child.	Team Managers and Assistant Team Managers			
4.3	Cases consistently have succinct, clear chronologies and case summaries which support the reader to understand the child's current circumstances quickly.	Social Workers			
4.4	The child or young person's circumstances are reflected in updated assessments prior to each review or equivalent. In the event of a trigger event (such as first missing episode or contextual safeguarding incident) the assessment is updated.	Social Workers			
4.5	Workers have sufficient knowledge and understanding of statutory procedures and compliance.	Head of Children in Care and Team Managers			
4.6	Effective direct work that is linked to the plan and current assessment of need must be evident, with impact on outcomes recorded on the child's case files.	Social Workers			
4.7	Health needs of children in care are meet through timely health assessments and care leavers have access to their health history.	Social Workers			
4.8	Monitoring and visiting arrangements to all children looked after in placements with parents are sufficiently robust to ensure their safety and progress until these arrangements are formally resolved.	Team Managers and relevant Head of Service			
4.9	An effective procedure for accommodating and supporting unaccompanied asylum-seeking children, including those who arrive outside office opening hours, to ensure that their immediate needs and vulnerabilities are appropriately assessed.	Service Director and Head of Children in Care			
4.10	Children in care have a clear permanency plan by their second CLA review.	Social Workers, Team Managers and Independent Reviewing Officers			

5. Child Protection Advisers and Independent Reviewing Officers

What do we want to see?

1. Independent Reviewing Officers (IROs) and Child Protection Advisers (CPAs) offer strong, positive challenge via flexible and supportive actions to drive forward good practice and bring effective, timely support which prevents unnecessary drift and leads to improved outcomes for children and families.
2. CPAs make safe decisions at conferences and ensure measures are put in place to effectively safeguard children and young people. There is evidence of parental and child participation (where appropriate) within conferences, documents and case recordings.
3. CPAs work closely with professionals and families to effectively quality assure initial arrangements for and continued tracking against the child protection plan, overseeing and scrutinising outcomes for the child.
4. IROs apply robust scrutiny which impacts the care planning and review process for each child. IROs are strong advocates for children and young people and work diligently to ensure the child's wishes and feelings are given full consideration and that the care plan fully reflects the child's current needs. They work collaboratively with children in care teams to prevent drift and delay and escalate, when necessary, to ensure positive outcomes for children.
5. Plans to make permanent arrangements for children and young people are effective and regularly reviewed by IROs.
6. IROs challenging any shortfalls in care plan actions and checking the progress of children in between their statutory reviews. They ensure that children are seen and supported to contribute to their review and to influence planning.
7. LADO expertise and advice is available to support other professionals in determining the best steps to take next where there are allegations or concerns about professionals or adults working with children. There is a timely and effective response to referrals and allegations.

What needs to change?

1. Evidence indicates that in the main, IROs and CPAs develop positive relationships with and detailed knowledge of their allocated children but they do not yet consistently challenge deficits in practice effectively. This means outcomes for children have, in too many cases, remained poor.
2. Limited management oversight across operational teams has led to drift, delay and poor practice in care planning. IROs and CPAs need to work more effectively to help secure the right outcomes for children and young people.
3. More work is required to ensure the resolution process for IROs is effective, perceived as constructive and results in proactive, timely responses positively impacting outcomes for children.

Ref	***Outcome***	***Lead***	***RAG***		
			CPAs	***IROs***	***Overall***
5.1	Regular supervision takes place which promotes a reflective and analytical approach to children and families' needs. Supervision is utilised to increase workers' confidence, competence and their ability to think critically leading to improved decision making and effective interventions with children and families.	Team Managers			
5.2	Regular management oversight to be consistently evident in decision making and easily located on the child's case file. Management oversight should demonstrate the clear rationale, assessment of risk and evidence base for decisions, including the anticipated impact on the child.	Team Managers			
5.3	Effective care plans and permanency plans aligned to the individual needs of the child/young person.	IROs			
5.4	Active participation from IROs in the updating of assessments prior to each children in care review.	IROs			
5.5	IRO contributions are focussed on improving outcomes for children and young people. Their level of expertise adds value to both casework and social worker development.	IROs			

5.6	IRO oversight considers both the health and educational outcomes of children in care and care leavers	IROs			
5.7	Robust child-centred plans that are SMART, reflect the needs identified in the assessment, timely and reviewed to mitigate against drift and delay.	CPAs			
5.8	Expert advice in relation to child protection work is consistently evident in case recording and the interventions of CPAs evidence impact on outcomes for children and young people.	CPAs			
5.9	Records of LADO strategy meetings reflect how the integrity of the investigation will be maintained and the decision making of what information to share with whom and when.	LADO			

6. Overarching themes				
Ref	***Outcome***	***Lead***	***Timescale***	***RAG***
6.1	A more stable and permanent workforce than the previous quarter, reducing our reliance on agency workers from 30% (October 2019) to 25% by April 2020 and 20% by September 2020.	HR Business Partner	April 2020	
6.2	What we expect good social work practice to look like in Buckinghamshire features in recruitment, induction and appraisal procedures.	HR Business Partner	February 2020	
6.3	First and second line managers have the knowledge, skills and ability to plan, direct and shape assessments that enable robust plans and strong risk management to be created.	Service Director and Heads of Service	February 2020	
6.4	A fit for purpose electronic recording system, processes and workflows that support good social work practice.	Service Director and equivalent from ICT and Business Intelligence	April 2020	
6.5	All performance management information is based on accurate data, and that managers and leaders use it effectively to measure and inform service improvements.	All CSC workforce and Business Intelligence	April 2020	
6.6	A co-orientated, multi-layered approach to auditing that provides a service wide view of the quality of practice.	Head of Quality, Standards and Performance and SMT	December 2019	Completed
6.7	Case files demonstrate good and effective knowledge of contextual safeguarding which is reflective of a skilled and aware workforce.	Service Director and Heads of Service	February 2020	