

BRISTOL SAFEGUARDING CHILDREN BOARD



Bristol Safeguarding
Children Board

making safeguarding everybody's business

ANNUAL REPORT 2016-17

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MESSAGE FROM THE CHAIR

It is the job of the Bristol Safeguarding Children Board to make safeguarding everybody's business. The children and young people who live or visit Bristol can only be safe and thrive when everyone is "looking out for them" and is prepared to act when they suspect or become aware of something of concern.

Elected officials and many people working in the private and public sector have defined responsibilities for the safeguarding of children. This is also true of the "third sector" which includes cooperatives, nonprofit organisations, social enterprises and charities. Our safeguarding board brings together senior representatives of those bodies to create a strong partnership of endeavor to discharge those duties effectively.

We recognise that members of the public play a most valuable role in being alert to the risks children may face. It is crucial that they know where to go and what to do if they are concerned about a child.

Our Shadow Board of young people undertook a survey of secondary school pupils and amongst the important findings was that those who received support predominantly valued support from their friends and families. This is an important message for how services are delivered. Our Shadow Board intend to design information for young people about what to do if a friend discloses issues of concern to them. It is heartening that in this way, and others, young people want to make safeguarding their business and are finding ways of doing so.

It is instructive also that the survey revealed the concern that was identified by most young respondents was about harm from their peers or friends. This finding may contrast strongly with the priority of concerns perceived by adults and is an important example of why the voice of children and young people needs to be hard wired into our work.

The work of the Board is underpinned by the painstaking efforts of a number of sub groups and working groups who convert strategic intents of the Board into tangible operational realities. I want to take this opportunity to commend and thank those workers and in particular the chairs of those groups who give so much of their time, effort and talent.

Organisations have experienced significant challenges in responding to the national programme of austerity and this has been a catalyst for restructure and reduction in a number of quarters. The Board provides an important forum to explore and share the impact of these developments on partnership arrangements for safeguarding. It would be disingenuous to say that fewer workers and the loss of experienced individuals does not have consequences for services provided. In this context robust and candid partnership arrangements serve as an important feature for stability.

The Board has remained sighted on the content and progression of the parliamentary bill which became the Children and Social Work Act 2017 when it received royal assent in April 2017. Once enacted this legislation is intended, amongst other provisions, to introduce opportunities for more diversely structured safeguarding arrangements for children. Bristol Safeguarding Children Board is well placed to examine these opportunities and pursue those arrangements that best serve the children, young people and communities of Bristol

SJ Lewis

Sally Lewis,

Independent Chair of Bristol Safeguarding Children Board

CONTENTS

1. ABOUT THE BOARD	5
INDEPENDENT CHAIR	5
JOINT BUSINESS UNIT	6
SHADOW BOARD	7
LAY MEMBER	10
BOARD STRUCTURE AND SUB-GROUPS	11
BOARD ATTENDANCE.....	13
VOLUNTARY AND COMMUNITY SECTOR REPRESENTATION	16
FINANCIAL ARRANGEMENTS 2016-2017	17
2. RIGOROUS TRANSPARENT ANALYSIS OF SAFEGUARDING IN BRISTOL.....	19
SNAPSHOT	19
SECTION 11 SAFEGUARDING AUDIT	20
REFERRALS AND ASSESSMENTS.....	22
CHILD PROTECTION PLANS.....	25
LOOKED AFTER CHILDREN.....	25

PRIVATE FOSTERING	27
LOCAL AUTHORITY DESIGNATED OFFICER	28
CHILDREN WITH DISABILITIES	29
CHILDREN MISSING FROM HOME OR CARE	29
FEEDBACK FROM YOUNG PEOPLE WHO GO MISSING	32
ENGAGEMENT WITH SCHOOLS	32
PREVENTING RADICALISATION	33
FEMALE GENITAL MUTILATION	33
DOMESTIC VIOLENCE AND MULTI-AGENCY RISK ASSESSMENT CONFERENCES (MARAC)	35
MULTI-AGENCY PUBLIC PROTECTION ARRANGEMENTS	36
3. NEW MODELS AND PILOTS	37
MASH PILOT 2016	37
CONNECTING CARE	39
4. SERIOUS CASE REVIEWS	40
CHILD SEXUAL EXPLOITATION - OPERATION BROOKE (MARCH 2016)	40
5. WEST OF ENGLAND: CHILD DEATH OVERVIEW PANEL	43
6. TRAINING AND ANNUAL CONFERENCE	46
7. PRIORITIES FOR 2017-2018	49

1. ABOUT THE BOARD

The BSCB is the key statutory body overseeing multi-agency child safeguarding arrangements across the City of Bristol.

Governed by the statutory guidance in Working Together to Safeguard Children 2015 and the Local Safeguarding Children Board (LSCB) Regulations 2006, BSCB comprises senior leaders from a range of different organisations. It has two basic objectives defined within the Children Act 2004; **to co-ordinate the safeguarding work of agencies** and **to ensure that this work is effective**

INDEPENDENT CHAIR

The Independent Chair of the BSCB is Sally Lewis OBE. She is supported by the Bristol City Council Service Manager for Safeguarding and Quality Assurance; a Safeguarding Business Unit Manager; and the BSCB's Joint Business Unit. The Independent Chair is tasked with ensuring the Board fulfils its statutory objectives and functions. Key to this is the facilitation of a working culture of transparency, challenge and improvement across all partners with regards to their safeguarding arrangements.

Whilst being unable to direct organisations, the BSCB Chair does have the power to **influence** and **hold agencies to account** for their role in safeguarding. This influence can touch on matters relating to governance as well as impacting directly on the welfare of children and young people.

The ultimate responsibility for the effectiveness of the BSCB rests with the political leaders of Bristol City Council and the Board's Chair is accountable to Chief Executive of Bristol City Council.

JOINT BUSINESS UNIT

As set out in the 2015-16 Annual Report, the BSCB's partner agencies agreed to fund the implementation for a Joint Business Unit in partnership with the Bristol Safeguarding Adults Board. This unit was implemented in September 2016. It consists of:

- 1 Business Manager
- 1 Policy and Projects Officer
- 1 Project Officer
- 0.5 Data Analyst
- 1.5 Administrators
- 1 Training Administrator
- 1 BSCB-only Inter-Agency Safeguarding Trainer

There have been delays in recruiting to the positions of the Data Analyst and half time administrator so these positions were vacant in 2016-2017.

Adam Bond, Business Manager, moved to a new post in November 2016. Becky Lewis was recruited to the position and joined the team in March 2017.



The team supports work across both the Children and Adults Safeguarding Board promoting better cross-working and responsible stewardship of resources through reducing duplication and Board administrative functions.

SHADOW BOARD

The BSCB Shadow Board is made up of young people from the participation groups across the city. These young people meet regularly with Senior Managers to advocate for children and young people, support decision making and hold senior managers to account.

This year the Shadow Board also undertook a Safeguarding Survey which was sent out to secondary schools across the city.

1,060 young people responded.

The Shadow Board found that young people in the city were most concerned about the following Safeguarding issues:

- 1. Peer pressure to do things you don't want to do (30% of respondents are concerned about this)**
- 2. Face-to-face bullying (29%)**
- 3. Racism (26%)**
- 4. Mental health (25.5%)**
- 5. Bullying online (21%)**
- 6. Self-harm (20.5%)**
- 7. Drug and alcohol (17%)**



Some Members of our Shadow Board 2017

Messages about Safeguarding from Children in Bristol

[Safeguarding] helps protect them from things that make you want to scream or cry.

[Safeguarding] is important and keeps you safe.

If you ever feel down always tell someone because they are there for you

It may sound like too much effort or not enough, but in the end/over time, it's worth it

Safeguarding is there to help people deal with their problems and support them if they have no-one else to turn to.

Use the internet safely but don't just stop using the internet because we are in 2017 so we all use the internet no matter what. So just use it carefully and think of what might happen in the future next time you put something mean or you receive something which you're not comfortable with .

Responses from 'Our Opinions' Safeguarding Survey 2017

8. Homophobia (15%)

9. Sexism/gender based violence (14%)

10. Eating disorders (13%)

When identifying who young people are concerned about, most young people said they were concerned about harm from their peers or friends. 40 young people said they were worried about harm from parents/carers.

Young people who received support predominately valued support from their friends and their family.

In response to this survey the Shadow Board have supported the BSCB to design a Conference for professionals in 2017-2018 looking at the link between identity and abuse. They have requested that there is a focus within the next Business Plan on Bullying within schools and online and this agenda is being taken forward by the Education Sub Group with a new programme of training and support in schools being rolled out in the next year.

The Shadow Board plan to design information for young people about Safeguarding to support them to know what to do if a friend discloses to them. They will be working with the BSCB Comms group in launching a new BSCB website next year, and improving the information available to the public.

LEAD MEMBER

The Lead Member for Children’s Services has the responsibility for ensuring the organisation fulfils their legal responsibilities to safeguard children and young people. Councillor Claire Champion-Smith was the Lead Member for the BSCB until the end of March 2017 when Helen Godwin became Cabinet member for Children’s Services.

“Undoubtedly, one of the most important roles for a local authority is to make sure that the children and young people who live in its area are safe and have the opportunity to develop and enjoy life. It may seem a commonplace to describe Bristol as a vibrant and diverse city but it is true. City life offers many opportunities for young people to explore and grow but it also has tensions and there is a darker side to life for some families. The work of the Safeguarding Board is an essential element in bringing together all those who work to protect children. Resources are tight in all public services so trust based on shared understandings and common purpose is essential. Without a strong and effective board, children can so easily slip through the safety net.

I would like to thank the Board for its work on behalf of young people and commend the work of the Shadow Safeguarding Board. To the best of my knowledge, this channel for the views of young people on being safe (safe in its widest sense) in the city is unique and influential. I trust you find this report wider ranging and interesting and a reminder that safeguarding is the responsibility of us all.”

Councillor Clare Champion-Smith (Bristol City Council, Lead Member for Children 2016-2017)

LAY MEMBER

“I was appointed as Lay Member of Bristol Safeguarding Children Board (BSCB) in the late Summer of 2016. Readers may ask why are Lay Members appointed to the Board? For the Board it is useful to have members who have an overall perspective, who are able to detach themselves from the interests or role of a particular organisation and who are able to ask the naïve but often valuable questions. For example, last Autumn when there was much national publicity given to concerns about safeguarding of young people in football clubs in the past, I asked if BSCB was confident that local sports clubs had clear safeguarding policies and procedures in place. My concern was followed up and I was reassured plus, if questioned, I could then reassure members of the general public. I also think that Lay Members are likely to ensure that the Board and the member organisations hear the voice of the child.

I am impressed by the commitment to ensuring that children and young people in Bristol are safe, from the many individuals and agencies involved in the safeguarding process and their willingness to share information and work together.

As my Lay Member role develops I look forward to a more active involvement with the general public to ensure that the safeguarding of children is fully understood to be everyone’s concern.”

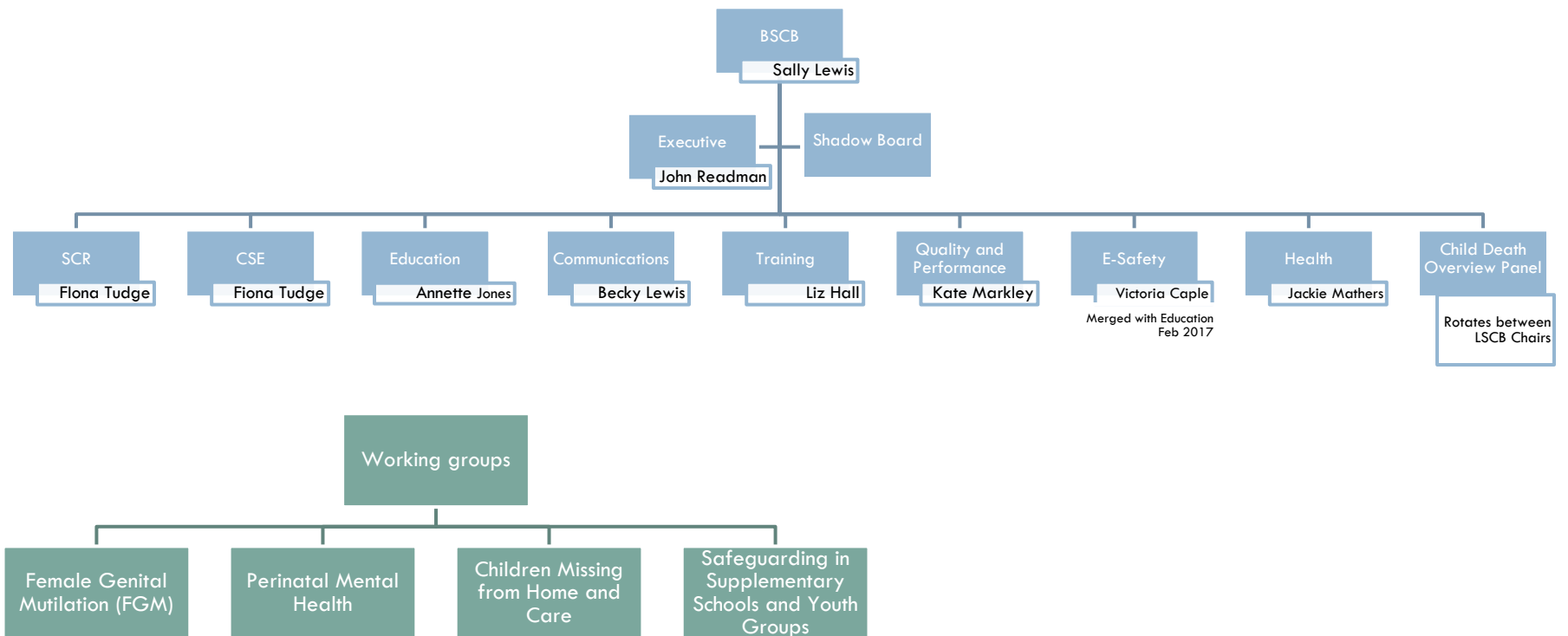
Patsy Hudson (Lay Member September 2016 – Current)

BOARD STRUCTURE AND SUB-GROUPS

The BSCB meets as a full Board four times a year at a minimum. At the full Board decisions are made on the Business Plan for the year, agreement is sought for new policies or procedures, reports and audits are scrutinized in respect of the effectiveness of safeguarding arrangements in the city, Serious Case Reviews are received and new operating models are reviewed and evaluated. Board members are senior decision-making managers from their agency who can be held accountable for practice within their organization or agree to align resources to respond to identified issues.

The full Board is supported through the Executive Group. This group is chaired by the Director for Children Social Care from Bristol City Council and is attended by the senior managers from the core funding agencies and the BSCB's Independent Chair. This group drives forward strategic improvement, maintains oversight of the resourcing of the Board, and ensures compliance with governance arrangements.

The operational work of the BSCB is undertaken by the Board's Sub-Groups and Working Groups. A Sub-Group is a permanent standing group of the Board and a Working Group is a time-limited group supporting the delivery in a specific area of practice. These groups are chaired by representatives from across the Board's organisations including Operational Managers from the police, Bristol City Council Social Care, Education and Bristol Clinical Commissioning Group. They are attended by representatives from across the city who ensure that the Strategic Business Plan for the year is delivered. This includes activities such as developing new resources, designing training programmes and undertaking multi-agency audits.



BOARD ATTENDANCE

P	Present
D	Deputy attended
A	Apologies sent
NA	No attendance or apologies
0	Not Board member at the time

Role	Agency	Apr-16	Jul-16	Oct-16	Jan-17	% attended by board member
Independent Chair	Independent Chair	P	P	P	P	100%
Clinical Director	Bristol Community Health	A	P	A	P	50%
Director of Transformation and Quality	Bristol CCG	P	D	P	P	75%
Chair	Education Sub Group	D	P	P	P	75%
Head of Learning Development and Safeguarding Senior Management Team	St Brendans 6th Form College	P	A	P	A	50%

Chief Nurse	UHB	P	D	P	P	75%
Head of Bristol and South Glos LDU	National Probation Service	P	P	NA	A	50%
Co-Founder and Trustee, Integrate UK	VCSE Advocate	P	P	A	P	75%
Cabinet Member	BCC	P	P	P	P	100%
Regional Assistant Director	Barnardo's	P	D	P	P	75%
Service Manager: Safeguarding and Quality Performance	BCC	P	P	P	P	100%
Interim Service Director	BCC	A	A	A	P	25%
Designated Nurse for Safeguarding Children	Bristol CCG	P	P	P	P	100%
Consultant in Public Health: Children and Young People	BCC	P	P	NA	P	75%
Strategic Director	People, BCC	A	P	A	P	50%
Chair	Quality & Performance Sub Group	P	P	P	P	100%
Designated Doctor for Safeguarding Children	Bristol CCG/Sirona	P	P	P	P	100%
Chair	Training Sub Group	P	P	P	P	100%
Assistant Chief Officer	BGSW - Probation	P	P	A	D	50%
Associate Director of Statutory Delivery, AHP and Social Care Leadership	Avon and Wiltshire Mental Health Partnership NHS Trust	NA	A	P	P	50%
Lay Member	Independent	0	P	P	P	75%

Service Director, Education & Skills	Education and Skills, BCC	A	P	P	A	50%
Service Manager - Crime and Substance Misuse Service	Safer Bristol	A	P	NA	NA	25%
Director of Nursing / Executive Lead Safeguarding Children	North Bristol NHS Trust	P	A	A	A	25%
Service Manager	Safeguarding Adults, BCC	P	P	P	P	75%
Service Manager	CAFCASS	NA	P	P	A	50%
Head of Public Protection	Avon and Somerset Constabulary	P	P	D	D	50%

VOLUNTARY AND COMMUNITY SECTOR REPRESENTATION

Voscur is a council for voluntary service and a development agency for the voluntary, community and social enterprise (VCSE) sector in Bristol. Voscur is committed to supporting and improving safeguarding practice across the VCSE sector in Bristol. This is done in a number of ways, including working directly with local groups on relevant policies and practice, to more strategic level work, bringing the voice of the VCSE to key decision making bodies/working groups in the city.

Voscur recruits and supports two VCSE sector advocates on the BSCB. These Advocates are elected by local organisations that make up Voscur's Children and Young People's Network. Advocates take an active part in the work of the BSCB and its subgroups, highlighting issues pertinent to the VCSE sector and giving a voice to the sector: Advocates then feedback relevant information to the sector via regular reports. Voscur has also worked with BSCB to promote relevant training and safeguarding resources to the VCSE sector. This includes Safe Club courses as well as the BSCB inter-agency training brochure.

In 2016-2017 one of the VCSE positions on the BSCB has been unfilled. A recruitment process is being undertaken by Voscur early in 2017 to fill this role.



FINANCIAL ARRANGEMENTS 2016-2017

Expenditure		Income	
Employment Costs		Partner Contributions	
BSCB Team Salaries	67,946	Bristol City Council:	153,345
BSCB Independent Chair	7,885	North Bristol NHS Trust	15,187
BSCB Staff training & expenses	6,679	Bristol CCG	27,776
Training Team Salaries	67,024	National Probation Service	1,780
		Avon & Somerset Constabulary	16,203
Total Employment Expenditure	149,534	Avon Fire & Rescue	1,152
		CAFCASS	550
Serious Case Reviews		YOT	2,376
SCR Fees 2016/17	46,258	15/16 unpaid contribution adjustment	-2,838
SCR Reviewers Expenses	1,192		
Associated SCR Support Costs	1,337	Total Partner Contributions	215,531
Total SCR Expenditure	48,786	Other Income	
		Training & Conference	96,591
Training & Conference		Surplus Brought Forward from 2015/16	58,932
Training Venue Hire & hospitality	21,615		
Training Team Office Supplies and Equipment	222	Total other income	155,523
BSCB Conference Speakers & Expenses	5,652		
Total Training & Conference Expenditure	27,489		

Contributions to other projects		Balance at Year end	
Safeclub VCS Training Grant	5,880.00	Total available (Contributions & other income)	371,053
University Of Bristol - Child Death Review Service 2016/17	12,048.47	Surplus	-93,281
Contribution to development of South West CPP Website	4,174.24		
Development of the BSAB / BSCB independent website	4,059.00		
Total Contributions	26,162		
Other Expenditure			
Conference attendance by Independent Chair	620.00		
Room hire, catering & equipment	1,127.31		
Our Opinions Survey Vouchers	506.45		
ICT & Phones	1,212.55		
Support Services from Bristol City Council	22,335.00		
Total Other Expenditure	25,801		
Total Expenditure	277,772		

2. RIGOROUS TRANSPARENT ANALYSIS OF SAFEGUARDING IN BRISTOL

SNAPSHOT

23% of children living in poverty

30 unaccompanied child asylum seekers

89 children & young people flagged at high risk of CSE by Bristol City Council Social Care and Barnardo's BASE Specialist CSE Project

800 episodes of children going missing from home or care

>21,000 contacts with Bristol First Response

23% re-referrals

553 Children on a Child Protection Plan in 2016-2017

2,405 open Children in Need cases as of March 2017

379 children in need with a disability supported by the 0-25 service

710 children & young people looked after

35 children permanently excluded from school

802 children in **429** families in temporary accommodation due to homelessness

370 children and young people living in families with domestic violence heard at MARAC meetings with social care involvement

3,392 contacts with children's social care concerning domestic abuse or violence

1,901 child victims of crime recorded by the police

SECTION 11 SAFEGUARDING AUDIT

Section 11 (s.11) of the Children Act 2004 places a statutory duty on key organisations to make arrangements to ensure that in discharging their functions they have regard to the need to safeguard and promote the welfare of children. Working Together to Safeguard Children (2015) recommends that Local Safeguarding Children Boards should assess organisations' compliance with s.11.

For the audit in 2016 the four LSCB's in the ex-Avon area agreed to undertake a joint audit given many members working across multiple areas. The submissions have been evaluated, to ensure that all questions have been answered and appropriate evidence provided. In 2016, there were 19 agencies represented on the LSCB that have a duty in Working Together to Safeguard Children 2015 to submit a Section 11 response. This includes two Associate members (British Transport Police and Avon Fire & Rescue). 18 responses were received with the Youth Offending Team being the only member to not provide an Audit response.

Each organisation provided a rating for eight areas of work:

1. Senior Management commitment to the importance of safeguarding and promoting children's welfare
2. A clear statement on the agency's responsibilities towards children is available for all staff
3. A clear line of accountability within the organisation for work on safeguarding and promoting the welfare of children
4. Service development takes account of the need to safeguard and promote the welfare of children and, where appropriate, the views of children and families
5. Training and Supervision
6. Safer recruitment procedures, including vetting procedures, and those for managing allegations, are in place
7. There is effective inter-agency working to safeguard and promote the welfare of children
8. There is effective information sharing

The scores used for self-assessment reflected the current Ofsted grading:

Areas of strength for Bristol are:

The three Standards in which organisations working in Bristol self-assessed as the strongest are:

- A clear line of accountability within the organisation for work on safeguarding and promoting the welfare of children
- Senior Management commitment to the importance of safeguarding and promoting children's welfare
- There is effective Information Sharing

Areas of weakness for Bristol are:

The three main areas of self-assessed weakness identified are:

- Effective inter-agency working to safeguard and promote the welfare of children (particularly focused on areas of audit, management oversight and scrutiny)
- Effective training on safeguarding & promoting the welfare of children for all staff working with or, depending on the agency's primary functions, in contact with children & families
- Safer recruitment procedures including vetting procedures and those for managing allegations are in place

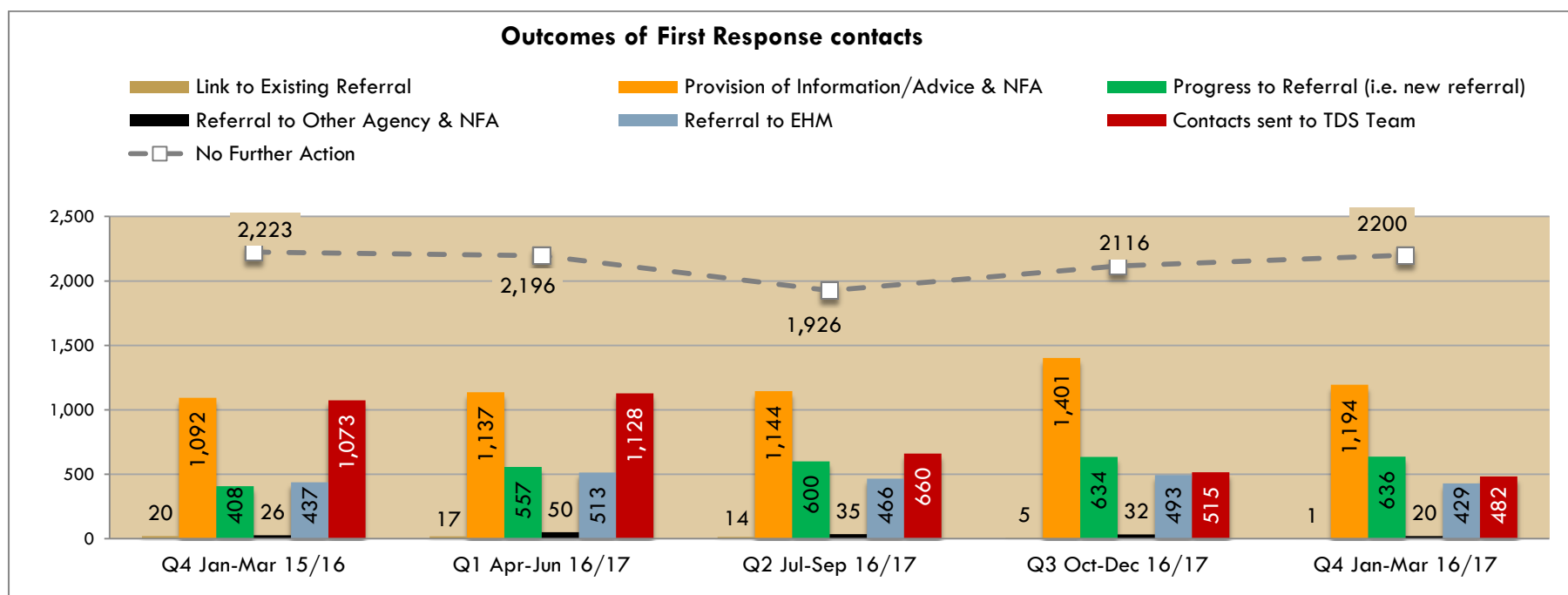
The Section 11 Audit undertaken will provide a baseline to build from. In 2017/2018 Support and Challenge Inspections will be undertaken to ensure progress in line with the agencies' proposed actions plans.

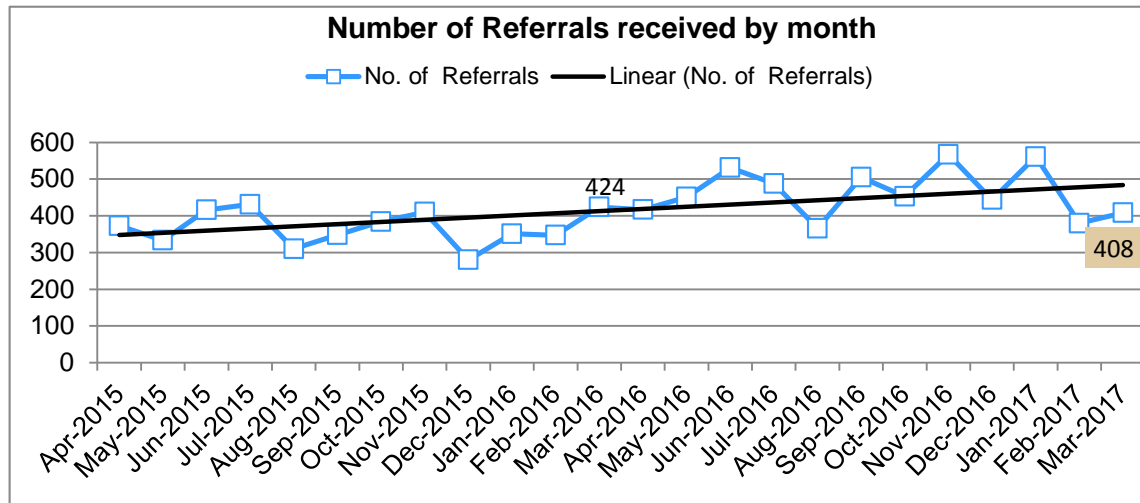
The BSCB Training Team has a new Trainer from April 2017 and will undertake a needs assessment for inter-agency training in city to launch a new Training Strategy at the end of the year. An accredited Safer Recruitment training course will be offered by the BSCB Training team in 2017/2018.

REFERRALS AND ASSESSMENTS

In our last Annual Report we reported on a reduction on the number of contacts with First Response, the front door to Bristol City Council's Early Help and Social Care services. This reduction has been sustained. The Board has been concerned however about the proportion of contacts with First Response where there is no role identified for Children's Social Care or Early Help. A multi-agency audit was undertaken

in February 2017 to explore this. The audit found that decision-making by social care was consistent and appropriate to the information provided by that the quality of the referrals received by Children’s Social Care from partner agencies was poor. This is an area of significant concern for the Board as it takes significant resource for First Response to filter these which could be used to provide direct services to children at risk. A response plan has been implemented including training across the partnership to improve referral quality.

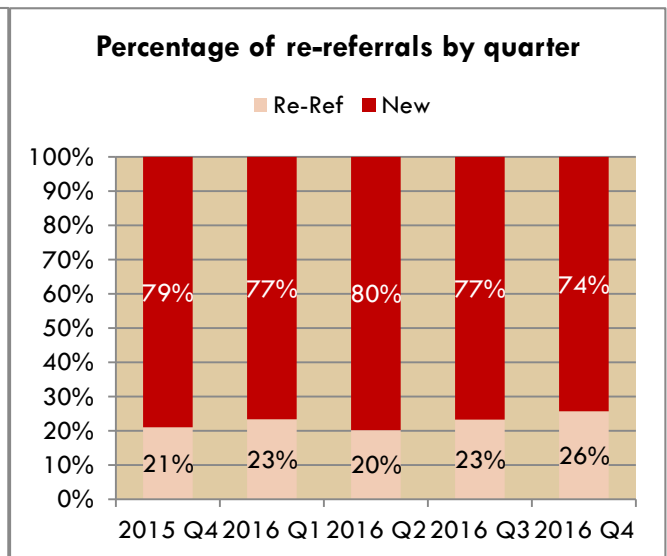
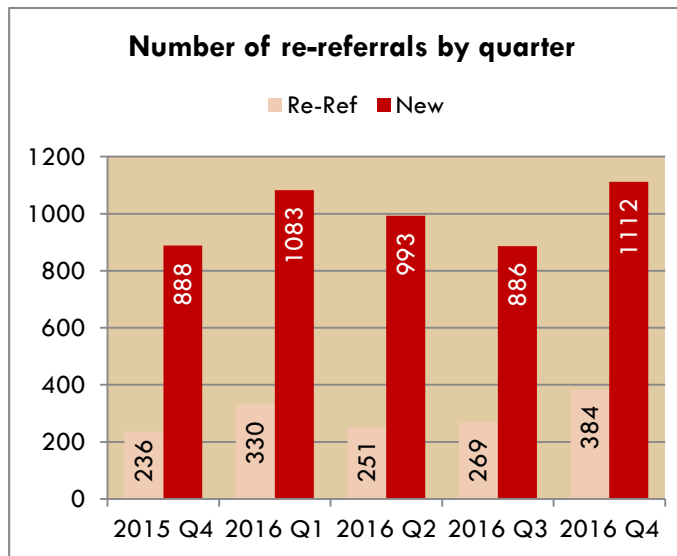




There has been a continued upward trend in the number of contacts progressed as referrals into Children’s Social Care across the last two years.

This is at the same time as Social Workers’ caseloads are higher in Bristol than the national average and vacancy rates in the city, like in many other areas, are increasing. The Board recognises that this puts increased pressure on social care resources particularly at a time when other provision in the city has shrunk.

If a child has had a referral in the 12-month period prior to the new referral, then the new referral is counted as a re-referral. Throughout the year re-referral rates for children have remained above one-fifth of the referrals made to Children Social Care with an annual average of 23%. This is the same re-referral rate as evidenced in 2015-2016 and so shows no deterioration in this regard.



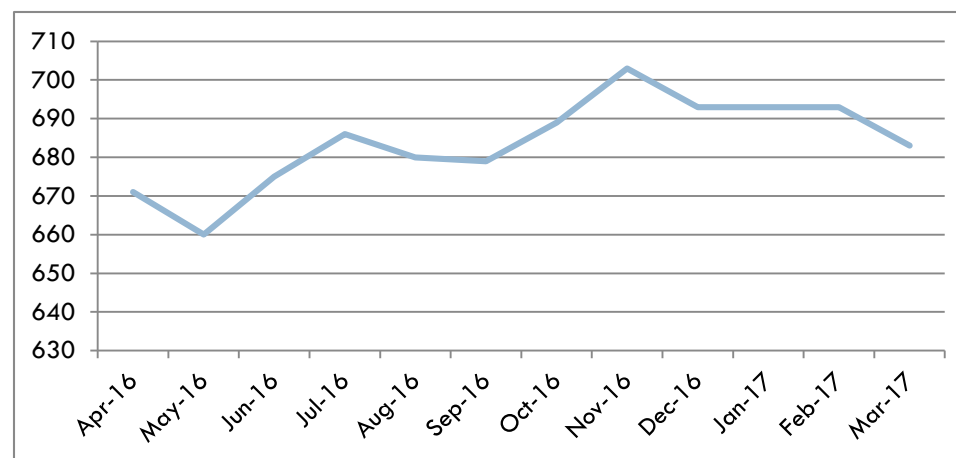
CHILD PROTECTION PLANS

The number of children on Child Protection Plans has remained relatively stable across the year with an average of 480 children on Child Protection Plans at any point. This means that this year in Bristol 53.5 out of every 10,000 children in Bristol are on a Child Protection Plan.

The Quality and Performance Sub Group have raised concerns that Bristol have consistently had higher than the national average of children on Child Protection Plans for more than 2-years with an annual average for 2015-2016 of 6.8% of children whose plans ended having been subject to a Child Protection Plan for more than 2 years. We have also seen an increase in the number of children who have been subject to a child protection plan more than once, with 23% of children with Child Protection Plans in March 2017 having had more than one plan, and a deterioration in the number of Child Protection Conferences (both Initial and Review) being held within the statutory timescales. This has been escalated to the local authority and an audit of Child Protection Conferences by the multi-agency Quality and Performance Sub Group is planned for the first quarter of 2017-2018.

LOOKED AFTER CHILDREN

This year has seen the start of the re-modelling of the children in care service and the care leaver service. The remodel integrates the Looked After Children and Care and After services for children and is designed to reduce the need for changes of social worker.



As can be seen in the graph above, the number of children looked after in Bristol has fluctuated between 660 and a high of 704 during 2016-2017. This is an annual average of 76.6 children per 10,000 who are looked after which is similar to the city’s statistical neighbours.

Every child has an Independent Reviewing Officer (IRO). The caseloads for this team has been lower this year with more resources provided. This has brought their caseloads in line with the national recommendations. BSCB received reports that indicated greater level of challenge evidence in case notes from IROs to social workers which is positive development.

A lack of life story work, life storybooks and later life letters is an identified area requiring improvement in Bristol. IROs now keep cases open following adoption when life story and later life letters have not been completed in order to ensure this is in place. Bristol City Council have reported this delay is due to capacity issues for their social workers which remains a challenge due to an increased number of agency social workers and staff vacancies in social care teams this year.

Placement type (March 2017)	Number of Children
Agency Foster Care	164
Bristol Residential	68
Family or Mother & Baby Unit	4
In-House Foster Care	403
Non-Bristol Residential	36
Parent/Independent Living	14
Placed for Adoption	15
Secure	3
Total	707

19 children were adopted this year which is a significant reduction on the last two years where 46 children were adopted each year. 39 children were made subject to care arrangements under Special Guardianship Orders.

Over the year an average of 13.1% of looked after children were placed more than 20 miles away from their families. At the end of 2016-2017, 82% of looked after children in Bristol were placed with foster carers, the majority with in-house foster carers. This evidences that the improvement of increased numbers of young people being placed in foster care settings has been sustained since our last annual report, and remains above the national average.

Placement stability has remained a focus for Bristol City Council. The percentage of children looked after aged under 16 at year end who had been looked after continuously for at least 2.5 years who were living in the same placement for at least 2 years, or are placed for adoption and their adoptive placement together with their previous placement together last for at least 2 years has been maintained at close to 80% throughout the year which is above the England average of 68% (March 2015).

There was an increase in the numbers of children looked after who had had more than three placements reported in the BSCB's 2015-2016 Annual Report. This dropped from a peak of 10.3% of children looked after in April 2016 to a low of 7.5% of children looked after in March 2017 showing an improvement across the year in placement stability for children.

PRIVATE FOSTERING

Despite work to raise awareness of private fostering continuing this year, building on last year's work, numbers of children in private fostering arrangements remain low and the BSCB knows that many continue not to be referred to social care. This trend is in line with patterns nationally. Children's Social Care continue to work with partners in core cities and statistical neighbors in order to learn from each other and share ideas of how to improve this. Children's Social Care have worked on improving the timeliness of visits to children in private fostering arrangements this year to ensure that they are responded to quickly.

This year there were 41 private fostering arrangements recorded in Bristol (there were 43 in 2015-2016).

LOCAL AUTHORITY DESIGNATED OFFICER

The role of LADO is to manage allegations and concerns regarding people who are in a position of trust. The LADO provides advice and guidance on how such allegations should be investigated and has overall responsibility for the management and oversight of all allegations. The LADO is involved from the initial reporting of the allegation through to the conclusion of the case.

Aside from 2014-15, over the last five years there has been an upward trend in referrals to the Bristol LADO. This is encouraging as it indicates an improvement in the identification and reporting of concerns regarding individuals in a position of trust. The increase in referrals may also be due to the LADO providing training to a variety of different agencies to increase their knowledge and understanding of their role and the process of allegation management.

The majority of referrals to the LADO have been in relation to allegations of physical abuse. The majority of these relate to the education sector. This is consistent with the last six years and reflects the pattern locally and nationally. The second highest category related to allegations of a sexual nature. The third largest category of referrals is “other” allegations. This category includes suitability and conduct issues, for example where there are concerns about issues in a person’s personal life that bring into question their suitability to work with children (i.e. drug or alcohol use, perpetrating violence).

For the second year the LADO raised concerns with the BSCB about LADO referrals from supplementary schools and volunteer-led organisations or groups where there is an absence of safeguarding procedures and policies in place. This is a priority for the BSCB to address in 2017-2018.

The work of the LADO has continued to be supported through close links and co-training with the Safeguarding Education Team.

CHILDREN WITH DISABILITIES

379 children were supported by the integrated 0-25 service this year. An audit undertaken by the Quality and Performance Sub Group identified very low numbers of children in this service who were subject to a Child Protection Plan. This raised concern for the Board given national research trends which show that disabled children and adults are more likely to experience abuse.

Subsequently cases within the service were reviewed and support given by the Quality and Assurance team at Bristol City Council to ensure that Child Protection issues were not being masked by the level of support being provided to families with children with disabilities. Subsequently there has been a small increase (to 6) of children identified in this service as meeting the threshold for a Child Protection Plan. Internal audit findings have been shared with the Quality and Performance Sub Group and work in this area remains a priority for 2017-2018.

The Board is committed to supporting professionals in the city to improve the safeguarding of this vulnerable group of children including the development and launch of an updated multi-agency guidance for Safeguarding Disabled Children and a newly designed training offer for professionals.

CHILDREN MISSING FROM HOME OR CARE

Total number of Bristol children missing from home or care in last 12 months	427
Total number of times children went missing in last 12 months	801

Children who go missing should be offered an Independent Return Home Interview to explore the reasons they went missing and put in place plans to reduce the risk of them going missing again. The Missing Task Group monitors this data to ensure children are receiving the support.

Month of missing data	Total forms	No. of children meet		Interview offered?		Percentage	Child accepted?		Percentage of return interviews accepted **
		No	Yes	No	Yes		No	Yes	
April	52	26	26	26	26	100%	9	17	65%
May	69	27	42	28	41	98%	16	25	61%
June	104	54	50	54	50	100%	23	27	54%
July	70	36	34	36	34	100%	17	16	47%
August	49	21	28	21	28	100%	10	16	57%
September	42	16	26	17	25	96%	8	17	68%
October	65	33	32	33	32	100%	15	17	53%
November	85	41	44	40	45	102%	18	27	60%
December	68	30	38	31	37	97%	19	18	49%
January	86	36	50	36	50	100%	24	26	52%
February	42	15	27	18	24	89%	8	16	67%
March	68	25	43	27	41	95%	12	29	71%
Total	800	360	440	367	433	98%	179	251	58%

The number of Return Interviews accepted by children in relation to the number offered averages at 58% over 2016/17. Ofsted data in 2016 reported a national average of 25%. Although 58% is considerably higher than this the Local Authority and Barnardo's Safe Choices Missing Project are working hard to increase this percentage. There is a focus on working with parents to ensure that children are permitted and encouraged to engage with a Return Interview. Where children do not want to engage with a Return Interview Barnardo's Safe Choices project will share this information with the child's school to allow the school to identify risk and/or provide support.

The analysis of push and pull factors indicate the highest number of children who go missing are running to friends and peer influences. This factor has been discussed in depth and a possible hypothesis is that some of these incidents may have been more accurately recorded as child sexual exploitation. A prompt has now been put into the Return Interview form on LCS to think about CSE and also provides a link to the CSE checklist embedded in LCS. A tab for criminal exploitation has also been added and will now appear in the report.

Issues of bullying have been identified as a factor for children going missing. This links with priorities of the Shadow Board and is a priority for 2017/2018 BSCB Business Plan. Representatives from the School Safeguarding Education team and The Hope Virtual School sit on the task group and contribute to improving the experiences of children within school who are reporting they are running away due to school issues.

The strategy group requested data for a 3 month period to analyse the number of children who did not meet the criteria for a Return Interview but then went missing again. The purpose of this data was to understand the issue and measure the impact of not offering every child who goes missing a Return Interview. Over a 3 month period there were 107 children who went missing that did not meet the criteria for a Return Interview and of those 107, 42 children went missing within a 6 month period.

Barnardo's Safe Choices reports on Return Interviews being offered within 72hrs as indicated within the statutory guidance. Attempts are made to contact the child within 72 hrs but it is not always possible to complete the Return Interview within this timescale.

FEEDBACK FROM YOUNG PEOPLE WHO GO MISSING

At the conclusion of every Return Interview young people are asked if there is anything that would support them with regard to service provision. Very few young people choose to comment on this but there are two recurring comments. Firstly a request for out of hours provision so that there is somewhere safe for young people to go to or people to call and secondly for advice being given to parents/carers to ensure their responses to a child returning from a missing episode supports the young person to remain at home and is not one based on anger (that has come from worry).

ENGAGEMENT WITH SCHOOLS

The Board have developed and implemented a new reporting system in 2016-2017. This new system means that Schools are now receiving information on a daily basis of any child that has gone missing the previous night. This will allow the schools to provide immediate support and prioritization on these children.

The BSCB has identified that further work is required to ensure that robust arrangements are in place for Bristol children who are placed out of Bristol being offered a Return Interview if they go missing. Attempts have been made to build this into arrangements when commissioning a placement or undertaking the Return Interviews if children are not placed a significant distance from Bristol. However there is not a robust system in place. This has been identified as an issue across the South West region and work is being undertaken across the region to put local agreements in place.

PREVENTING RADICALISATION

In 2015-16 there were 60 referrals in total assessed and reviewed. This compares to 37 in 2016-17. Of these referrals 27 were cases involving young people (45%). This compares to 16 (43%) in 2016-17.

Cases where there is a high risk of radicalization are managed through the Channel Panel process. In Bristol numbers of children and adults meeting this threshold has been very low. There has only been one case relating to a young person in 2016-17. In this case, the level of vulnerability and risk significantly reduced and the young person was successfully exited from Channel.

The Prevent agenda continues to be overseen by Safer Bristol and updates reported to the Board's Quality and Performance Sub Group.

FEMALE GENITAL MUTILATION

Bristol continues to be recognised as leading the way with our coordinated response to ending Female Genital Mutilation (FGM) and engaging with members of communities affected by FGM through the FGM Delivery and Safeguarding Partnership. This year the BSCB's partner Bristol Clinical Commissioning Group have been actively involved in the Bristol FGM agenda with the re-commissioning of the Rose Clinic. The Bristol Community Rose Clinic is a community-based service that provides specialist care and support for Bristol women who are experiencing problems because of FGM.

Summer 2016 saw young people leading the way in the End FGM Summer Campaign. A range of events including a young people's march across the city to End FGM following in the footsteps of a march held six years ago by adult women in the city. The Summer Campaign events showcased the work of young people committed to raising awareness and stopping FGM in their community. At the launch of the



Summer Campaign at the University of the West of England, members of Empowering - the youth arm of campaigning group FORWARD - shaped the agenda for the day with the support of Bristol's FGM Delivery and Safeguarding Partnership. The summer campaign was aimed at members of affected communities, health professionals – including social workers, doctors, medical students and hospital staff - as well as researchers, students and the general public. The work was supported by the Safeguarding Education Team who engaged with schools across the city to increase identification and confidence in working with children and families in combatting the issue. This work sits under the Bristol Zero Tolerance initiative which is working towards Bristol becoming a city free from gender-based violence, abuse, harassment and exploitation.

Photo: Chris Cronin/FORWARD

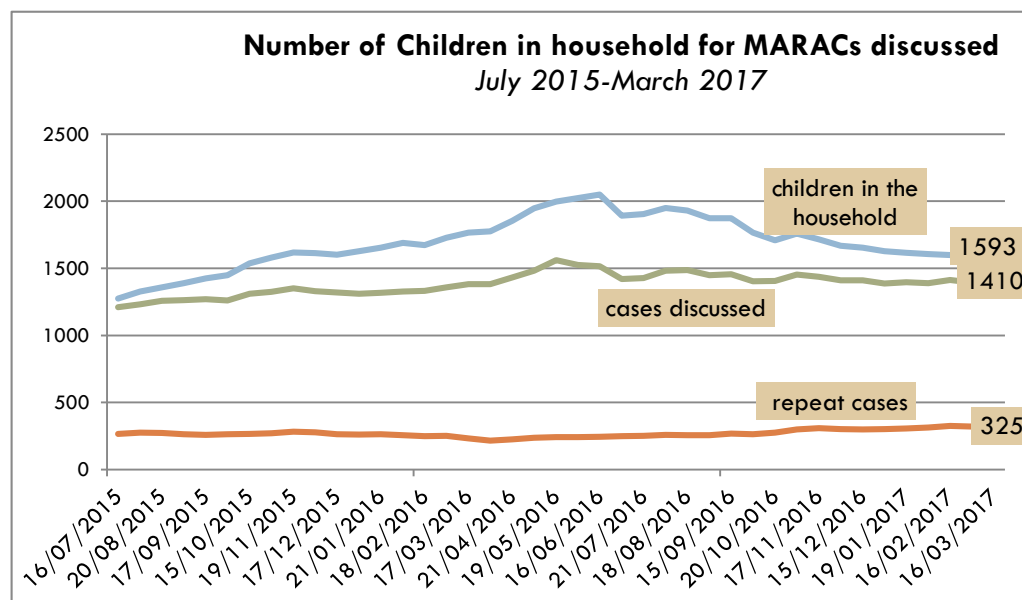
At the Launch BSCB Chair, Sally Lewis said “The voice of young people is central to this year's summer campaign, and they have the support of many organisations in the city. The lack of knowledge and reluctance to talk about FGM is being chipped away each year with more people joining the call to end the practice. We should be very proud of Bristol for leading the way with this.”

The Quality and Performance Sub Group undertook a Child Protection Incident Review of the management of a case of FGM. This is due to be disseminated to the BSCB in early 2017-2018 and will set out recommendations for the BSCB going forward.

A key piece of work undertaken by the BSCB in 2016-2017 was the development of new FGM guidance and processes for staff. This guidance sought to maintain a proportionate response to concerns of FGM and enable professionals to undertake more evidence informed risk assessments. This guidance is due to be ratified and disseminated by the BSCB in the first quarter of 2017-2018.

DOMESTIC VIOLENCE AND MULTI-AGENCY RISK ASSESSMENT CONFERENCES (MARAC)

MARAC is a meeting where information is shared on the highest risk domestic abuse cases between representatives of local police, health, child protection, housing practitioners, Independent Domestic Violence Advisors (IDVAs) and other specialists from the statutory and voluntary sectors. After sharing all relevant, the representatives discuss options for increasing the safety of the victim and turn these into a co-ordinated action plan. The primary focus of the MARAC is to safeguard the adult victim. The MARAC also makes links with other structures and processes to safeguard children and manage the behaviour of the perpetrator.



The data presented in the table represents the total number of children in households reviewed at a MARAC since July 2015. 1,593 children have been discussed in this period. The BSCB continues to be concerned about the lack of change in the number of children who have been heard at repeat MARACs. This was identified in the 2015-2016 Annual Report and the data set below highlights that this is unchanged. The BSCB have also been made aware of a trend for increasing numbers of MARAC referrals continuing. This is mirrored in Bristol’s adjoining local authorities. A review of the delivery of MARACs across the constabulary area has been undertaken and new delivery models are being considered in 2017-2018. The BSCB have implemented greater oversight of this process with the Business Manager joining the Bristol MARAC Steering Group and new operating models to be presented to the BSCB full Board given the risk to children in the city if the arrangements are not robust.

MULTI-AGENCY PUBLIC PROTECTION ARRANGEMENTS

Multi-Agency Public Protection Arrangements (MAPPA) are the statutory measures for managing sexual and violent offenders. The Police, Prison and Probation Services (Responsible Authorities) have the duty and responsibility to ensure MAPPA are established in their area and for the assessment and management of risk of all identified MAPPA offenders. Other agencies including children's services have a duty to co-operate with MAPPA.

There are three categories of violent and sexual offenders who are managed through MAPPA:

- Category 1: Certain Sex Offenders are required to register their name, address and other personal details with the police. The length of time an offender is required to register with the police can vary between 12 months and life.
- Category 2: Certain Violent Offenders who have been sentenced to 12 months or more in custody, or to detention in hospital and who are now living in the community subject to probation supervision.
- Category 3: Other Dangerous Offenders who have committed an offence in the past and who are considered to pose a risk of serious harm to the public.

All MAPPA offenders are assessed to establish the level of risk of harm they pose to the public. Risk management plans are then worked out for each offender to manage those risks. MAPPA allows agencies to assess and manage offenders on a multi-agency basis by working together, sharing information and meeting, as necessary, to make sure that effective plans are put in place. Offenders are managed at one of three levels, based on the level of multi-agency co-operation required and can move up and down the levels as appropriate. In 2015-2016 there were 1,848 MAPPA Offenders across the five Avon and Somerset local authorities.

The MAPPA Annual report is not available for 2016-2017 as it will not be published until later in the year. The report for 2015-2016 is available here <https://www.gov.uk/government/statistics/multi-agency-public-protection-arrangements-mappa-annual-report-2015-to-2016--2>

3. NEW MODELS AND PILOTS

MASH PILOT 2016

Bristol City Council has worked with key partners to develop a Multi-Agency Safeguarding Hub (MASH) arrangements for Bristol. The Bristol MASH Project Group set up a task group in 2015 to determine whether there should be MASH arrangements in Bristol. The task group looked at national best practice and designed a pilot that would respond to local needs and drivers for change. The MASH pilot was designed to deliver key benefits around:

- improved risk management and safety of children and adults
- better and more timely decision-making using shared information
- more efficient use of resources for research and decision making
- improved satisfaction of referrers and confidence of referring agencies
- improved pathways to early help services to better manage demand

The pilot ran for three months from June 2016 to end of August 2016, to coincide with the fixed-term appointment of 1 full time equivalent health professional who acted as the health services researchers and decision-makers for the MASH. BSCB members were provided with a mid-pilot progress report in July 2016 and the findings of the pilot in January 2017.

The MASH received children and adult cases where there were potential safeguarding concerns **and** uncertainty if they met the threshold for Section 47 enquiries (or Section 42 inquiries for adults). The three core agencies (police, health services and local authority) provided research and made joint decisions for the MASH. Avon and Wiltshire Mental Health Partnership also provided adult mental health information on request and attended the weekly adult MASH discussion where possible.

A total of 83 cases were referred to the Children's MASH from a full range of referring agencies. MASH decisions were found to have been made in a timely way, the majority of which made within 3 working days from referral.

MASH decisions had a significantly lower No Further Action rate than for the Threshold Decisions Service (TDS) for the same period. A higher proportion of cases resulted in actions for participating agencies, which reflected the collaborative nature of the decision making process. Contrary to prior concerns, there was no increase in referrals to children's social care, although 31% of cases being referred to TDS suggests that further work was still required to form a decision for a significant proportion of cases after the MASH process.

Through discussion with practitioners, audit and analysis of data, the following benefits of the MASH have been identified:

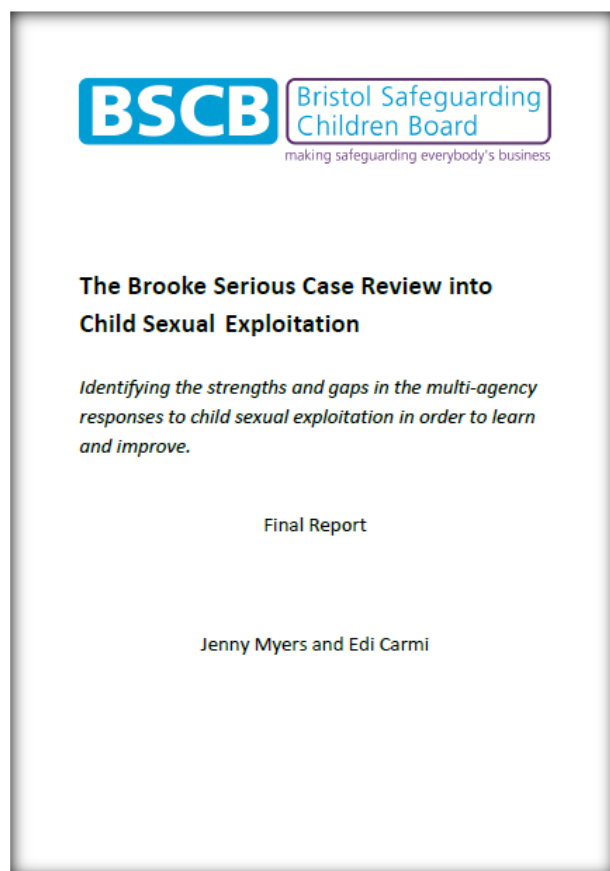
- **Improved access to information** to inform decision-making, particularly having better access to health services and mental health information.
- **Better interpretation of information** to understand risks and strengths relevant to each case through the input of the health practitioner.
- **Shared ownership of decisions.** MASH decisions are multi-agency and have been made by consensus with no disputes.
- **Improved multi-agency response** to safeguarding concerns. Analysis of MASH decisions show a good spread across single agency actions for health services, referrals to social work, and referrals to early help.
- MASH discussions are also promoting a **better inter-agency understanding** of approach and assessment of risk.
- Shared information and decision-making can lead to **preventative plans that avoid escalation to statutory social work services.**
- **Improved consultation with and data collection** from other agencies.

Having received the Findings of the MASH Pilot, BSCB Board members agreed with the suggested implementation plan for the MASH to be established permanently, with resolution of the five issues above. The Bristol MASH is due to be launched in July 2017.

CONNECTING CARE

Information sharing across health agencies and children's social care has been highlighted in many Serious Case Reviews as a barrier to Child Protection. Connecting Care is a local electronic patient record that allows health and social care professionals directly involved in an individual's care and support, to share a summary of the medical record and any safeguarding concerns. Bristol City Council have worked with the South West Commissioning Group to implement Connecting Care for children and families in the city. This is facilitating improved information sharing and speeding up enquiries in First Response providing a more responsive service for families. Safeguarding Teams in Health agencies are also able to see if previous safeguarding referrals have been made for a child, or if a social worker is allocated.

4. SERIOUS CASE REVIEWS



The Serious Case Review Sub Group has an oversight role in commissioning and monitoring the progress of Serious Case Reviews. The Sub-Group also monitors the progress made by agencies in implementing changes following Serious Case Reviews. Any exceptions and concerns about these areas are reported to the full Board meetings.

Over 2016/17 the BSCB did not publish any Serious Case Reviews however there are 6 in progress that are due to be published during 2016/17. 2 of these Serious Case Reviews are due to be published in April 2017.

CHILD SEXUAL EXPLOITATION - OPERATION BROOKE (MARCH 2016)

The Serious Case Review into the prosecution of a gang of men who sexually exploited children in Bristol, known as Operation Brooke, was published in March 2016. Over 2016-2017 the Board has overseen the work being undertaken by partner agencies to respond to the findings of this review.

Learning events were held across the city including briefings for all the children's social care teams, Safeguarding Link GPs and health provider briefings.

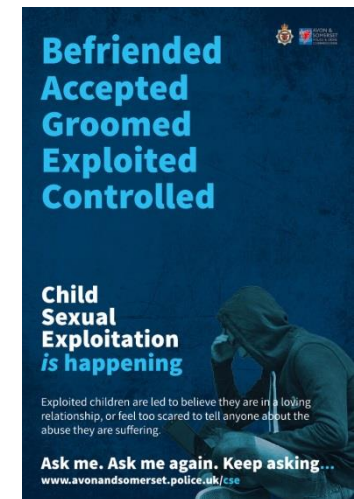
Information sharing between sexual health and GPs remains a challenge but is part of the new unity sexual health contract the new provider is aware of the need for consistent safeguarding practice across all the providers.

Following the Operation Brooke SCR, Public Health Bristol have continued to run the 4YP Training programme for professionals. Courses include supporting professionals around many aspects of sex and relationships education. Public Health Bristol also runs the “Bristol Ideal” which support schools to have good practice in preventing trafficking, forced marriage, honour crimes, FGM, sexual exploitation and sexual harassment. Schools are also participating in the Healthy Schools programme which includes support to schools to deliver PSHE and Relationships and Sex Education.

It has been identified that the increase in awareness and identification has placed significant pressure on the city’s specialist child sexual exploitation team Barnardo’s BASE. Ongoing commissioning of a specialist service at an increased commissioning level has been secured for 2017-2020 through a cross-Avon and Somerset commissioning process. Steps have been taken to build resilience in the model as better identification continues by expanding capacity within other organisations to manage Child Sexual Exploitation cases.

Bristol City Council have set up a network of Child Sexual Exploitation Champions across their services. The Champions are responsible for dissemination of up-to-date best practice information, resources and training. Barnardo’s BASE have developed their offer to increase flexibility including increasing consultation and parent support interventions alongside the long-term therapeutic relationship based support for victims. This has been supported through Train-the-Trainer courses run in the final quarter of the year.

Agencies have also continued to build on the use of predictive analytics. Using the Troubled Families integrated analytics database, agencies have developed a framework for identifying key indicators of vulnerability to sexual exploitation. This has allowed schools and early help to identify which children are most at risk of being sexually exploited in order to prompt greater professional curiosity and align resources so that those children can be offered support with reduces vulnerability.



A significant amount of work in this area has also been undertaken in partnership with our neighboring local authorities. Through the West of England Child Sexual Exploitation Victim Identification and Support Project Two new approaches, the CSE Network Meeting and Operation Topaz, have also been implemented this year to improve disruption and conviction of perpetrators. The CSE Network Meeting provides a perpetrator focus on intervening as a multi-agency network to reduce and prevent offending against children. The CSE Network meetings initially identified that almost three-quarters of actions being recommended could have been implemented at an earlier stage through Child Protection processes. This highlighted a lack of expertise in the disruption and conviction of offenders by statutory agencies.

To respond to this an Investigators Handbook has been developed and training rolled out across all the police investigations teams within Avon and Somerset. Furthermore the Operation Topaz pilot was set up in 2017. Operation Topaz is a group of police officers and staff with significant CSE experience, who implemented proactive targeted strategies to disrupt and convict perpetrators. Multi-agency partners from Social Care, Education, Health and Barnardo's meet with them weekly to review high risk cases and ensuring the sharing or intel and implementation of effective plans for dynamic responses to risk. Police officers are also co-located for partner of the week within the Barnardo's multi-disciplinary team. The Board will receive a report on the outcomes of this pilot after six months of delivery.

We know that the public are the frontline in protecting children and young people from Child Sexual Exploitation. The Communications Sub Group support a cross Avon and Somerset awareness campaign that included CSE awareness material being displayed at all the major transport hubs in the city including Temple Meads Station. The materials were also rolled out across schools, health services and the voluntary sector.

2016-2017 was the second year of the delivery of a specialist CSE awareness raising programme to staff across a wide range of public venues including fast food chains, taxi ranks, clubs, pubs, security staff and street pastors. In total 684 staff were trained in CSE awareness in 2016-2017, ensuring that we equip communities to know the signs of CSE and how to report concerns.



5. WEST OF ENGLAND: CHILD DEATH OVERVIEW PANEL

Bristol has joined with the other LSCBs of the ex-Avon County Council area (Bath & North East Somerset, North Somerset and South Gloucestershire) to establish the West of England Child Death Overview Panel (WofE: CDOP). An annual meeting of LSCB chairs and managers to oversee the operation of the WofE: CDOP has meets annually in September.

The West of England CDOP has undertaken detailed overviews of child deaths which have occurred in the area since its inception in 2008. The CDOP has benefitted from the availability of local and national expertise to inform their deliberations and case reviews and has been proactive in pursuing modifiable factors which indicate the potential for improvements in policy, procedure, practice and wider learning for the future.

An annual report is provided to the four LSCBs each autumn, therefore reporting in the LSCB annual report is for the preceding 12 months.

Number notified deaths of Bristol Children by Year	2011/12	2012/13	2013/14	2014/15	2015/16
	30	43	30	31	35

589 child deaths were notified to the West of England Child Death Enquiries Office between 1st April 2011 and 31st March 2016. 170 of these children were from Bristol.

Between 2011 and 2016, (39/109) 36% of children were not residents of Bristol, North Somerset, South Gloucestershire or Bath and North East Somerset (BANES). The great majority of these children were receiving specialist medical care in Bristol Children's Hospital or St Michaels Hospital (NICU). This figure is lower than previously as from January 2015 the West of England CDOP stopped reviewing and collecting data on the deaths of Welsh children within hospitals in the West of England area.

Between 2011 and 2016, 70% of deaths occurred during the first year of life, 12% of deaths were of children ages 1-4, and rates then decrease in mid-childhood but are higher in ages 15-17 with 6% of deaths. The number of deaths in the 7-27days age bracket dropped over the 5 year period by almost a half, and deaths in 1-4 year olds also dropped notably.

75% of deaths notified in the last 5 years were children expected to die and 25% of deaths in children aged 0-17 years were unexpected; 30% remaining unexplained after a full investigation and the local case review meeting. 34% of deaths due to perinatal complications (mostly extreme prematurity), and 28% children with chromosomal, genetic or congenital conditions. Acquired natural causes account for 21% and external causes, encompassing deliberate injury, suicide and trauma, accounted for 9%.

THEMES ARISING FROM REVIEWS OF CHILD DEATHS

Lack of bereavement support for families

This year CDOP has recorded some dissatisfaction with bereavement provision for some families. A number of cases in past meetings have reflected this and while this issue is not directly related to identifying modifiable factors in relation to the death the panel felt it is important to try to address. One forward step is that CDOP has flagged this issue to the local children's hospital trust who now have a bereavement team in place. CDOP have also helped to raise awareness of bereavement support for specific cultural groups.

Delay in receipt of final Post Mortem Reports

Unfortunately the effect of the national shortage of paediatric pathologists continues to impact families after their child's death. CDOP reviewed a number of cases this year where the delay in the final post-mortem report being available to families caused significant distress. This year CDOP wrote to the Royal College of Pathologists who confirmed that the College is aware of this issue and has reported that

paediatric pathology remains a shortage speciality to Health Education England. They reflected that there are adequate numbers of training posts at present, but there are difficulties in attracting high quality trainees to the speciality, and events were run by the College last summer to ensure that paediatric pathology is represented to trainee doctors at an early stage. The Designated Doctor for Children's Deaths has also dealt with some media contact in relation to this issue.

Difficulty in obtaining information on fathers of children who have died

As part of the child death review process, information on the child's family and background circumstances is routinely reviewed. However CDOP recognised that it is often difficult to collect adequate information on the fathers of children who have died as this information is often not held on agency records. WOE: CDOP is aware that this is also an issue for other CDOPs and may be a national issue. CDOP has been able to remind clinicians involved in the child death review process about this issue, for example, where there has been a rapid response in relation to an unexpected child death professionals have been reminded to ensure that, wherever possible, information on the GP surgery that the father is registered with is collected.

Medical learning from case reviews

This year CDOP has highlighted important medical learning from a number of cases, in particular in relation to presenting features of infection and childhood malignancies. Discussions have taken place about how best to disseminate this learning to relevant agencies. CDOP has received anecdotal evidence that many parents wish to contribute to future learning in this way.

6. TRAINING AND ANNUAL CONFERENCE

The BSCB Training team ran 23 different courses in 2016-2017 over 64 training days. 14 were conducted by the BSCB Trainer and 9 by external agency trainers. Three of the courses run by the BSCB Trainer had speakers from other agencies.

In 2016/17 we trained 1640 professionals compared to 1423 professionals trained in 2015/2016 which was a 15% increase. This data does not include the figures from the Annual Conference.

Data from our Initial Child Protection training feedback showed that the training delivered is upskilling professionals effectively. There was a significant increase in confidence in Safeguarding Practice reported with 236% increase in reported Confidence in Safeguarding Practice reported after the course.

Some examples of respondents' feedback on actions taken after training:

- I reviewed a number of serious case reviews and explored the SWCPP website meaning i am more familiar with processes and how things can go wrong also the support that is out there providing guidance for us
- I have revised our Safeguarding children and adults policy to make it more comprehensive. Created a clearer reporting structure and a central log where safeguarding concerns are recorded. I also organised Safeguarding training for staff and there is now more confidence within the organisation about reporting, recording, including following up on disclosures of historical childhood abuse and reporting to police. This helps to promote children's safety.
- It has made me feel more confident to share my knowledge with other colleagues within my team. So following an incident I had to make a safeguarding referral to keep one of my service users safe - I was able to discuss my concerns within a whole team meeting gaining more support from colleagues. I was able to pull on my knowledge, resources and contact numbers that were given to me during the Child Protection Training.

- I feel that I have a greater understanding of the mental health issues that face young people and adolescents, and the impact that parental mental health can have upon children and young people. I am putting together training for my own agency regarding mental health and can use the information learned from this study day to inform my own training. I am also involved in the transition process from children's to adult services and this training was helpful to bring different issues to mind

Through the end of year review of the BSCB Training offer, the Training Team has identified a need to update the Child Protection for Managers course to ensure it is relevant for managers managing more complex Child Protection issues. The review also identified that Cultural Competency and consideration of Equality and Diversity issues could be strengthened throughout the core training offered. This will be addressed in a review of the whole of the Training Programme in 2017-2018 and the development of a 2018-2021 Multi-Agency Training Strategy.

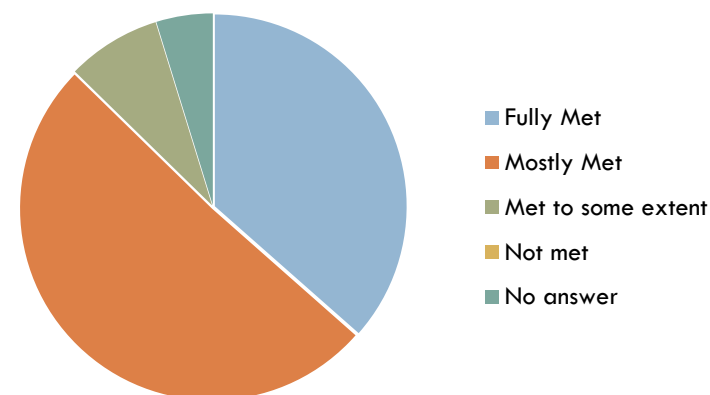
ANNUAL CONFERENCE

This year's Annual Conference "Building Honest and Effective Relationships with the Communities and People We Serve" was held on Monday 11 July 2016. There were 194 attendees at the conference representing over 70 agencies in the city.



Delegates heard talks from a range of speakers and practitioners:

- Jeanette Plumb, BSCB Senior Training and Development Officer; Working Openly with People of Varied Faiths and Cultures
- Matthew Gibson, University of Birmingham; Understanding the Emotional Impact of Safeguarding on Professional Practice
- Joanna Nicolas, Social Work Consultant; Awareness of Disguised Compliance in Families and Communities we work with
- Kalsoom Bashir/Dickon Turner; Prevent/Extremism and Radicalisation
- Integrate Bristol – End FGM



A review of the Conference feedback found the majority of attendees said that the aims of the conference were met. Professionals who attended were particularly positive about the input from the young people from Integrate Bristol who inspired the delegates with their passion, knowledge and commitment to End FGM. Integrate are now delivering specialist training across the country in schools, to professionals and to community groups.

PRIORITIES FOR 2017-2018

With the introduction of the new Social Work Act, the BSCB recognizes that we are working towards a period of significant change for LSCBs. Despite this we will continue to ensure that the safeguarding of children and young people is at the forefront of our work as we work with partners to ensure young people's right to a life free of harm are promoted.

The areas we have identified through our review of this year which we will focus on in the year ahead are:

1. Safeguarding Disabled Children
2. Safeguarding Children in Supplementary Schools and Youth Groups
3. Improving Safeguarding of Children and Mothers in the Peri-natal Period
4. Developing Improved Cross-Working Arrangements with Safeguarding Adults
5. Review the Effectiveness of Child Protection Plans
6. Increase Oversight of the MARAC process
7. Training Review and Development of Inter-Agency Training Strategy