



DEVON
SAFEGUARDING
CHILDREN
BOARD

Annual Report
2010/2011

Devon Safeguarding Children Board

Annual Report 2010/11

Section 1

provides a national overview of important changes during 2010/11 affecting safeguarding children.

Section 2 summarises local developments in response to national guidance related to safeguarding children.

Section 3 details the progress made in improving safeguarding arrangements in Devon during 2010/11.

Section 4 identifies the progress made by Devon Children's Trust in responding to the 10 Challenges posed by the DSCB in its 2009/10 Annual Report.

Section 5 outlines the current DSCB structure, governance and accountability arrangements including the relationship between the DSCB and the Devon Children's Trust.

Section 6 provides some key child protection Devon facts and figures.

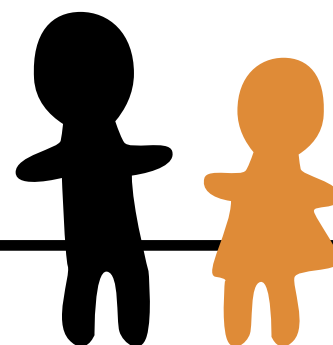
Section 7 explains the budget position of the DSCB and makes an estimate of the total budgetary resources committed to safeguarding Devon's children.

Section 8 explains the DSCB Quality Assurance Framework and the improvements in outcomes for children that this has achieved.

Section 9 describes lessons learnt from Serious Case Reviews undertaken in Devon and published national reports.

Section 10 summarises the peninsular findings of the Child Death Overview Panel which analyses all child deaths from whatever cause across the South West Peninsula.

Sections 11 and 12 provide information on the progress made against national and local priorities.



Authors Julie Mitchell and Alan Wooderson **March 2011**

The authors acknowledge the many people from organisations across Devon whose expertise, knowledge and comments have informed this report.

The Devon Safeguarding Children Board (DSCB) Annual Report 2010/11 structure follows guidance in the *Local Safeguarding Children Boards: Practice guidance for consultation (March 2010)* available at <http://tinyurl.com/DSCBguidance>

Important This report reflects the national and local Devon structures that were in place up to the end of March 2011.

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1. Forward



Alan Wooderson,
Devon
Safeguarding
Children
Board,
Independent
Chair

The Election of the Coalition Government in May 2010 has seen major shifts in policy, performance reporting and governance as a result of new priorities. These, combined with stringent financial settlements, have impacted hugely on public sector organisations nationally and in Devon with consequent implications for other sectors.

The fast-changing policy environment has continued throughout 2010/11 with a range of policy papers and reports affecting children's safeguarding, including:

- **The Importance of Teaching: Schools White Paper** <http://tinyurl.com/Teachingwhitepaper>
- **Healthy Lives, Healthy People:** Public Health White Paper <http://tinyurl.com/healthylivespaper>
- **Breaking the Cycle: Effective Punishment, Rehabilitation and Sentencing of Offenders:** Green Paper (Ministry of Justice) www.justice.gov.uk/consultations/consultation-040311.htm
- **The Foundation Years:** Frank Field Report on child poverty <http://tinyurl.com/foundationyears>
- **Early Intervention: The Next Steps –** Graham Allen MP report www.dwp.gov.uk/docs/early-intervention-next-steps.pdf

- **The Localism Bill** <http://tinyurl.com/localismbill2010>
- update of **Working Together to Safeguard Children 2010** guidance www.workingtogetheronline.co.uk
- **National Review of Child Protection:** Professor Eileen Munro Report <http://tinyurl.com/finalmunroreport>
- **Family Justice Review** Interim Report <http://tinyurl.com/familyjusticereview>

Devon has continued to operate a Children's Trust in the knowledge that there is no longer a statutory requirement to do so, but in the belief that partnership working is the key to improving outcomes for vulnerable children and young people.

The developing Health and Wellbeing Board for Devon will be the future vehicle with responsibility for ensuring that the needs of the population of Devon, including children and young people, are being met by those responsible for planning and commissioning services. Although there is no longer a requirement to produce a Children and Young People's Plan, Devon Children's Trust board endorsed the **Children and Young People's Business Plan 2011/12** in February 2011, agreeing the continued priority of children's safeguarding.

We have seen the end of the Comprehensive Area Assessment as part of the scope for reducing the burden of inspection on Local Authorities, the end to Local Area Agreements and the National Indicator set in its present form. Children's Minister Tim Loughton has given assurance that the Annual Performance Assessment rating for children's services will continue, saying; "the Government's intention is to end the annual rating process as soon as a suitable legislative opportunity can be identified...in the meantime the Department for Education will work with Ofsted to ensure the rating process is as simple and transparent as possible".



The ***Equity and Excellence: Liberating the NHS*** White Paper reflects the Coalition Government's ambition to initiate and implement rapid health service reforms to realise two main outcomes:

- a more simplified and accountable health structure
- greater financial and practical efficiencies within national health services.

Transforming Community Services requires different management arrangements for the Primary Care Trusts (PCT) Provider Services by April 2011, alongside the emergence of General Practitioner (GP) Commissioning Consortia, Health Watch England, and Health and Wellbeing Boards within Local Authorities (LAs) ending the role of PCTs by March 2013.

With the revision of their criteria for the inspection of safeguarding children's services, Ofsted published a report highlighting best practice in ten children's services judged as Excellent. This report provides an assessment of best practice and details key characteristics that help secure further improvements to safeguarding that Local Safeguarding Children Boards (LSCB) need to be mindful of. Included in the revised Ofsted inspection criteria is an additional focus on health outcomes and a clear emphasis on health provision.

With an even greater range of new government strategies and reviews expected, including:

- Child Poverty Strategy
- Mental Health Strategy
- Vetting and Barring Review
- Early Years Review
- Special Educational Needs Green Paper
- Health and Social Care Bill 2011

it is inevitable there will be continued emphasis on radical review and change for all aspects of services that are part of the current safeguarding children arrangements.



Councillor Andrea Davis, Cabinet Member for Children's Health and Wellbeing and Safeguarding

I am politically accountable for ensuring DCC fulfils its legal responsibilities for safeguarding and for promoting the welfare of children and young people. I have attended meetings of the DSCB during 2010/11 as an observer and received all the papers.

I have met on a regular basis with the Executive Director of Children and Young People's Services and the Independent Chair of the DSCB. These meetings have helped me in my responsibility to ensure:

- the effective co-ordination of all agencies working with children and young people
- that robust safeguarding arrangements are reported, scrutinised and implemented.

I have taken an active role in promoting the positive and innovative safeguarding work that has been progressing in Devon, for example, through raising awareness of the Multi-Agency Safeguarding Hub (MASH). I am pleased with the progress that the DSCB has identified in safeguarding services in Devon during 2010/11.



Anne Whiteley,
Devon County Council
Executive Director of Children and Young People's Services

For 2010/2011 I have had direct responsibility for the services for children and young people delivered by Devon County Council.

This has been a year of continued improvement. This judgement was first endorsed by Ofsted's Unannounced Inspection of our front-line assessment services in June 2010. It was later confirmed when our children's services were judged to be performing well in Ofsted's Annual Performance Assessment. These improvements have to be seen against a national backdrop of spending cuts - particularly the £3.1 million in-year reduction we had to make as a result of cuts in our Government grant funding.

There have, however, been some notable improvements including:

- the county-wide roll-out of our contact and referral co-located service through the Multi-Agency Safeguarding Hub (MASH)
- our growing maturity as a partnership through the development of models of peer support and challenge, for example, the Multi-Agency Case Audit and the use of Appreciative Inquiry, reflective practice and enhanced skills in partnership working
- strengthening our approaches to joint commissioning through the Joint Strategic Needs Assessment and evidence-based programmes. The developing early identification, intervention and prevention strategy to secure early access and help for families is crucial in this regard.

We are continuing to face considerable fiscal and organisational challenges which will require a determined focus from across the whole system.

The Munro Review of Child Protection: Final Report. A Child Centred System, will provide a significant platform at a critical time for galvanising effort and action and I am confident the DSCB is in a good position to respond. Our measures of effectiveness remain that Devon's children and young people are effectively helped, kept safe from harm, and we have the assurance that we know they are safe.





**Councillor
John Hart,**
Leader of
Devon County
Council

It is everyone's job to make sure the children in our community are safe. I will continue to work with the leaders of local authorities and our other statutory partners across Devon to ensure that we do all we can to ensure that every child is safe.

This has been a year of tough choices on spending and Devon alone has had to reduce its budget by over £54 million. Despite that, we have increased spending on children in care, children in need and children with special needs and not a single children's centre has closed. It is extremely important that we set the best possible example for the entire community in our work with vulnerable children and families. I firmly believe DCC is taking a strong lead and I am determined we will continue to do so.



Phil Norrey,
Chief
Executive,
Devon County
Council

This Annual Report presents an honest reflection of the improvements achieved in safeguarding Devon's children over the last twelve months and provides me with the assurance that the challenges of reducing resources and the Government's public sector reform programme can be managed with appropriate commitment from partners so that we maintain the focus and commitment on safeguarding.

I wish to compliment the efforts of all those people who directly and indirectly on a daily basis contribute to improving outcomes for our most vulnerable children and young people.



2. Introduction

This Annual Report charts the progress made in Devon in response to new national expectations, and includes trends and patterns of safeguarding activity identified from performance information that is collected and regularly analysed.

The Government's Comprehensive Spending Review 2010 has set cultural and financial challenges to change what is done and how it is done, creating a leadership challenge to deliver strategic and targeted investment in early intervention at a time of constrained and reducing budgets.

The demise of many ring-fenced grants, including the Area Based Grant, and the combining of many grants into the Early Intervention Grant (including Sure Start Children's Centres, Aiming High for Disabled Children and Early Years and Childcare) has led to reductions across many services for children. The vulnerable financial position of the peninsula Child Death Overview Panel (CDOP) - funded nationally for three years ending March 2011 - within current constrained resources has raised concerns about the future arrangements and performance for this important service.

Changes to statutory guidance set out in Chapter 8, together with the Government's appointment of Professor Eileen Munro to conduct an independent national review to improve child protection, prompted the DSCB to scrutinise in detail the full implications of ***Working Together 2010***. This has reassured us that it is fully embedded throughout the partnership to the required levels.

The publication of the final Munro report in May 2011 will probably recommend a strengthened role for Local Safeguarding Children Boards, along with significant changes to child protection arrangements across the country. This will provide leadership challenges in 2011 at the same time as major structural changes to key services such as health and the local authorities are also underway.

In her interim reports ***The Munro Review, Part 1 – A systems analysis*** and ***Part 2 – The child's journey*** Professor Munro clearly identifies the strategic importance of clear lines of accountability from the top of all organisations involved in the safeguarding system, with an expectation that local and national changes as a result of Government policy or financial consequences of the Comprehensive Spending Review should not dilute the accountabilities of lead members and directors of children's services.

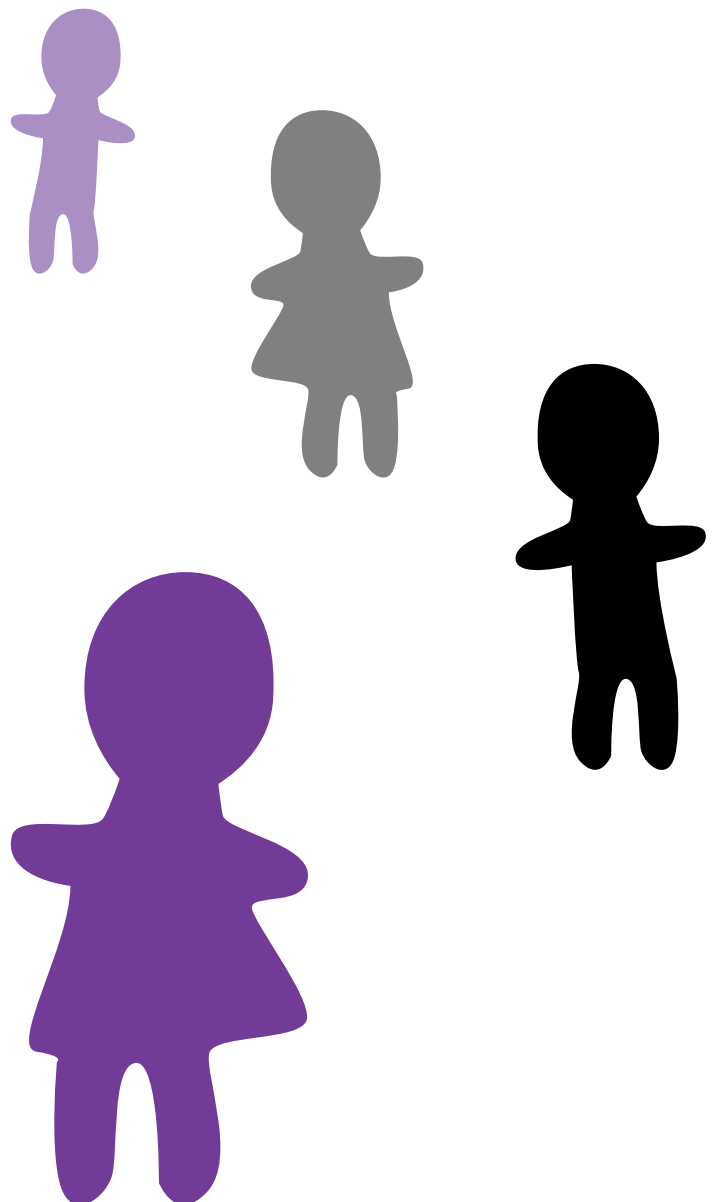


It is pleasing to note throughout this annual report that services across Devon have been anticipating many of the changes that Munro may recommend in her final report. In particular, the emphasis on integrated working across sectors; investment in locally-based early interventions; comprehensive agreements on the model of information sharing and risk assessment at the point of identification of families needing help. Indeed it is evident that developments in Devon have had some influence in the Munro team's thinking about effective models of child protection.

The partners represented at the DSCB have been extremely effective in ensuring that the quality of safeguarding work and the influence of the DSCB in and across organisations has been undiminished despite organisational uncertainties. The DSCB has a significant role to play during the next year or two as local and national changes occur, and will provide robust oversight of children's safeguarding and transitional care of the development of key initiatives such as MASH, early help, specialist service developments and training.

The strength of a commissioning approach based on agreed Joint Strategic Needs Assessments of safeguarding, domestic and sexual violence and abuse is that these assessments provide the key priorities for those that commission and deliver services, and provide the DSCB with a powerful benchmark against which to measure the partnership and individual organisational commitments to protect children, reduce risks and support reductions in inequalities.

The DSCB conducted a further self-assessment to review its own performance using a nationally recognised process augmented with the learning arising from ***The Evaluation of Arrangements for Effective Operation of the New LSCBs in England – Final Report*** <http://tinyurl.com/lscbeffectiveness> This resulted in positive improvements across all seven effectiveness domains and agreement on further improvement actions will be detailed in the DSCB Business Plan 2011/12.



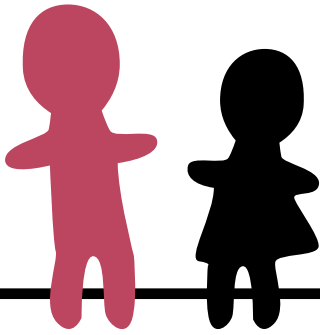
3. Safeguarding Arrangements in Devon during 2010/11

The DSCB's overall judgement for Devon's safeguarding children arrangements are that they are **Good with adequate prospects for improvements.**

This judgement is based on:

1. the annual rating of Children's Services in Devon undertaken by Ofsted for 2010 stating that the Council was Performing Well - this compares with Performing Adequately in 2009
2. the Ofsted annual Unannounced Inspection of Contact, Referral and Assessment Arrangements in Children's Services undertaken in June 2010 which identified no 'priority actions' and detailed the significant progress and the confidence of frontline staff achieved since the full Ofsted inspection in 2009
3. Ofsted acknowledging in their **Annual Rating Report 2010**, that the large majority of services, settings and institutions inspected were good or better including:
 - all Devon's children's homes rated good
 - Devon Fostering Service rated Outstanding
 - Devon Adoption Service rated Outstanding
 - the Outstanding overall quality of day care for the very young.The full text of the letter can be viewed on the Ofsted website at [www.ofsted.gov.uk/oxcare_providers/la_download/\(id\)/6118/\(as\)/CAR/car_2010_878.pdf](http://www.ofsted.gov.uk/oxcare_providers/la_download/(id)/6118/(as)/CAR/car_2010_878.pdf)
4. Ofsted recognising that frontline child protection services have a broad balance of strengths and areas for improvement, and that overall Devon has a 'good grasp of what needs to be done with appropriate structures in place'. Strengths identified were:
 - staff are well-motivated, have access to good training and value the professional advice and support provided by managers, who are readily accessible for formal and informal consultation
 - links between the out-of-hours service and the contact and referral service are effective to enable appropriate information to be shared promptly, and the out-of-hours staff undertake some non-emergency visits during evenings and weekends to ensure that children are safe.
5. the DSCB audit of the safeguarding practice of independent schools in Devon, following the successful safeguarding audits of the maintained sector, which highlighted a range of good and adequate safeguarding practices (further detail in Chapter 8)
6. the Youth Justice Board (YJB) validating the Devon Youth Offending Service (YOS) in 2010 as performing 'excellently' against the national indicator set, and as having 'excellent' capacity and capability to sustain and improve performance
7. an inspection by Her Majesty's Inspectorate of Probation (HMIP) judging that Devon and Cornwall Probation Trust (DCPT) probation staff had contributed effectively to multi-agency child protection procedures in 86% of cases where children were subject to a protection plan, (further details in Chapter 12)



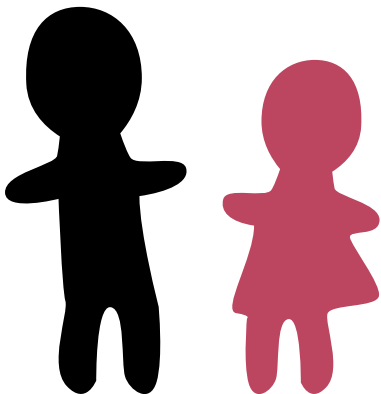


8. the statutory **Children Act 2004** Section 11 Audits which have seen improvements, with many organisations citing innovative safeguarding practice across the South West peninsula and in organisations operating only in Devon (further detail in Chapter 8)
9. the DSCB scrutiny of the full implications and implementation of **Working Together 2010** which provided re-assurance that it is fully embedded throughout the partnership organisations to the required levels
10. the MASH bringing together statutory and voluntary agencies into a central contact point for referrals, enabling improved intelligence gathering and information sharing across partner agencies. This has been highlighted by Children and Families Minister Tim Loughton as a prime example of innovative practice (further detail in Chapter 6)
11. of the 32 recommendations presented to the DSCB as a result of the Multi-Agency Case Audits (MACA), 30 have been fully implemented or are in the process of being fully achieved and two have yet to be started. Further innovation during 2010 saw the MACA team piloting an Appreciative Inquiry (AI) approach with two complex family situations. This approach is now embedded in the MACA audit process (further detail in Chapter 8)
12. substantial progress across the Devon Children's Trust partners in responding to the Ten Challenges to Improve Safeguarding for Children in Devon which were identified in the 2009/10 DSCB Annual Report. The challenges are incorporated into the DCT Business Plan 2011/12, setting out the vision of safeguarding and improving the lives of the most vulnerable children and young people, with a particular focus on organisations sharing an agreed single 'view of the child' and ensuring effective transition arrangements for children who move between services and organisations (full details of progress in Chapter 4)
13. no Serious Case Reviews (SCR) in Devon during 2010-11.



Areas considered by the DSCB that restrict the judgement to **Good and prospects for improvement to only adequate** are:

- the weakened financial position of many organisations which provide services for children, compounded by the heightened risks of significant future organisational change across many large children's service providers
- the impact of major programmes of organisational change and fragmentation on key frontline staff and first line managers across all partners
- the progress made during 2010 of regular and complete performance reporting on safeguarding information remaining problematic
- the limited influence of the DSCB on commissioning services which promote the safety of children, including those services which work with families and individuals with complex problems that are known indicators of prolonged damage to children
- the non-systematic listening to the voices of children and young people and their influence on service provision, and the limited engagement with the wider community on safeguarding
- problems with recording and analysing activity and reporting to the DSCB from the CDOP and the Sexual Assault Referral Centre (SARC)
- The capacity of the DSCB Executive and sub-group structure to deliver change at the required speed
- the capacity of the current training arrangements to meet the implications of the Munro reports, including the need for an overarching understanding of the quality, effectiveness and availability of safeguarding training in Devon
- the inconsistent application of quality safeguarding standards for multi-agency working across the whole of Devon as evidenced by:
 - variation in how GP practices and other independent contractors comply with national safeguarding guidelines and standards
 - lack of completing and implementing the Joint Protocol for adult and children's services
 - weakness in the Probation Trust's safeguarding practice for offenders with children identified by HMIP (2011)
 - problems with the application of the Common Assessment Framework (CAF) across Devon.



3.1 DSCB Business Plan 2010/11

The DSCB has delivered well against the agreed priorities.

	Agreed priorities	Progress and achievements
Policies and procedures	<p>1. Ensure Devon safeguarding polices comply with Working Together 2010.</p> <p>2. Ensure the South West Child Protection Procedures (SWCPP) are embedded in working protocols between partner agencies.</p> <p>3. Review Multi-agency threshold document</p>	<p>1. High level of compliance achieved – Report to DSCB March 2011. Final report due June 2011. South West Child Protection Procedures (SWCPP) were confirmed compliant in June 2010.</p> <p>2. Revision of SWCPP website including protocols which expand on the requirements of Working Together. A practitioners' and a managers' guide notifying key Working Together 2010 changes circulated to all agencies.</p> <p>3. Complete Threshold Tool by June 2011, with testing in September 2011.</p>
Child deaths and Serious Case Reviews	<p>1. Review the effectiveness of the current peninsula CDOP and the Sudden Unexpected Death in Infancy (SUDI) arrangements.</p> <p>2. Respond to CDOP Annual Report recommendations and action plan.</p> <p>3. Ensure learning from peninsula, national and local SCRs is embedded in practice.</p> <p>4. Improve the quality of SCRs and Independent Management Reviews (IMRs) process and template in light of Working Together 2010.</p>	<p>1. Interim review completed January 2011 and a new temporary contract for 2011/12 agreed. A full review to be undertaken in 2011/12 to establish future service and funding.</p> <p>2. All recommendations referred to the Peninsula Public Health Boards for a response.</p> <p>3. Completed through SCRs sub-group and validated through MACA and Section 11 Audit.</p> <p>4. Review of templates and guidance completed February 2011. Since revised procedures were introduced Peninsula LSCBs have seen a significant improvement in SCR quality with no Inadequate judgements from Ofsted.</p>



Planning and commissioning services	<ol style="list-style-type: none"> 1. Participate in the planning and commissioning of children's and where appropriate, adults services. 2. Ensure service contract specification schedules cover children's safeguarding. 	<ol style="list-style-type: none"> 1. DSCB chair attends DCT Board meetings. Some evidence of impact on adult and children's commissioning. 2. Confirmed all DCC children's services and against domestic violence and abuse (adva) partnership contracts are compliant. Other agencies contracts to be reviewed.
Quality assurance and performance management	<ol style="list-style-type: none"> 1. Report individual organisational safeguarding risks. 2. Report safeguarding performance information. 3. Improve local understanding of needs and agree, where appropriate, the sharing of information to improve intelligence across organisations. 4. Report recommendations and monitor action plans for MACA and Section 11 Audits. 5. Promote approaches to multi-agency individual case discussions (Appreciative Inquiry model). 6. Monitor restraint actions used in custodial settings. 7. Produce an annual report which is an honest assessment of safeguarding - Working Together 2010. 8. Quality assure non - DSCB safeguarding training and development provision. 9. Deliver flexible learning and development that responds to emerging issues. 	<ol style="list-style-type: none"> 1. DSCB Risk Register established in September 2010 to be reviewed every six months. Performance reports include identified risks. 2. Achieved DSCB first comprehensive performance report in December 2010. Future developments include data linked to outcomes, Red, Amber, Green ratings and scorecard synergy with Peninsula LSCBs. 3. Multi-agency group established to share information and ensure a better picture of need. Focus is unintentional injuries of children and young people. The Joint Strategic Needs Assessment Steering Group membership includes a wider partnership. 4. Completed two MACAs of 16 cases, additionally themed audits undertaken by DCC Early Years and Families. Section 11 Audits completed end of March 2011 and findings reported to DSCB June 2011. 5. AI case undertaken as part of MACA. MACA auditors trained in AI and Social Care Institute of Excellence (SCIE) methodology. 6. Restraint incidents in secure settings now reported through DSCB quarterly performance report. 7. Annual Report to be published in June 2011. 8. Positive course evaluation in place for all programmes except refreshers. Devon is a member of the Peninsula quality assurance project assessing the impact of training through supervision. 9. Improved range of programmes and increased e-learning.



Communication and raising awareness	<ol style="list-style-type: none"> 1. Agree the DSCB process for hearing the views of children, young people and their families. 2. Promote access to information and training on information technology safety, including promoting e-safety awareness to schools, parents and carers and children and young people. 3. Deliver key pro-active safeguarding messages to Devon's communities and the children's workforce. 	<ol style="list-style-type: none"> 1. Many examples of consultation but needs further co-ordination into a comprehensive and sustainable approach. Interviews with children and parents as part of MACA from April 2011. 2. Successful Safer Internet Day in February 2011. Safeguarding in Education Conference in March. Launch of the Professionals Online Safety Helpline (POSH) in March 2011 - the UK's first helpline for professionals dealing specifically with e-safety issues. 3. Some notable successes such as Safer Internet Day, agencies newsletter and an extensive safeguarding training programme.
Child Protection Training	<ol style="list-style-type: none"> 1. Deliver child protection safeguarding training to meet demand. 2. Report on the quality, scope and effectiveness of single and inter-agency training. 3. Develop options for child protection training between children and adult services, including peninsula opportunities. 	<ol style="list-style-type: none"> 1. Achieved high numbers of safeguarding training. Further detail is in Chapter 11. 2. Completed review of all DSCB core and specialist training, including that of safeguarding partners, such as adva. Specifications developed for specialist courses for 2011/12. 3. Started discussions to improve child protection training options across the peninsula.
Business Improvement	<ol style="list-style-type: none"> 1. Report on DSCB governance 2. Report effectiveness of the DSCB in improving safeguarding to Devon's children and young people. 	<ol style="list-style-type: none"> 1. Positive DSCB self-assessment in March 2011 with identified areas for improvement addressed in the 2011/12 Business Plan. 2. Achieved Good with adequate prospects for improvement.

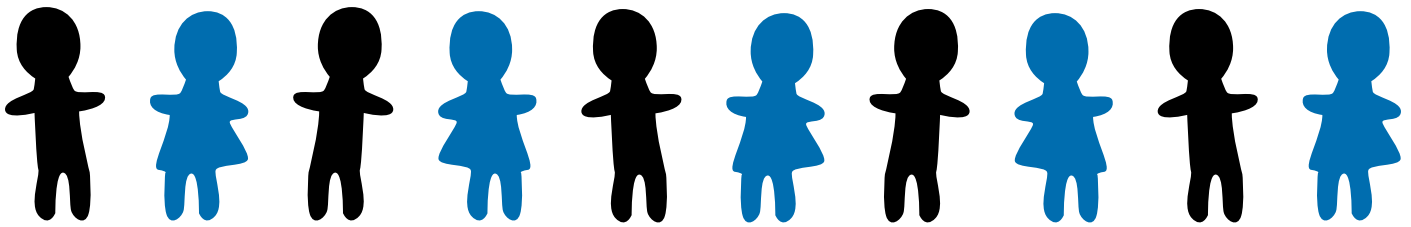


4. Devon Children's Trust 10 Challenges

Ten challenges were identified in the **DSCB Annual Report 2009/10**. These have been incorporated in the **Devon Children's Trust Business Plan 2011/12** along with key objectives related to the most vulnerable groups of children.

Challenge	Progress
<p>1. Ensure DCT partner organisations understand the effectiveness of their safeguarding role and responsibilities by demonstrating that safeguarding is embedded in practice</p>	<ul style="list-style-type: none"> • Performing well in Ofsted Annual Rating of Children's Services. • Youth Offending Service compliant with HMIP Inspection and Youth Justice Action Plan with an 80% 'green' rating. • 13 out of 15 peninsula Section 11 returns are adequate or better. • Completed or partially completed 30 out of 32 MACA recommendations. • Good safeguarding practice in schools (audit results). • Improvements to services following PCT audit of safeguarding practice for independent contractors including dentists, ophthalmologists and pharmacists. • Safeguarding is a priority with DCT Business Plan 2011/12. • MASH rollout will be completed in April 2011.
<p>2. Ensure the children's workforce is appropriately trained, supervised and professionally developed to meet priority safeguarding needs</p>	<ul style="list-style-type: none"> • Inspection reports and Section 11 returns indicate staff are aware of their safeguarding responsibilities. • there are no 'priority areas' from the Unannounced Inspection. • Services have mandatory safeguarding training, published safeguarding policies and procedures, staff appraisal and regular supervision. • Guidance has been issued for GP practices and staff in acute trusts on accessing training relevant to safeguarding competencies. • Safeguarding Golden Rules recognised by the whole children's workforce and adopted nationally for health visitors. • adva level 1 training is a compulsory training requirement for practitioners.
<p>3. Ensure national and local lessons are learnt from SCRs and MACAs, and the learning from other authorities is widely shared and implemented</p>	<ul style="list-style-type: none"> • No Devon SCRs in 2010/11. • Demonstrable improvements in MACAs with 30 out of 32 recommendations completed or in process of completion. • MASH nationally recognised as innovative approach to information sharing and multi-agency risk assessments. • New joint protocol for drug screening developed.





<p>4. Ensure that a performance management quality assurance and audit system, provides clear evidence of the identification of key safeguarding issues, actions taken and their appropriateness and outcomes that have been achieved</p>	<ul style="list-style-type: none"> • Completed Section 11 action plans from Devon local organisations, peninsula agencies and district councils, demonstrate safeguarding planned improvements. • 13 out of 15 peninsula Section 11 returns adequate or better. • District council's engagement in bespoke Section 11 event. • Improvements to services following Primary Care audit of safeguarding practice for independent contractors including dentists, ophthalmologists and pharmacists. • Adequate benchmarking against neighbours' performance. • Prepared DCC 'Always Inspection Ready' approach to quality assurance and inspection. • Produced Joint Strategic Needs Assessment on domestic violence and sexual abuse as a key risk area.
<p>5. Ensure regular reporting of an agreed suite of safeguarding metrics and performance information to track progress in improving outcomes</p>	<ul style="list-style-type: none"> • Completed agreed suite of metrics reported to DSCB meetings in December 2010 and March 2011, linked to the DSCB agreed four safeguarding outcomes. • Future work planned with aligning performance reports with peninsula LSCBs. • Safeguarding Risk Register developed, monitored and reviewed.
<p>6. Ensure appropriate integrated working realises improvements in practice</p>	<ul style="list-style-type: none"> • Significant evidence through Unannounced Inspection of Contacts and Referrals identified no 'priority actions'. • MASH will fully rollout in April 2011 and has been nationally recognised as good practice. • Improvements in MACA results. • New draft Joint Protocol for when the behaviour and mental health of adults affects their ability to safeguard their children.
<p>7. Agree the strategic governance arrangements for Multi-Agency Risk Assessment Conference (MARAC), Domestic Violence and Abuse (DVA) and the national strategy Violence Against Women and Girls (VAWG)</p>	<ul style="list-style-type: none"> • Governance agreement for DVA against women and girls. • Improved health engagement in the MARAC process summary report and MARAC interim governance in place through DSCB. • Governance of VAWG peninsula approach to be pursued.



<p>8. Implement the recommendations from the Joint Strategic Needs Assessment of Safeguarding 2010</p>	<ul style="list-style-type: none"> • Capacity issue for adult services staff to attend meetings around safeguarding; for example child protection meetings, Team Around the Child meetings, local safeguarding board meetings and MARAC. • Children's and adults' commissioners governance agreed, close joint working on equality and impact around health outcomes and housing. • Transition protocols in place.
<p>9. Understand how safe children and young people feel</p>	<ul style="list-style-type: none"> • Children's Voice report produced, although more work needs to be done in this area. • There is an adequate single view across the NHS for vulnerable children. • Joint engagement work with homeless young people, young commissioners, special schools, and Youth Offending Service, is adequate. • 'What do you think?' documents produced, although more work needs to be done in this area. • Childcare Sufficiency Assessment done. • 2010 Connexions survey of how safe children and young people feel completed.
<p>10. Ensure work planning addresses identified key issues that have emerged nationally and locally, concerning vulnerable children</p>	<ul style="list-style-type: none"> • Disability conference and safeguarding disabled children new training has been delivered. • Quality Assurance sub-group is advancing work contained in the Practice Guidance for Safeguarding Disabled Children July 2009. • New joint protocol for drug screening developed. • Produced Joint Strategic Needs Assessment in Domestic Violence and Sexual Abuse. • Adequate service specifications for a paediatric and forensic assessment service for alleged child sexual abuse, both recent and historic will be operational from April 2011. • Ofsted reports, involvement in SCIE pilot and regional safeguarding priority projects are all good.



5. Structure, governance, and accountability arrangements

The DSCB started 2010/11 with the Board, Executive and sub-group structure as described in the 2009/10 Annual Report, recognising the likely need to review these arrangements in light of the progressing financial climate and potential organisational re-structures.

Following the March 2011 self-evaluation, the Board has agreed to review its structure in June 2011, to reflect organisational changes and recommendations from the Munro Report. Such changes will embrace the emerging agency structures across the peninsula, economies of shared work between peninsula LSCBs and developing synergies with the work of the Adult Safeguarding Board sub-groups.

In March 2011, the DSCB self-evaluated its governance arrangements using the same tool used in 2010 for comparison. This tool was also assessed against the effectiveness indicators used in the Department for Education research report *The Evaluation of Arrangements for Effective Operation of the New LSCBs in England – Final Report* the result of this saw the inclusion of three additional effectiveness statements in the DSCB self-evaluation tool.

The results reveal that the DSCB is performing well in 61 of the original 69 effectiveness statements, an improvement on last year, with members responding positively to all of the three additional statements. Overall every governance principle improved on the 2010 scores.

There are five key themes for further development which will be captured in the refresh of the DSCB Business Plan 2011/12, along with the requirement to improve the induction process for new members.

1. The DSCB to review and update its communications strategy and develop practice to ensure it engages effectively with children, young people and families and across partner organisations, and receives comprehensive and reliable information from them to use in its decision-making process.
2. The DSCB to increase its accessibility, engagement and impact to a wider group of stakeholders (as outlined in paragraphs 3.62–3.73 in *Working Together 2010*) and report on consequent improvements on the quality and effectiveness of planning processes.
3. The DSCB to establish agreements to compare its performance locally with other LSCBs and ensure reporting of national comparative information.
4. The DSCB to receive twice yearly reports on the deployment of its financial resources, as outlined in the Partnership Agreement and the pooled budget, which detail the achievement of the DSCB core functions of co-ordination and ensuring effectiveness of safeguarding systems across Devon.



5. The DSCB to receive an annual quality assurance report on the effectiveness and impact of individual organisations systems to capture children's complaints, and the effective working between partners to resolve complaints with particular emphasis on the satisfaction of the child with the outcome.

The DSCB will further examine the effectiveness of its governance in 2012.

5.1 Relationship to Devon Children's Trust

The Chair of DSCB has continued to be a member of DCT during 2010/11. This has enabled DSCB to continue to push DCT to deliver on the 10 challenges identified in the 2009/10 Annual Report, ensuring that all partners deliver on their statutory duties to co-operate.

The DSCB continues to strive to forge productive relationships with key partners to ensure safeguarding remains at the forefront of all commissioning and de-commissioning decisions. The DCT Board agreed its Business Plan for 2011/12, setting out the vision of safeguarding and improving the lives of the most vulnerable children and young people, with a particular focus on organisations sharing one view of the child and ensuring effective transition for children who move between services and organisations. Safeguarding is one of the three agreed priorities.

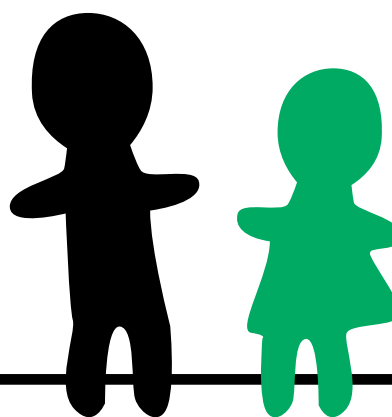
5.2 Devon Safeguarding Children Board membership

The DSCB has again reviewed all aspects of its membership during 2010/11 ensuring compatibility with the **Working Together 2010** guidance. The Member's Responsibilities Agreement is available on the DSCB website and all members understand fully the importance placed on fulfilling their individual, organisational and DSCB specific obligations. Where members fall below the standards expected by non-attendance or by not carrying forward expected actions the DSCB Chair has been robust in clarifying their individual commitments and their collective accountability.

Board members were expected to attend four set Board Meetings on

- 11 June 2010
- 10 September 2010
- 11 December 2010
- 11 March 2011

Additionally members were expected to attend an additional half day DSCB development day on 11 March 2011. Appendix 1 details the attendance of each member organisation.



6. Child protection, referral and assessment

6.1 Referral, assessment and MASH

2010/11 saw the introduction of the Multi-Agency Safeguarding Hub (MASH) in Devon. MASH is an innovative initiative to safeguard Devon's children, improve information sharing across all Devon organisations involved in safeguarding and has the potential to encompass statutory, non-statutory and third sector sources.

The MASH is staffed by a multi-disciplinary team, including professionals from social work, police, health, education, probation and the Youth Offending Service, who provide information to improve appropriate decision-making and provide the best package of intervention to the child and their family.

The analysis of information leads to:

- a social care assessment
- or
- a Common Assessment Framework (CAF) assessment, with the support of the Integrated Children's Services Early Response Service
- or
- no further action.

It is anticipated that the MASH will:

- **reduce** the number of contacts and referrals to children's social care
- **reduce** the number of re-referrals to children's social care
- **reduce** the number of Initial Assessments completed by children's social care
- **increase** in the number of CAFs completed and improve interaction between children's social care and tier 2 and universal services.

Police 121A contacts for Devon have been routed through the MASH since April 2010. From June 2010, contacts and referrals originating in North Devon and Torridge District Council areas were incorporated into the MASH, and from December 2010 it was extended to cover Exeter, East and Mid Devon District Council areas and it will cover Southern Devon from April 2011.

The operation of the MASH has reduced the number of initial contacts recorded by children's social care. Other emerging trends are a reduction in referral numbers, with a smaller proportion of referrals resulting in no further action. 2010/11 initial assessment numbers show an increase on the previous year, while core assessment numbers are lower than in 2009/10.

CYPS Referral and Assessment	2010/11	2009/10	2008/09
Number of contacts received	10,098	17,008	15,230
Number of referrals received	6,897	7,557	5,748
Number of initial assessments completed	5,755	4,948	4,401
Number of core assessments completed	2,242	2,388	1,681



Numbers of MASH outcomes forms completed each month

Year	Outcome date	Total
2010	July	440
	August	271
	September	320
	October	352
	November	350
	December	585
	2011	January
February		707
Total		3773

Outcomes from complete MASH forms

Outcome	Total	Percentage
Close or No Further Action	1002	26.5%
Children's Services Referral	1798	47.7%
Information Only or Not Multi-Agency Processed	111	2.9%
Refer to Early Response Manager for CAF or Services	862	22.9%
Total	3773	100.0%

6.2 Review of referrals and thresholds for referrals of children in need

As required in **Working Together 2010**, DSCB monitors and evaluates the sources of referrals for assessment done by DCC children's social care through various strands of audit activity. The Quality Assurance, Audit and Complaints sub-group undertakes MACAs every six months, the MASH undertakes audit activity monthly and the Early Years and Families Service undertakes bi-monthly audits on various aspects of workflow.

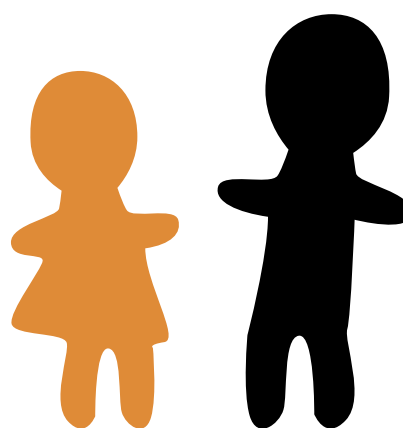
The guidance for the threshold criteria for intervention, when considering harm (Section 17, **Children Act 1989**) and significant harm (Section 47, **Children Act 1989**) has recently been updated following an increase of Section 47 enquiries in Devon compared with the national average. The Early Years and Families Service is engaged with Centre for Excellence in Outcomes (C4EO) to further consider the impact of undertaking Section 47 enquires on families.



6.3 Child protection

Working Together 2010 changed the requirement to complete initial assessments from 7 to 10 working days of referral. Current Quarter 3 figures indicate a rise in the number of children with Child Protection Plans, currently at 30 children per 10,000 of the under 18 population (up from 28.8 in 2009/10). This compares with the average England rate of 35.5. Remedial action has resulted in improvements to timeliness in initial and core assessments in Quarter 3, compared to earlier in the year.

Devon's child protection indicators continue to show good performance despite an increase in child protection plan numbers from 418 at 31 March 2010 to 431 at December 2010 with a projected year end of 470 at March 2011.



Child protection indicators	2010/11*	2009/10	2008/09
Number of children with Child Protection Plans	431	418	303
% of initial assessments within 7 working days	72.7%	74.7%	79.2%
% of core assessments for children's social care carried out within 35 working days of start	68.0%	78.9%	73.2%
% of Child Protection Plans lasting two years or more	3.3%	3.7%	5.3%
% of Child Protection Plans reviewed within time scales	98.3%	99.2%	100.0%
% of children subject to a Child Protection Plan for a second or subsequent time	14.6%	16.3%	10.8%

* **Quarter 3** - period ending 31 December 2010

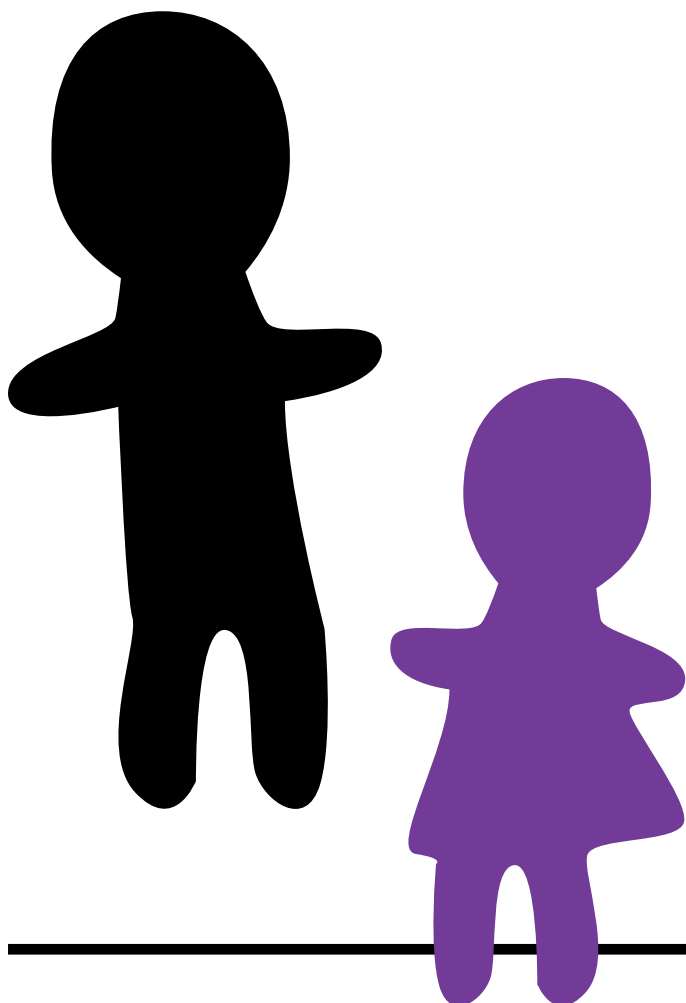


7. Financial resources

Management and Support budget

The level of contributions made by partners to cover administration and support costs for the work of the DSCB was £106,548. The actual expenditure is shown in the table, indicating an overspend of £42,791 for the year. This overspend was funded from partnership contributions carried forward from previous years.

Expenditure type	2010/11 Outturn
Staffing costs	£162,329
Travel expenses	£6,293
Child Protection Procedures	£500
Admin, venue and office costs	£12,436
Child Death Overview Panel (CDOP)	£55,148
Annual Report reprint and postage	£2,165
Serious Case Review costs	
Total	£238,871
Contributions from DSCB partners	£106,548
Funding for CDOP, independent chair and SCRs (From DCC)	£89,532
Shortfall for 2010/11	£42,791



Training budget

The budget position for the training component of the pooled budget is covered in the table below, indicating an underspend of £28,021

Expenditure type	2010/11 Outturn
Staffing costs	£87,436
Travel expenses	£2,342
Trainers	£57,593
Admin and office costs	£17,168
Venues	£28,520
Total	£193,059
Contributions from DSCB partners	£134,331
Income from training	£86,749
Shortfall or (surplus) for 2010/11	£(28,021)

In previous years any surpluses and deficits that have accumulated in these pooled budgets have been carried forward and ring-fenced with agreement of all partners.

Inflation has been added to the pooled budgets for Management and Support in 2011/12 and the partnership contributions will increase to £109,745. In addition Devon County Council are increasing their contribution to the partnership by a further £70k.

The training budget does accumulate income from delivering training to organisations who are not contributors to the formal pooled budget. During 2009/10 DSCB wanted to establish the total resource devoted to safeguarding children across all the statutory partners. Currently there is no accepted national or local method which can be applied to accurately ascertain the actual expenditure that each organisation makes towards safeguarding services.

The table below was published in the DSCB Annual Report 2010.

	Revenue	Capital	Total
Specific spend	£42,178		£42,178
Indirect spend	£39,398	£3,916	£43,314
Total	£81,576	£3,916	£85,492

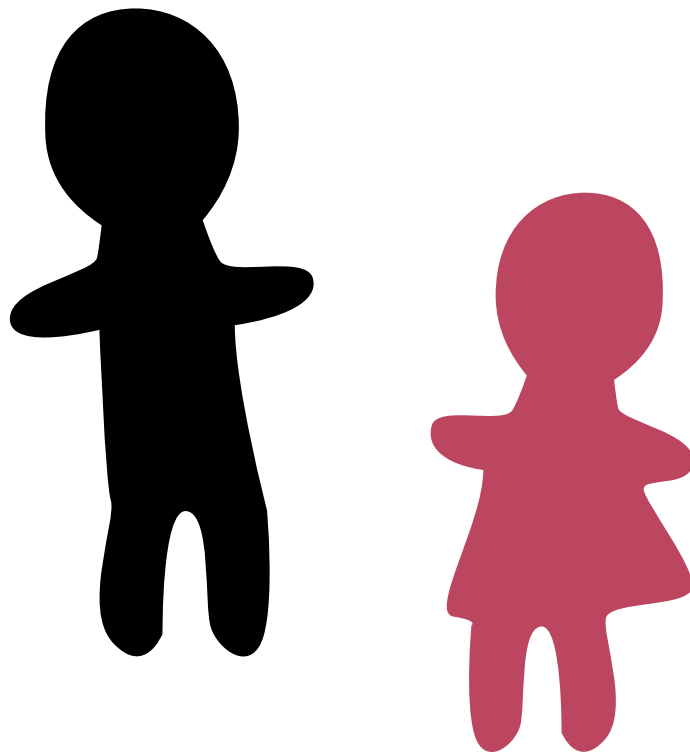
Due to the significant changes and challenges as a result of the Comprehensive Spending Review and budget settlements we have not been able to update this table for this annual report. However we intend to continue to try and identify the total resources devoted to commissioning and providing safeguarding services.



8. Monitoring, evaluation and quality assurance

DSCB prioritises monitoring, evaluation and quality assurance. The Quality Assurance Framework table describes how DSCB audits for each organisation, and across the safeguarding system:

- compliance against established standards for safeguarding
- the effectiveness of individual organisational governance, quality assurance and internal audit processes
- implementation in practice of the learning from local and national SCRs and CDOP reports
- evidencing that learning and changes to practices, procedures and policies are embedded in how individuals work to safeguard children.



Process	Frequency	Description	Undertaken by
Section 11, Children Act 2004	Annually	Auditing each organisation's governance arrangements and compliance with national standards for safeguarding as described in Section 11 of the Children Act 2004, using an agreed peninsula self-assessment tool (Cornwall, Plymouth, Torbay and Devon). Administering, evaluating and identifying required improvements from these self-assessment returns.	Each organisation and peninsula Section 11 group
MACA	Every six months	A multi-agency in-depth audit against the minimum standards of good practice, using a randomised sample of cases subject to Child Protection Plans.	DSCB Quality Assurance, Audit and Complaints sub-group
SCRs and CDOP reports	Periodically	Identify thematic issues and ensure that lessons learnt from local and national SCRs and CDOP are addressed and changes affect practice and outcomes.	Each organisation and DSCB SCR sub-group
External survey, inspection and regulation reports	Periodically	Contribute to, receive and monitor detailed reports from inspectorates and regulators of all the DSCB statutory partners including completion of action plans. All these sources of evaluation and quality assurance provide the DSCB with an overview of the key areas of co-ordination and implementation of safeguarding policies and procedures.	DSCB
Single agency audit and independent reports	Periodically	Single agency 'health checks' on the organisation's systems for safeguarding. Independently commissioned quality assurance reports.	Individual agency

8.1 Section 11 process

The peninsula Section 11 process is undertaken in partnership with Torbay, Plymouth and Cornwall LSCBs. The self-assessment tool comprises 35 standards for agencies to assess their compliance with national safeguarding requirements.

From October 2010–March 2011, 38 agencies across the peninsula updated their Section 11 self-assessment and action plans for improving safeguarding practice. The peninsula LSCBs' safeguarding auditors evaluated the Section 11 returns using an agreed quality assurance process.

The eight district councils in Devon participated in a face to face discussion with safeguarding auditors using Appreciative Inquiry which produced an action plan for each council. This provided council leaders with an opportunity to share areas of good practice and areas they wish to develop in their own council or jointly with a neighbouring council.

Most self-assessment returns were assessed as being comprehensive and transparent with evidence of monitoring and completion against the previous years' action plan. The quality of the self-assessments continues to improve on the previous years' Section 11 returns, showing a high level of agency commitment to prioritising safeguarding.



One key priority continues to be the demand for additional training. The Board is considering more efficient and cost-effective ways of delivering training during 2011/12 including the use of Action Learning Sets and e-learning packages.

The Quality Assurance, Audit and Complaints sub-group will continue to independently validate the self-assessment returns on behalf of the DSCB through a series of case file audits and 'mystery shopping' exercises during the coming year.

8.2 Multi-Agency Case Audits (MACAs)

MACAs were established in November 2008, with two audits taking place each year. The audit team consists of staff from partner agencies:

- health - including GPs and Child, Adolescent and Adult Mental Health Services (CAMHS)
- Probation
- Youth Offending Service
- police
- children's services
- schools.

Cases are randomly chosen from children subject to Child Protection Plans, and audited using a tool which includes recommendations and themes emerging from Devon's Serious Case Reviews.

The audits measure against five key themes identified as serious areas of concern from the baseline established in the first audit in November 2008. These are:

- record keeping
- multi-agency working
- risk identification
- effectiveness of Child Protection Conferences and reviews
- supervision.

To date, the case records of 80 children subject to Child Protection Plans have been audited.

The audit undertaken in April 2010 identified areas of improvement for record keeping, information sharing and supervision. Further improvement needs to be made in the quality of Child Protection Plans and early identification of risk.

In September 2010, children subject to Child Protection Plans who are managed in the Integrated Children's Service were audited. The audit team identified areas of concern regarding governance arrangements, recording systems and gaps in staff training. An action plan is now in place which will be actively monitored through the DSCB Executive and significant improvements have already been achieved.

Recommendations from the 2010 audits contain improvement requirements for individual agencies as well as the safeguarding system. Two emerging improvements identified for all agencies are:

- to create opportunities for child protection chairs and other professionals to develop skills to use the AI Model, particularly for cases which have been subject to a Child Protection Plan for more than two years or where the worker, manager or chair believes a case is not moving forward and making progress
- for babies subject to a Child Protection Plan to remain on the plan for a minimum of six months to ensure that changes occur to ensure their safety.

Last year the MACA audit team were trained in the AI Model and held AI events on two complex family situations. Participating professionals found the model a refreshing approach to consider safeguarding practice. A third AI is due to take place shortly and the approach is now embedded in the audit process.



The April 2011 audit will be offering children and their families the opportunity to give their views and feedback on a range of issues, including:

- their experience of the child protection process
- the timeliness of interventions
- their recommendations for improvements to the child protection system.

The outcomes from this audit will appear in the DSCB Annual Report 2011/12.

The audit team has reviewed their activity and will be delivering an audit process to complement developments of a 'safeguarding peer review process' which is being developed in DCC children's services.

The South West peninsula LSCB Chairs have agreed to follow Devon's MACA methodology and progress with the rollout of MACA across Torbay, Plymouth and Cornwall during 2011/12. Discussions are also underway regionally about case audit best practice which may recommend MACA as a preferred model.

8.3 Serious Case Review (SCR) and Child Death Overview Panel (CDOP) reports

Detailed consideration of evaluations from SCRs and the evidence from the CDOP are contained in separate sections later in this report. CDOP is required to produce a separate Annual Report for the Safeguarding Board which is expected in June 2011.

8.4 External survey, inspection and regulation reports

Several external inspections have demonstrated organisational improvements in safeguarding, including in the Youth Offending Service.

An Ofsted survey in May 2010 of four Devon third sector organisations provided feedback on the quality of the DSCB training (100% agreed it was of a high standard) and other aspects related to safeguarding and children in care. Of the four organisations who completed the online survey, two are involved with the DSCB and three contributed to the **Children and Young People's Plan**.

Another Ofsted survey in May 2010 reported on the views of 50 Devon social workers. This report acknowledged some good and praiseworthy aspects of social work practice in Devon, but also highlighted major concerns, such as:

- high case loads
- insufficient numbers of suitably qualified and experienced staff
- an ineffective electronic case recording system.

All of these issues are being addressed through the Devon County Council's social care re-organisation programme, Together Everyone Achieves More (TEAM).

A review of 33 Ofsted school inspection reports up to December 2010 show that no school has been judged to be Unsatisfactory for safeguarding, with a total of 16 schools receiving higher grades for safeguarding than for the school overall.



The Ofsted outcomes for safeguarding awarded to early years childcare providers across all care scheme types remain higher than seen nationally. From 1 September 2008 to 30 September 2010 the percentage of child care settings awarded a Good or Outstanding safeguarding outcome was 77% compared to the national average of 71%. The lowest outcomes are seen with home-based childminders, the percentage of those awarded a Good or Outstanding outcome showed a decrease in 2009/10.

8.5 Single Agency Audit and Independent Reports

Devon County Council's children's services conducted a Peer Review of Social Work Practice, reviewing workbooks and auditing files for June 2010 to September 2010.

The findings indicated that social workers were well-prepared, highly committed and performing well. Team members generally felt well-supported and supervised, with the quality of assessments made overall being good. Cases were allocated promptly and children and young people's views recorded. It was noted that the high number of cases that social workers carried affected the quality of supervision and timeliness, though this aspect was improving.

Following the publication of *Keeping Our School Safe*, March 2009, Sir Roger Singleton's report on improving safeguarding in independent schools, the DSCB agreed to commission an audit of the safeguarding practice of independent schools in Devon - similar to that conducted within the maintained schools sector - from the Devon Learning and Development Partnership (LDP).

The audit of 35 independent schools confirmed that:

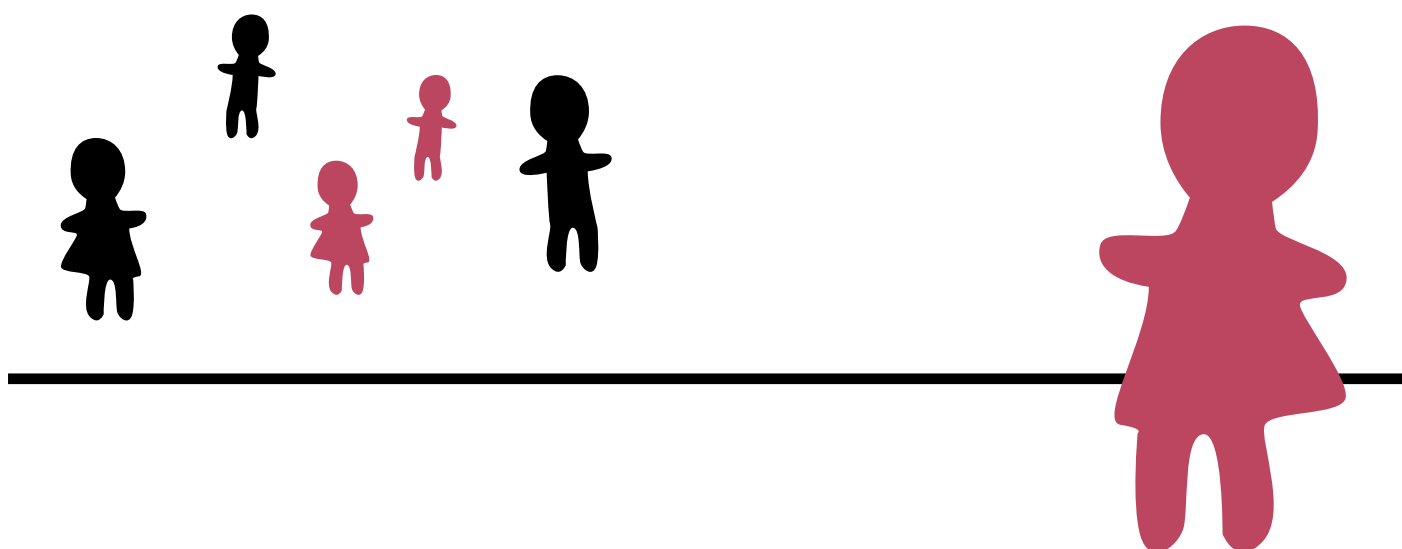
- 65% of schools were found to be carrying out excellent work to promote safeguarding with actions plans to remedy identified weaknesses
- all the schools audited had a senior designated person for child protection with child protection procedures in place
- 54% had nominated a governor to champion child protection, though not all schools have a board of governors or trustees
- none of these schools had a designated person for domestic abuse or any member of staff who had attended the adva Level 1 training which, although not statutory, is an expectation in maintained schools
- all schools reported having a safeguarding policy in line with the local authority model, though some needed updating.

The majority of schools felt that safeguarding was sufficiently covered in the curriculum through Personal, Social and Health Education and in other contexts, but many schools felt that keeping up to date with new safeguarding information was a difficulty. Understanding of the Local Area Designated Officer (LADO) procedures for dealing with allegations against staff and volunteers was variable. It is envisaged that there will be an annual assessment of independent schools.



8.6 Demonstrable improvements in outcomes as a direct result of monitoring, evaluation and quality assurance work

Process	Improvement
Section 11	<ul style="list-style-type: none"> • Engagement of district councils in developing their understanding of their safeguarding duties. • Improving quality of organisations' self-assessments. • Innovative practice will be disseminated to all agencies.
MACA	<ul style="list-style-type: none"> • MASH rolled out across Devon and nationally recognised. • Safeguarding Golden Rules principles adopted nationally as guidance for health visitors. • Findings have influenced single and multi-agency training programmes. • Completed or partially completed 30 of 32 recommendations.
SCR and CDOP reports	<ul style="list-style-type: none"> • NO SCRs. • Significant progress in embedding lessons learnt from SCRs (reported fully in Chapter 9). • Suicide prevention strategy in place.
External inspection and regulation reports	<ul style="list-style-type: none"> • No school judged to be Unsatisfactory for safeguarding. • TEAM response to address needs of social work practitioners. • Safeguarding outcomes for early years childcare providers higher than national comparators.
Single agency audit and independent reports	<ul style="list-style-type: none"> • Devon LDP support for independent schools to improve safeguarding arrangements. • Peer review approach demonstrates commitment to improving social work practice.



9. Serious Case Reviews

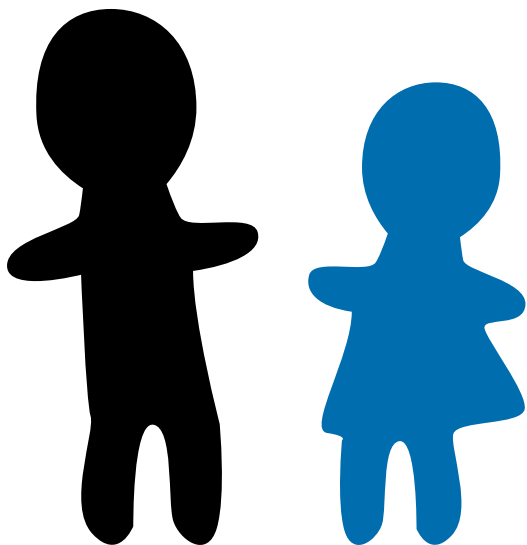
From April 2010 to March 2011 there have been no Serious Case Reviews (SCRs) in Devon.

Three unexpected child deaths were referred to Ofsted during this period as potential Serious Case Reviews, but all three deaths were eventually identified as being due to natural causes with no factors that met the criteria for a Serious Case Review.

SCRs are to:

- establish what lessons are to be learned from the case
- identify how and within what timescales they will be acted on, and what is expected to change as a result
- improve intra and inter-agency working.

It is imperative that SCR recommendations are acted on promptly and effectively.



The Ofsted report *Learning Lessons from Serious Case Reviews 2009/10* looked at 147 national SCRs carried out between April 2009 and March 2010 and identified that:

- most children were 5 or younger
- 69 were under one year old
- 90 of the children died
- 119 were known to social services at the time of the incident
- the most common issues in the family backgrounds were domestic violence, mental ill-health and drug and alcohol misuse
- where other agencies were involved with the families, important information wasn't always shared fast enough
- there were failures to deliver good practice
- professional drift occurred in some cases
- there were sometimes gaps in services
- family statements about injuries were too often accepted at face value
- focus on the needs and wishes of the child was not always sustained.

An analysis of the most recent Serious Case Reviews undertaken in Devon identified issues in the following areas:

ability to undertake a Serious Case Review

The DSCB has:

- provided training to staff who will undertake Serious Case Reviews
- updated the guidance and documentation used for Serious Case Reviews to make sure it fully reflects the most recent national guidance and best practice in conjunction with the other Peninsula LSCBs
- adopted a more robust approach to implementing the action plans arising from Serious Case Reviews to ensure that agencies disseminate the lessons learnt.



quality of record keeping and information sharing

The DSCB has:

- given prominence to the quality of record keeping in the MACAs
- reviewed some of the core recording documents to make them more user-friendly
- issued guidance to agencies on sharing information
- established the MASH to facilitate the exchange of information between the key agencies and provide a central point of referral.

multi-agency child protection training

The DSCB has:

- reviewed the full range of training programmes to make sure that they comply with the revised national guidance ***Working Together to Protect Children***
- incorporated the adva training programme into the DSCB training programme to ensure its significance in child protection is highlighted
- provided schools with a specific manual of guidance for safeguarding and appointed a safeguarding in schools officer to provide dedicated support.

adult mental health services

The DSCB has:

- worked with a range of agencies which provide services to adults to devise a protocol of good practice to safeguard children
- ensured that adult services agencies are demonstrating their responsibilities in relation to child safeguarding through the Section 11 self-assessment process.

Throughout the last year the DSCB has continued to monitor agencies actions in ensuring that the lessons learned from local and national SCRs are disseminated and that practice is amended accordingly. This is achieved through the Section 11 audit process and the MACA.

In December 2010 the DSCB worked with the British Association for the Study and Prevention of Child Abuse and Neglect to jointly organise a multi-agency conference to consider the key lessons emerging from national and local SCRs and how they should influence practice. This conference was well attended by a wide range of agencies and professionals and received positive feedback.

In May 2011 the DSCB will participate in the South West pilot of a systems approach to reviewing children's cases and conducting Serious Case Reviews developed by Professor Eileen Munro and others at SCIE. The outcomes from this pilot will be reported in the DSCB Annual Report 2011/12.



10. Child Death Overview Panel

The Child Death Overview Panel (CDOP) is commissioned by NHS Cornwall and the Isles of Scilly on behalf of the four LSCBs. Funding has been confirmed for 2011/12 through joint budget arrangements with Plymouth Primary Care Trust administering the process and employing staff to ensure delivery. A memorandum of agreement has been approved by the Peninsula LSCBs, however there are no specified additional governance and performance monitoring systems established other than through CDOP itself.

The overview of child deaths during the past three years has not identified local patterns which are at variance to the previously known epidemiology of childhood deaths, with infant deaths being the greatest number. In line with the national picture, external trauma as a modifiable factor, and in particular road traffic collisions, account for the greater portion of deaths in later childhood and young people.

Across the Peninsula 109 children have died between April 2010 and March 2011 - 105 were peninsula residents. This is less than the corresponding period for the previous year which saw 111 deaths.

The review of deaths by CDOP highlights a number of emergent themes for DSCB to consider.

- Deaths relating to children under 1 year old, including Sudden Unexpected Death in Infancy (SUDI), are identified as contributing to the highest numbers of deaths, and there is a considerable body of evidence to support clear actions for prevention of a number of contributory risk factors for infant mortality in this age group.
- Analysis of modifiable deaths showed that the most significant group (7 deaths) was those related to road traffic collisions. All were aged 10–18 years and 6 of the 7 were male. Issues arising in the review of these cases were substance and alcohol misuse, young drivers, seat belt and crash helmet use.
- End of life planning and palliative care are identified as issues in a significant number of reviews.

Category of childhood deaths in 2010/11

	Devon	Peninsula
Expected deaths	25	61
Unexpected deaths	9	17
Rapid Response	8	27
Total	42	105

One further death occurred in Devon from an out of Peninsula area resident. Two further deaths occurred in Devon from other Peninsula district residents.



There were 42 deaths of Devon resident children compared with 31 during the same period for the year before. Twenty-six of these deaths were reviewed by the CDOP panel and 21 had post-mortem examinations conducted.

Accident and Emergency and neonatal units. Deaths at home are the third most likely. Thirty-three deaths were children under 5 years old, 16 of them under 28 days old. Six deaths were young people aged 15 to 17 years.

Most recorded deaths were due to congenital or neonatal reasons occurring mainly in local

Classification of child deaths	
Suicide	1
Trauma	3
Malignancy	1
Acute Medical	2
Chronic Medical	1
Congenital	20
Neonatal	9
Infection	3
Sudden Unexpected Death, cause unknown	2

Place of death	
Home	5
Neonatal Unit	8
Neonatal Intensive Care Unit	5
Delivery Suite	4
Intensive Care Unit	4
Paediatric Intensive Care Unit	5
Children's Ward or High Dependency Unit	3
Emergency Department	7
Other	1

Annual financial forecast 2010/11

	CDOP Budget	Rapid Response Team Budget	Actual spend
Staffing	£80,888	£95,188	£172,914
Travel or hire car	£3,755	£4,881	£6,114
Stationery	£797	£800	£1,827
Training	£0	£2,000	£349
Phone and furniture	£1,354	£1,060	£2,056
15% overheads	£13,365	£15,757	£29,122
Provisions	£480	£120	£395
Data Analysis	£3,000	£1,000	£0
Total	£103,639	£120,806	£212,777



11. National Priority Areas

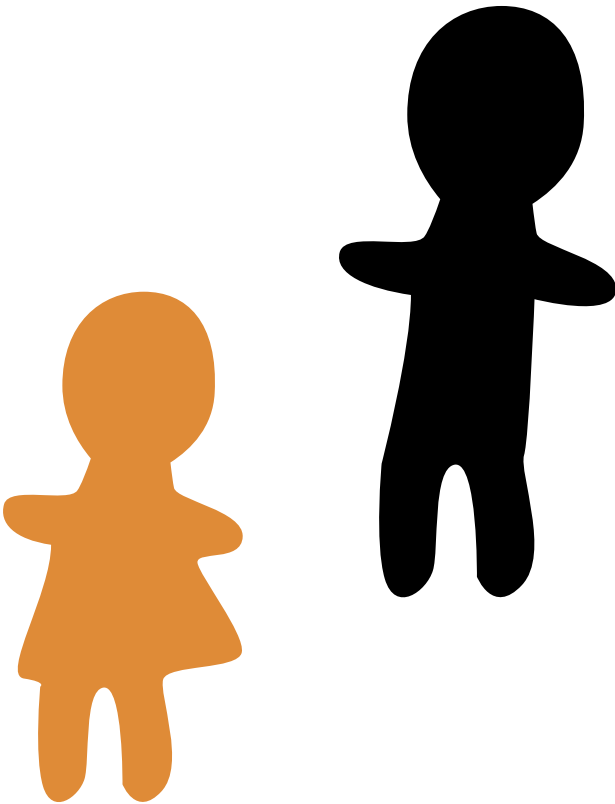
National Priority Areas as identified in the **Local Safeguarding Children Boards: Practice guidance for consultation** (March 2010) and Chapter 11 of **Working Together 2010**.

11.1 Engaging the wider community

The DSCB website was launched during 2010. The website makes available a range of safeguarding children information and external links to other safeguarding related websites. There are also specific areas for children, parents, professionals and DSCB members. From April 2010 to March 2011, over 7,000 visits to the website were recorded, with over 50% of these being new visits.

During 2010 there have been various community safeguarding awareness raising campaigns such as Safer Internet Day, the County Reducing Bullying conference, Domestic Violence Awareness week, promotion of the Private Fostering DVD and LINX (group work to break the cycle of domestic violence and abuse for 12–18 year olds) outreach work.

As part of Devon County Council's community consultation on future spending priorities, the Leader of the Council, John Hart conducted a series of Tough Choices engagement events across the County. Devon County Council also reviewed all of its services as part of its requirement to respond to serious financial reductions from Government. The outcome of both of these was that people wanted safeguarding vulnerable people to remain a priority.



11.2 Safer workforce

The annual Section 11 audit, the Local Authority Designated Officer (LADO) process and the delivery and monitoring of safeguarding training continue to be the main DSCB quality assurance processes to monitor the compliance of agencies in implementing safe recruitment.

The requirement by all agencies to have a senior officer with designated responsibility for investigating allegations made against any member of staff working with children will require close monitoring given the major structural changes that many agencies are currently undertaking.

The number of referrals to the LADO has continued to rise during 2010/11 (from January–December 2010 there were 312 referrals) indicating an increasing awareness by agencies of the importance of ensuring a safe workforce. Of these referrals, 103 didn't require a meeting following the initial referral.

The DSCB has reviewed the delivery of multi-agency safeguarding training - including safeguarding training managed by partners - during 2010/11 to ensure full compliance with the revised national guidance, latest lessons learned from SCRs, research and recommendations such as (Lord Laming's Report and the Munro Reports). The commissioning and delivery of training has also been revised to be more effective and efficient. The DSCB Training and Workforce Development sub-group has again achieved its objective of meeting the increased demand for places across the whole range of training offered.

Safeguarding children with disabilities training has been developed and is being delivered across a range of agencies.

Safeguarding Training Quality Assurance

Course evaluations have remained positive for all programmes with the exception of refreshers, and action to address this has been taken.

In line with the national study *Outcomes of inter-agency training to Safeguard Children* (Carpenter and others 2010) further work is required to address shortcomings in evaluation and impact analysis. Devon has joined a South West peninsula quality assurance project which will focus on assessing the impact of safeguarding training, linked to supervision.

The DSCB range of programmes has increased for 2011/12 through recognising partners as leads for DSCB core training programmes. These include:

- safer recruitment training led by the Learning and Development Partnership
- e-safety led by the e-safety sub-group
- domestic violence led by adva.

Five thousand e-learning licences have been purchased at levels 1-3 and pilots for specialist e-learning have been launched. Course attendance has generally remained constant from last year.



Course attendance for DSCB safeguarding training

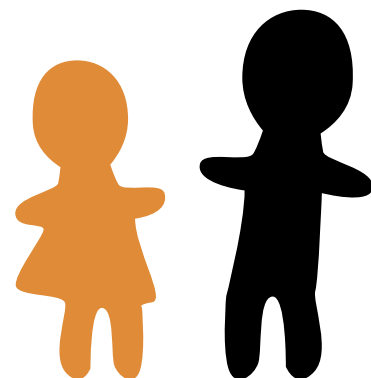
DSCB Safeguarding Courses 2010/11	Number of participants 2010/11	Number of participants 2009/10
Safeguarding Level 3 - 2 day and refresher	1276	1313
Professional Safeguarding Child Protection Level 3 (Groups D&E only)	126	
Safeguarding Level 4	119	102
Emotional Abuse and Neglect Level 4	49	15
Child Sexual Abuse Level 4	34	32
Serious Case Reviews Level 4 (specialist)	21	108
Assessing Risk in Safeguarding	29	71
Individual Management Review (for writers involved in SCRs)	6	40
Attachment in high criticism and low warmth families	37	35
Safeguarding Disabled Children and Young People	39	
Disability Conference	110	
Total number of participants	1846	2099

Learning and Development Partnership (LDP) Safeguarding Courses 2010/11	Number of participants
Child Protection Awareness Raising	2175
Safer Recruitment	330
Safer Recruitment for Administrative Staff in Schools	220
Stay Safe for Governors	200
E-safety	100
Total number of participants	3025



Adva courses	Number of participants		
	2010/11	2009/10	2008/09
Tackling Domestic Violence and Abuse Level 1	825	946	929
Tackling DVA: the impact on children Level 2	199	162	165
The MARAC process/preventing Murder and Serious Harm	155	176	154
Tackling perpetrators of DVA	57	52	138
Managers tackling DVA	67	83	208
DVA Awareness raising for schools in Devon	41	60	45
Tackling DVA Awareness Raising for Councillors	0	8	16
In-house adva courses	64	39	123
In-house adva courses commissioned by single agency	45	191	0
GP training	23	0	68
Multi-agency training	0	0	0
Total number of participants	1476	1718	1846

During July 2010 additional training places resulted in all lead early years and childcare practitioners previously on a waiting list now holding a level 3 Foundation Safeguarding certificate. Five early years practitioners attended Safeguarding Train the Trainer to increase the number of trainers to help meet increased demand for safeguarding training.



Percentage of settings with staff holding a level 3 Foundation Safeguarding Certificate

	Childminder	Day-care at least 4 hours a day	Day-care less than 4 hours a day	Ofsted Registered Out of School Clubs
2007/8	2.52%	10.93%	7.84%	14.44%
2008/9	4.53%	33.77%	35.29%	25.56%
2009/10	5.91%	75.50%	71.57%	44.44%



11.3 Missing children

Between 1 April 2010 and 31 December 2010, there were 3,132 incidences where children and young people under the age of 18 were reported missing in Devon. There is little or no alteration to the percentages previously reported in the 2009/10 Annual Report for repeat incidents or the age groups of those concerned. Section 11.6 provides reasons why monitoring and reducing the incidence of missing children is so important.

Number of reports of missing children under 18 years found between 1 April 2010 and 31 December 2010 - 11 reports remained open at 31 December 2010

Found within 24 hours	Found between 24–48 hours	Found between 3 and 6 days	Found after more than 7 days
2643	313	121	44

Between 7 March 2010 and 7 March 2011, 358 children were newly registered as missing from education and 391 were located. There are currently 91 children who are registered as missing from education. Eight school attendance orders have been issued in the last 12 months.

Recent improvements to tracking children missing education have focused on:

- liaising with health colleagues to help identify children arriving in Devon from other areas who do not have a school place
- automatic electronic notification to Devon County Council of children taken off school rolls
- notifying the Education Welfare Service of all children being taken off roll to be home educated, triggering safeguarding alerts to the Elective Home Education Service
- fast-track home visits by Elective Home

Education Advisers or Children Missing Education Welfare Officers to families with welfare or safeguarding concerns

- school attendance orders quickly invoked where concerns are raised.

Devon has 413 children who are registered as being educated at home.

11.4 Violence against women and girls

The Government's **Call to End Violence Against Women and Girls (VAWG): Action Plan**, March 2011 sets out its commitment to move towards ending violent crimes against women and girls.

During 2010/11, 3,472 females were victims of violent crime in Devon, this equates to 9.1 per 1,000 population. Across Devon and Cornwall, 10,023 females were victims of violent crime for the same period, which equates to 11.7 per 1,000 population.

The number of victims in Devon has remained relatively stable compared to previous years with 3,461 female victims in 2009/10 and 3,473 in 2008/09.

In Devon actions to prevent domestic violence and Devon's response to the VAWG Action Plan will be considered as part of the remit of the Peninsula Sexual Assault Referral Centre Board.

The latest available statistics on sexual assault and rape across Devon and Torbay show that there were 650 offences recorded in 2008/9, with Torbay and Exeter areas having the highest rates. Although sexual assault accounts for less than 1% of all recorded crime, there is significant under-reporting. Studies suggest that only 15% of rape allegations by people aged 16 years and



over are reported to the police. Women and girls are most affected by sexual violence and abuse. Most perpetrators are known to the victims and many are partners or family members.

For violence against women and girls (and children), there is a lack of accurate statistics on disclosures of sexual abuse of children and young people or the outcomes of disclosure, and there has been an historic lack of a co-ordinated and commissioned service. This issue was raised by Ofsted in their review in 2009, and since then NHS Devon has worked with the health community locally to ensure an interim service was provided to meet this need. Now a comprehensive paediatric sexual abuse examination service has been commissioned which covers acute and historic cases. The new service, to be provided by G4S, is anticipated to start in July 2011.

The newly-formed Devon Rape Crisis Service, one of four groups in the country to receive funding from the Ministry of Justice, will provide face to face holistic advocacy and a telephone helpline across Devon to victims of rape and sexual assault.

The nearest specialist Female Genital Mutilation clinic is in Easton, Bristol.

11.5 Forced marriage

Two crimes relating to forced or arranged marriage were recorded by police in Devon during 2010/11. This compares with three in 2009/10 and none in 2008/09. Across Devon and Cornwall, four crimes were recorded in 2010/11, five in 2009/10 and none in 2008/09.

11.6 Child trafficking and sexual exploitation

Recent reports by the Child Exploitation and Online Protection Centre (CEOP) and Barnardo's have indicated that the use of the internet in child exploitation is a growing issue, with a 16% increase in the number of cases in a year, a quarter of these from online grooming. The Barnardo's report *Puppet on a String*, states that incidences of trafficking children around Britain for sexual exploitation is rising, with children as young as 10 being groomed by predatory gangs.

The report also reveals that the average age of victims has fallen from 15 to 13 in the past five years and highlighted that a number of primary school children have admitted to meeting someone whom they previously met only online. Other studies suggest that almost 60% of children aged 9–19 have viewed online pornography and the rate of unwitting exposure is increasing. Any child may be at risk of sexual exploitation, regardless of their gender, race or social background, with factors such as living in care, being a runaway or having a mental health problem all increasing a young person's vulnerability to sexual exploitation.

The link with running away or going missing is an extremely strong indicator of risk.

Currently there are no national statistics to mark the prevalence of child exploitation. In Devon no crimes related to trafficking for sexual exploitation have been recorded by the police during 2010/11. Two crimes were recorded in 2009/10 and none during 2008/09. Across Devon and Cornwall, two crimes were recorded in 2010/11, seven in 2009/10 and one during 2008/09. Research from the Children's Society has shown that victims aged 16–17 are particularly unlikely to receive a safeguarding response, often being seen as low priority.



11.7 Bullying, e-safety and racist incidents

The work to reducing bullying in Devon, which involves more than 25 partners and organisations, has continued with many successes.

- Second County Reducing Bullying Conference involving young people included over 100 adults and was held in October 2010.
- 97.5% of schools achieved healthy schools status which includes a focus on bullying.
- Over 250 adults attended sex and relationship education courses which include a focus on tackling homophobic bullying.
- The Anti-Bullying Self-Review Framework produced in 2009/10 has been well-received in primary and secondary schools.
- A countywide anti-bullying training programme has been implemented involving a range of partners, including Educational Psychologists, Education Welfare Officers, B and A Consultants and Healthy Schools.
- A reduction in the number of persistently absent young people from schools, including those citing bullying as a reason.
- The extension of restorative approaches in schools and Pupil Referral Units.
- The Healthy Early Years Settings Handbook has been well received and supported by a countywide training programme.
- The very successful Skin Deep resource has been extended and developed.

Bullying-related incidents of bad behaviour on school transport have remained constant. In the academic year from 1 September 2010 to 20 May 2011 there were 187 reported incidents of bad behaviour on school transport, of these 38 were bullying related.

In Devon during 2010/11, there were 263 crime (out of 817 across Devon and Cornwall) and 59 non-crime (compared with 160 across Devon and Cornwall) incidents recorded by the police as motivated by hate and specifically racist. Racist incident data collected by the English as an Additional Language Team in 2009/10 revealed that 25 schools reported 47 racist incidents.

Ofsted's **National Children in Care Monitor 2009** reported the views of 1,195 children and young people, stating that children felt safest in the building where they live, next safest in school or college, then in the countryside and least safe in towns and cities, with disabled children feeling less safe in towns and cities than other children. The top dangers to children and young people were seen as drugs, alcohol, knives, strangers and kidnapping, and bullying. 69% of respondents said that they were hardly ever or never bullied, (9% said they were being bullied often or always), with the most common form being teasing or name calling. 20% of those in care said they were bullied for being in care.

The **Risks and Safety on the Internet** report in October 2010 of over 25,000 children aged 9–16 from 25 European Union countries, including the United Kingdom, was co-ordinated by the London School of Economics and Political Science and found that:

- 93% of these children go online weekly (60% nearly daily)
- the average start age is between 7 and 8 years old
- these children use the internet mostly for school work, playing games, watching video clips and instant messaging
- 59% of these children have a social network profile.



The online risks for children and young people include:

- seeing sexual images or receiving sexual messages
- being bullied
- being exposed to potential harmful user generated content (hate, drug taking, self-harm, pro-anorexia or suicide)
- misuse of personal data and excessive computer use.

The Report concluded that:

- 14% had seen images online of a sexual nature in the past 12 months with 1 in 3 (2% of all children) being bothered by what they saw - over half told someone when it last happened
- 15% of 11–16 year olds had received peer to peer 'sexual images or messages' (sexting) and nearly a quarter of these were bothered by this
- 6% had been sent nasty or hurtful messages (3% saying they had sent such messages to others), over half of those who received bullying messages were fairly or very upset.

Parents were also asked their views.

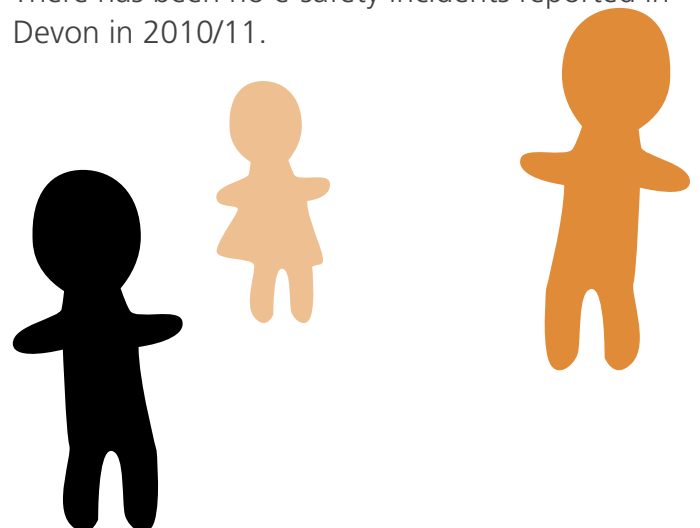
- Parents of children who had experienced one of the risks didn't realise they had.
- 40% of parents whose child had seen sexual images online believed that their child had not seen them.
- 56% of parents whose child had received nasty or hurtful messages online believed their child had not.
- 52% of parents whose child had received sexual messages believed that their child had not.

This report has implications for safeguarding in Devon. It states that most parents want far more information on internet safety than they actually get and that they would prefer to get this information from their child's school.

Devon supported UK Safer Internet Day on 8 February 2011 which included a live 12 hour radio programme across the internet with advice, debate, fact and opinion targeting a diverse range of web users, from 5-7 year olds, teenagers and those in the teaching profession. On 16 March 2011, the UK's first ever helpline for professionals, specifically dealing with e-safety issues was promoted with the Devon launch of the Professionals Online Safety Helpline (POSH).

The charitable Exeter-based South West Grid for Learning Trust, which is part owned by Devon County Council, won a prestigious national award for helping keep children safe online in the British Education and Training Technology Awards in 2011. South West Grid for Learning won the accolade for leadership and management solutions for their 360-degree safe programme designed to help schools keep children safe online and give assurances to parents.

There has been no e-safety incidents reported in Devon in 2010/11.



12. Local Priority Areas

12.1 The voices of children and young people

Ofsted's national report *The voice of the child* which has an analysis of 67 SCRs between April and September 2010, has five main messages about the importance of listening to the voice of the child.

In too many cases:

1. the child was not seen frequently enough by the professionals involved, or was not asked about their views and feelings
2. agencies did not listen to adults who tried to speak on behalf of the child and who had important information to contribute
3. parents and carers prevented professionals from seeing and listening to the child
4. practitioners focused too much on the needs of the parents, especially on vulnerable parents, and overlooked the implications for the child
5. agencies did not interpret their findings well enough to protect the child.

In Devon the Joint Engagement Board meets monthly to review all messages from young people from across partner agencies and agree a plan of action. During 2010/11 fostering processes were updated to ensure the voice of the child and young person in placement is more consistently heard.

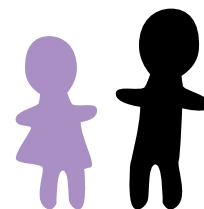
Other mechanisms for hearing the views of children and young people include:

- **Independent Review** Participation by children and young people in their statutory reviews is monitored by the Independent Review Unit and reported to the Children's Services Senior Management Team.

During October to December 2010, 58% of children aged four or older attended their reviews and spoke for themselves, 11% did not send their views, the remaining used an advocate, Independent Review Officer (IRO) or someone to speak for them.

- **Independent Advocacy** has been contracted to an independent sector provider, which provides independent advocates for children and young people and independent visitors for the most isolated children and young people in care. *The Care Planning, Placement and Case Review Regulations 2010* and statutory guidance will extend the independent reviewing requirements to a wider range of children and young people (for example those who receive a series of planned short respite breaks) to increase the ability of these children and young people to have their voice heard.
- **Young Witness Support Scheme** The DSCB in conjunction with the South West peninsula LSCBs and the NSPCC continues to fund this scheme to provide independent support and advocacy for child victims of abuse who are required to give evidence in criminal proceedings.
- **Messages from the Voices of Children and Young People Report July 2010** The report collates the views of many groups of vulnerable children and young people from all Devon Children's Trust partners, setting out what actions have occurred as a result of children's views.





The Devon Child Care Sufficiency

Assessment 2011 reported how safe and protected 485 children aged 3-18 years felt. The results indicated that:

- 82% of children said they felt safe and protected everyday at home, the rest sometimes safe
- over two thirds reported that they felt safe and protected everyday at school, the rest sometimes safe
- a large proportion (69%) of children felt safe and protected every day going to and from school
- just under two thirds reported that they felt safe and protected every day in the town or village where they live.

Children said the reasons for not feeling safe were being on their own, when it is dark, in traffic and when older children are around.

Ofsted's **Children in Care Monitor 2009**

reported the views of children and young people in care, stating that:

- 53% of children in care knew how to get an advocate but 29% didn't know what an advocate was
- 48% knew how to get in touch with their Independent Reviewing Officer (IRO), but 23% didn't know what an IRO was
- 67% knew what was in their care plan, 65% had a say in it and 68% agreed with it, 82% said it was being kept to.

The most important children's right voted by 1,888 children was the right to be protected from abuse. Devon has initiated a survivors of DVA group to support and understand the views of children and young people and help with the DVA awareness raising work.

12.2 Unintentional injury

The joint Audit Commission and Healthcare Commission's **Better Safe than Sorry Report** (2007) stated that:

- unintentional injury is the leading cause of death among children and young people aged 1–14, with the majority involved in road injury
- children under 5 carry a disproportionate burden of injuries from falls and fires, nationally this equated to 71% of all childhood fatalities from fire in 1997 and 1998
- while death rates are falling two million children and young people visit a UK accident and emergency department each year as a result of non-fatal injuries and in England alone, around 100,000 children and young people aged under 15 were admitted to hospitals in 2009/10 as a result of such injuries.

At the request of the DSCB, the strategy **Preventing Unintentional Injuries in Children and Young People in Devon** was prepared, capturing the current picture of unintentional injury in children nationally and locally. This strategy identifies current programmes and initiatives taking place in Devon among the various agencies and organisations to help prevent unintentional injuries.

A multi-agency partnership, Devon Preventing Unintentional Injuries in Children and Young People has been established to oversee the implementation of this strategy with a clear focus on evidence-based practice underpinning the implementation. The National Institute of Health and Clinical Excellence (NICE) published guidance in November 2010 on strategies to



prevent unintentional injuries for children and young people aged under 15. The partnership examined the impact of the Government's Comprehensive Spending Review on the preventative programmes in Devon and is using the NICE guidance to support a partnership approach to the programmes and interventions to help prevent unintentional injuries.

12.3 The Joint Strategic Needs Assessment

Following the publication of the Joint Strategic Needs Assessment (JSNA) of safeguarding children in 2009/10, the importance of the impact of violence and abuse on children, young people and adults was highlighted and the JSNA Domestic and Sexual Violence and Abuse 2010 was commissioned. This assessment links childhood sexual abuse with domestic violence in adulthood, recognises the impact of violence and abuse on mental health and provides appreciation of the impact of interventions at different stages of the life course.

The report raises significant issues and challenges about the responses required to the volume and nature of victims of domestic abuse and sexual violence, with particular emphasis on recognising unmet mental health issues that are directly as a result of domestic and sexual abuse. This JSNA produced a number of recommendations for key agencies in Devon to ensure that commissioned services are put in the mainstream to meet the wide range of health and wellbeing needs arising from people affected by domestic and sexual violence and abuse.

Progress on these recommendations will be reported in the DSCB Annual Report 2011/12.

12.4 Domestic violence

The Devon JSNA for Domestic and Sexual Violence and Abuse identified changes to the deployment of single and multi-agency resources to respond to domestic violence needs and associated factors, such as the behaviours of adults that endanger the wellbeing and safety of children. The report noted:

- that very little research is done in this area, particularly evaluating interventions, which is critical to understanding an individual's life course
- the need to raise awareness of the high prevalence of domestic violence throughout the peninsula.

One such awareness raising campaign, linked to the Home Office domestic violence campaign aimed at teenagers, was highlighted in Devon through the use of a short animated film based on real life experiences of teenage girls from the Exeter LINX project. LINX uses group work to break the cycle of domestic violence and abuse for 12–18 year olds. This film was also shared across the county using Bluetooth technology during Raising Awareness Week. One out of every three girls interviewed as part of a Home Office survey, said they had been sexually assaulted by a boyfriend, with 25% girls and 18% boys saying they had been physically hit or attacked by a partner.

Many of Devon's Health Care Trusts routinely ask women over 16 years of age about domestic abuse as part of their clinical assessment and if pregnant they are asked regardless of age.

Based on the current Devon female population aged 16-59 the Home Office Ready Reckoner estimates that 7% (13,920) of women and girls in this age group have been a victim of domestic violence during 2009/10.



Over 24% of reported violent crime in Devon during 2009/10 was domestic violence related. Of the 9,151 reported incidents, 4259 (47%) had children present in the household. From this there were 935 convictions for domestic abuse crimes in Devon. There were three domestic homicides from April 2009 to September 2010.

In March 2010 a sample of Devon’s children with Child Protection Plans showed that 65% of them had previously, or were currently, living in a household experiencing domestic violence.

A protocol and care pathway for health support for children in Devon’s women’s refuges is now in place. During 2009/10, the three refuges admitted 178 adults and 192 children and young people.

According to the Joint Strategic Needs Assessment for DVA, there is no specialist domestic violence programmes in Devon prisons for perpetrators. This raises particular concerns regarding those whose sentences are for less than 12 months, though adva does fund a voluntary community-based perpetrator programme which includes work with partners and children as a whole family intervention approach. In 2009/10 this worked with 199 men, 68 partners and 23 children.

Additionally other adva commissioned services dealt with 2709 individuals during the year, comprising:

- 1488 women’s outreach
- 77 male victims
- 329 children and young people
- 598 MARAC cases
- 612 specialist domestic violence court cases.

The MARAC national picture from 1 July 2009 to 30 June 2010, shows that the number of cases seen has continued to increase, with a corresponding increase in the number of children. Repeat victimisation has decreased and multi-agency referrals increased. Devon figures show repeat victimisation at 16% as a rolling average to December 2010, compared with 21% nationally and 22% for the South West. During 2009/10 a total of 703 cases involving 907 children were presented to the four MARACs across Devon.

National MARAC data	2009/10	2008/9
Total number of MARACs that submitted data	245	201
Number of cases seen at these MARACs	43,624	29,702
Number of children in these families	59,238	40,974
% of repeat cases seen at these MARACs	21%	23%
% of non-police referrals to these MARACs	33%	31%
% of these cases with a Black and Minority Ethnic background	12%	9%

The levels of safeguarding risk as a result of funding cuts on the number of MARACs, the children’s work in refuges, levels of DVA and outreach work may create increased demand on mainstream services. The DSCB commissioned review of MARACs across the peninsula identified concerns around the provision of consistent risk assessments of children and young people. The DSCB has taken on responsibility for MARAC governance and will review the effectiveness of this arrangement in 2011/12.



12.5 Private fostering

Private fostering awareness-raising for colleagues and the public has been consolidated during 2010/11, including using the British Association for Adoption and Fostering (BAAF) private fostering film. Initiatives include contact with faith organisations, the military and further independent schools.

Notifications of arrangements have come from new sources and have continued to rise over time, demonstrating the effectiveness of the development work. The Private Fostering Team received 107 notifications (compared with 86 in 2009/10 and 76 in 2008/09). At March 2011 there were 38 private fostering arrangements in Devon.

Private fostering compliance	2010/11	2009/10	2008/9
Initial visits within the required seven days	70.1%	73.3%	39.5%
Statutory six weekly visits	74.0%	86.6%	20.7%
Continuing arrangements scheduled visits	77.4%	52.2%	44.4 %

12.6 DSCB health safeguarding

The first Annual Report from NHS Devon on the health services provided for children in care reviewed services delivered from August 2008–September 2009 to children by specialist nursing and paediatric services working in partnership with Devon County Council Children’s Services. The report shows the contribution good healthcare makes to improving lives of children in care and on the edge of care.

It is a statutory requirement for NHS Boards to receive an annual report on safeguarding children. The annual report for 2009/10 sets out the activity on safeguarding children and Child Protection by NHS Devon and is available at: www.devonpct.nhs.uk/Topics/Safeguarding_Children.aspx

An initial GP audit in 2009 identified several key areas for improvement. A follow up audit on the arrangements in place in general practice to safeguard children, indicated improvements in safeguarding arrangements in general practices, notably:

- the number of practices which recorded having safeguarding policies and systems in place has increased from 20% to 67%
- the percentage of practices recording clinical governance compliance has increased from 46% to 76%
- the percentage of practices demonstrating full or partial compliance in relation to staff training has increased from 78% to 98%.

Annual audits are also arranged to check compliance with recommendations made for training for GPs and practice staff and this has included the roll out of the Common Assessment Framework (CAF).



The first MACA in November 2008 and the Ofsted inspection in 2009 recognised weaknesses in the relationship between mental health services to adults provided by Devon Partnership Trust (DPT) and the children's safeguarding arrangements in Devon. These have now had substantial improvements including:

- identifying Executive and non-executive leads at Board level and senior management leads for child safeguarding issues
- developing a set of practice standards for all clinical staff and monitoring performance against these through practice quality audits
- all staff receiving training and information to support compliance at level 1, with 85% of staff completing the e-learning module
- conducting an internal audit review of safeguarding procedures in January 2010
- putting in place attendance at Devon's four MARACs
- developing a transition protocol and engaging with the Quality Improvement and Redesign Group.

A safeguarding children audit, similar to the one undertaken by general practices, was also circulated to other independent contractors in NHS Devon to assess their current arrangements for safeguarding children. A contractor specific audit was devised and sent to all the independent contractors in NHS Devon comprising all dental practices, pharmacists and optometrists. The outcomes of the audit demonstrated that while some independent contractors were able to provide assurances across the spectrum of safeguarding standards, the majority need to improve their practice if they are to comply with the national safeguarding guidelines.

12.7 Substance misuse

A Joint Protocol between a range of adult treatment services, including domestic violence and mental health, and children and family services, aims to ensure that children in households where there are specific parental needs are protected from harm and their welfare needs are considered of paramount importance.

Only 14 referrals were made by children and family services to adult drug treatment services. This highlights the need for the Joint Protocol to ensure that practitioners are aware of services available and the referral routes into them.

The requirements of the substance misuse workforce to understand safeguarding of children is leading to:

- substance misuse training to be under the DSCB Training sub-group
- all supervision sessions to consider safeguarding children
- use of drug screening in child protection cases.

Data from April 2010 to March 2011 shows a total of 256 young people in treatment, of which 156 started treatment during this period. The age range covered 13-22 year olds with nearly three quarters of the young people (191) aged 15-17. The primary substances young people are treated for are cannabis (56%) and alcohol (32%). This reflects the national picture which shows that in 9 out of 10 cases the reason for young people to receive help during the last year was for cannabis or alcohol or both.



There were 1,275 adult drug users in treatment from 1 January 2010 to 31 December 2010, of which 1,206 were problematic drug users using crack cocaine or heroin or both. 452 drug users started new treatment journeys and 421 new treatment journeys were for problematic drug users. Of those who started new treatment journeys 25% (119) were individuals with children.

From April 2010 to March 2011 a further 1,785 service users were seen with alcohol as the primary drug, with 1,248 presenting as new service users.

12.8 Secure settings

The Atkinson Centre achieved a Good in all areas with some outstanding features in its education provision in Ofsted's Triennial Inspection in October 2010. Inspectors commented on the commitment of staff and the good quality of care provided. The Centre's license has been extended for a further three years and a programme of bedroom refurbishment has commenced.

Thirty young people were admitted between April 2010-September 2010, 10 of whom were from Devon. This compares with 27 admittances during the same period in 2009, of which 6 were from Devon.

All staff have undergone a three day training course in restorative approaches to promote a child-centred atmosphere in the Centre. This approach allows young people to take responsibility for, and see the consequences of, their actions. This has seen a decrease in the need for restraint, with consistently low numbers of restraint incidences - during April 2010-September 2010 there were 32 incidents compared with 219 for the same time in the previous year.

The Centre has further developed its life skills programme by converting two bedrooms into a laundry and a kitchenette to give young people the opportunity to gain valuable skills and promote independent living.

12.9 Children in the criminal justice system

In 2010 the Youth Justice Board validated the Devon Youth Offending Service as performing 'Excellent' against the national indicator set, and as having 'Excellent' capacity and capability to sustain and improve performance.

The impact of the Government's Comprehensive Spending Review and partner funding reductions is not yet fully known. Safeguarding and risk of harm management, together with the management of statutory Court Orders and cases remain a priority. However a risk remains for the future of non-statutory youth crime prevention and early intervention work which contributes so effectively in identifying, intervening and preventing young people 'at risk' of offending entering the criminal justice system.

Devon has relatively low rates of offending by children and young people, with a drop in the number of young people entering the justice system for the first time, representing a reduction of 7% (April 2010-December 2010) compared to the same period last year. The rate of re-offending (at the latest measure) in 2010 has reduced by 31.4% against the baseline year of 2005. The number of young people receiving custodial sentences in Devon is also low. In the period April 2010-December 2010, eight young people in Devon received custodial sentences out of 511 total court disposals. This represents a rate of 1.6%. Since 2007/08 the young people offending population in Devon has reduced by 37.8%.



Children in the criminal justice system	2010/11	2009/10
Number of young people entering the justice system for the first time	510	550
Number of young people re-offending	82 out of 244	133 out of 425
Custody rate of young offenders of all court disposals	2.0%	2.4%
Number of youth offences	1799	1891

The following table demonstrates the strength of safeguarding work with children who offend, or are at risk of offending.

Devon Youth Offending Service CAMHS Pathway	Multi-disciplinary consultation sessions, including CAMHS, Speech and Language Therapist, Educational Psychologist and Family Therapist.
MASH	Youth Offending Service involved with MASH both at strategic and operational levels.
Multi-Agency Risk Panels	Monthly meetings review high-risk young people and develop and implement multi-agency action and intervention plans for these young people.
LINX	Specific interventions and group-work activities for young people who have witnessed or experienced domestic abuse, or are showing signs of violent behaviour towards others.

12.10 Children of offenders

It is recognised by Devon and Cornwall Probation Trust that:

- children of prisoners are three times more likely to be involved in delinquent behaviour than their peers
- children of prisoners are three times more at risk of developing mental health problems
- 65% of boys with a parent in prison go on to offend.

Of the current 1,068 Devon offenders supervised by the Devon Local Delivery Unit of Devon and Cornwall Probation Trust 18% are serving custodial sentences in prison or have been recently released from prison. There are 687 children associated with 326 of these offenders, most of these children are managed at level 1 (universal services) with the remainder (203)

managed at levels 2–4 (CAF or subject to Child Protection Plan).

At March 2011 there were 46 offenders associated with children that also have the most serious of issues of domestic violence, mental health and substance misuse.

A recent Probation Inspection in Devon and Cornwall concluded that multi-agency child protection procedures were operated in 17 out of 21 cases reviewed. Recording was clear and decisions taken had been followed through in all but two cases. Overall, Her Majesty's Inspectorate of Probation judged that Devon and Cornwall Probation Trust staff had contributed effectively to multi-agency child protection procedures in 86% of cases where children were subject to a Child Protection Plan.



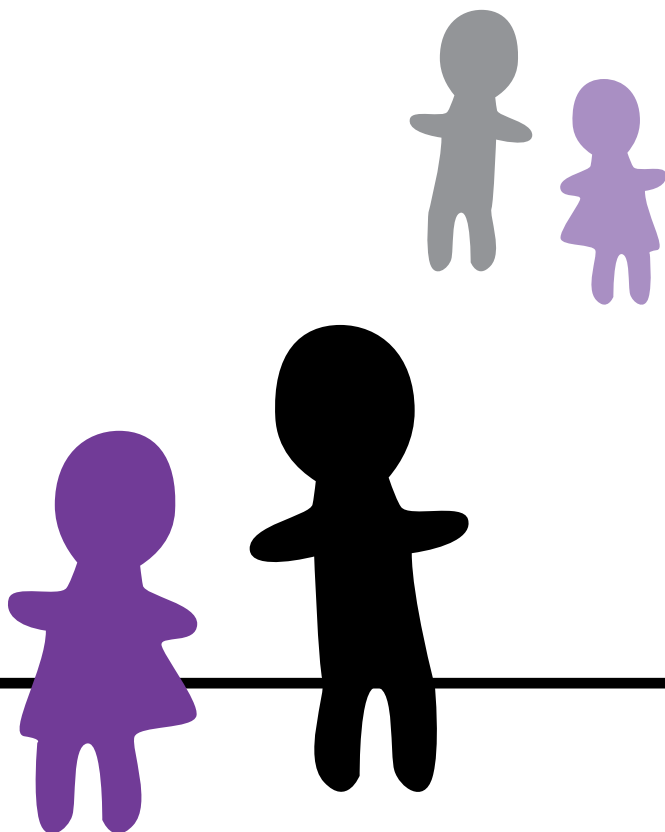
In cases where there were lower level safeguarding issues, Devon and Cornwall Probation Trust's multi-agency work did not contribute effectively to the management of risk of harm in 40% of cases. Furthermore, offender sentence plans did not include objectives to safeguard their children in almost half the inspected cases, and home visits undertaken by probation staff were fewer than was considered required. These areas are addressed in the Devon and Cornwall Probation Trust's 2011/12 action plan.

12.11 Multi-Agency Public Protection Arrangements (MAPPA)

Through MAPPA, key partners set out to identify, assess and manage high risk and potentially dangerous offenders in the community, including those who offend against children and young people. Rehabilitation of offenders is a challenge and MAPPA partners work hard to ensure help, support and intervention complements necessary controls enabling them to make positive changes to their lives. Any change in behaviour or circumstances that could increase risk of harm elicits a tough approach to enforcement of court orders and prison licences.

According to the MAPPA Annual Report 2009/10, there were 1,041 registered sexual offenders across the peninsula with 463 registered in Devon (during 2009/10). Key recent achievements include the development of circles of support providing intensive voluntary personal contacts to reduce the likelihood of re-offending, and identifying the mental health needs of some offenders ensuring that treatment occurs throughout the MAPPA arrangements,

Protecting people, particularly children, from violent or sexual crime is one the highest priorities in Devon and the MAPPA arrangements safeguard the public from potentially dangerous offenders.



13. Appendices

Appendix a

DSCB members attendance April 2010-March 2011

Note: Where the representative of an organisation changed during the year this is shown with both names together.

DSCB meetings were held on

11 June 2010, 10 September 2010, 10 December 2010 and 11 March 2011.

Agency	Name	Role	% attendance at board meetings, including substitutes
Independent	Alan Wooderson	Chair of the DSCB	100%
Children and Family Court Advisory and Support Service (CAFCASS)	Vicki Heywood	Service Manager	75%
Careers South West Ltd (Connexions)	John Davey	Director of Service Delivery	75% / 25%
NSPCC	Alison Kearnes (left September 2010)	Assistant Director NSPCC	25%
	Geoff Gurney (from March 2010)		25%
Voluntary Youth Services	Mark Goodman	Manager	75%
Devon and Cornwall Constabulary	Nigel Boulton (for Chief Supt Jo Tennant) (Retired September 2010)	Superintendent	50%
Devon and Cornwall Constabulary	John Clements	Detective Superintendent	100%
Devon and Cornwall Probation Area	Anne Proctor (left Sept 2010)	Assistant Chief Officer	25%
	Charlotte Coker	Assistant Chief Officer	50%
Devon County Council	Andrea Davis	Councillor and Lead Member	50%
Devon County Council Children's Services	Judith Johnson	Director for Learning and Schools	50% / 50%



Devon County Council Children's Services	Rory McCallum	Director of Early Years and Families	100%
Devon County Council Children's Services	Anne Whiteley	Executive Director	100%
Devon County Council Children's Services	Chris Dimmelow	Head of Safeguarding	100%
Devon County Council Children's Services	Brenda Bartlett (from September 2010)	Assistant Director of Children's Services	50%
Devon County Council Youth Offending Team	Jim Wood	Area Manager for Devon Youth Offending Team Exeter, East and Mid Devon	100%
Representing District Councils	Peter Jeffs	Director of Communities	50%
	Kevin Finan	Director of Communities	25%
Devon Partnership Trust	Liz Davenport	Director Operations and Workforce	75%
Local Medical Committee	Katharine Gurney	General Practitioner	100%
NHS Devon	Charles Holme	Designated Doctor Child Protection	100%
	Stephen Richardson (from March 2011)		25%
NHS Devon	Helen Hyland	Designated Nurse Child Protection	75%
NHS Devon	Alison Allen	Named Nurse Safeguarding	75%
NHS Devon	Virginia Pearson	Director of Public Health, and Chair of Devon Drug and Alcohol Action Team	100%
North Devon Healthcare NHS Trust	Carolyn Mills	Director of Nursing	50%
Royal Devon & Exeter Hospital Foundation Trust	Michele Thornberry	Nurse Consultant Safeguarding Children	100%
Royal Devon & Exeter Hospital Foundation Trust	Em Wilkinson-Brice	Director of Nursing and Patient Care	75%
South Devon Healthcare NHS Foundation Trust	Liz Childs	Director of Nursing	100%
NHS South West Strategic Health Authority	Mandy Cox	Policy Lead for Children, Young People, Maternity	50%



Representing Devon Association of Primary Head Teachers	Helen Nicholls	Head Teacher of South Brent Primary School	75% / 25%
Representing Devon Association of Secondary Head Teachers	Mark Juby (retired December 2010)	Principal of Pilton College, Barnstaple	25%
	David Fitzsimmons (new rep from Mar 2011)	Principal of Holsworthy Community College	
Representative for Colleges of Further Education	Sarah O'Shea	Head of Student Services-Exeter College	75%
Special Head Teacher Association of Devon vice-chair	Jacqui Warne	Head Teacher Ellen Tinkham School	100%

Appendix b Information sources and references

Ofsted

Assessments, Inspections and Local Authority Performance Profile
www.ofsted.gov.uk/oxcare_providers/la_view/%28leaid%29/878

Learning Lessons from Serious Case Reviews 2009/10, Ofsted October 2010
<http://tinyurl.com/learninglessons>

Child poverty

Strategy, needs assessment and peer review www.devonchildrenstrust.org.uk/assessmentsreports/child-poverty

EU kids online

Project centering on a cross-national survey of European children's experiences of the internet, focusing on uses, activities, risks and safety. It also maps parents' experiences, practices and concerns regarding their children's online risk and safety www.eukidsonline.net

Devon Children and Young People's Plan 2008-2011 and Messages from the voices of children and young people in Devon, July 2010

www.devonchildrenstrust.org.uk/plan/cypp.html

Children's Care Monitor December 2009 from Roger Morgan, The Children's Rights Director for England www.rights4me.org/reportView.cfm?id=365&startRow=1

DSCB website

www.dscb.info



Appendix b Glossary

adva

adva is Devon's 'against domestic violence and abuse' partnership comprising different agencies across Devon, including Devon County Council, district councils, police, probation, education, social care, crown prosecution service, courts service, health services, women's aid services and victim support.

www.devon.gov.uk/domestic_violence

Appreciative Inquiry (AI)

Appreciative Inquiry is a method of problem solving that was pioneered in the mid 1980s. Instead of asking what is wrong with a situation AI seeks to appreciate what is good and valuable in the present situation, to discover and learn about ways to effect positive change.

<http://appreciativeinquiry.case.edu/>

Common Assessment Framework (CAF)

The aim of CAF is to identify, at the earliest opportunity, additional needs which are not being met by the universal services children are receiving, and provide timely and co-ordinated support to meet those needs.

www.devonchildrenstrust.org.uk/toolkit/caf

Child and Adolescent Mental Health Services

CAMHS is a multi-disciplinary service comprising of child psychiatrists, child and adolescent psychotherapists, social workers, nurses, family therapists, psychologists and occupational therapists. The service is for children and young people aged 0-16 years (or 18 years if in full-time education) and aims to help children with a range of mental health issues.

Child Exploitation and Online Protection Centre (CEOP)

The Child Exploitation and Online Protection (CEOP) Centre is dedicated to eradicating the sexual abuse of children. They are part of UK policing and bring offenders to account directly or in partnership with local and international forces. www.ceop.police.uk

Child Death Overview Panel (GDOP)

The panel is operated on a peninsula level and is responsible for reviewing all deaths of children aged 0-18 years who were resident in Devon at the time of their death. The panel identifies patterns or trends and consider how such deaths might be prevented in the future.

Child Protection

www.devon.gov.uk/childprotection

Child Protection Plan

A child protection plan should:

- assess the likelihood of the child suffering harm and look at ways that the child can be protected
- decide on short and long term aims to reduce the likelihood of harm to the child and to protect the child's welfare
- clarify people's responsibilities and actions to be taken
- outline ways of monitoring and evaluating progress.

Department for Education

The Department for Education is responsible for education and children's services.

www.education.gov.uk

Devon and Cornwall Probation Trust (DCPT)

The Trust exists to:

- protect the public
- reduce re-offending
- ensure proper punishment of offenders in the community
- ensure offenders are aware of the effects
- rehabilitate offenders.

www.dcpt.co.uk

Devon Children's Trust (DCT)

Devon Children's Trust is a partnership of public and voluntary sector organisations working together to meet the needs of children and families. www.devonchildrenstrust.org.uk



Devon Partnership NHS Trust

Devon Partnership NHS Trust was established in 2001. It employs around 2,000 staff and has around 100 staff assigned from Devon County Council and Torbay Unitary Authority, including social workers and support workers. The Trust works closely with health and social care providers. www.devonpartnership.nhs.uk

Devon County Council

DCC is the local authority for Devon (not including Plymouth and Torbay) and has statutory responsibility for providing social care, education and youth services for children in Devon and to work with partners such as health and police to promote positive outcomes. www.devon.gov.uk/childrenfamilies

Domestic Violence and Abuse (DVA)

This refers to psychological, physical, emotional and sexual abuse in the home. Domestic abuse occurs when one person in an intimate relationship or marriage tries to dominate and control the other person. www.womensaid.org.uk

General Practitioner (GP)

A medical practitioner who treats acute and chronic illnesses and provides preventive care and health education for all ages and both sexes. They have particular skills in treating people with multiple health issues.

HM Inspectorate of Probation (HMIP)

HM Inspectorate of Probation is an independent Inspectorate, funded by the Ministry of Justice, and reporting directly to the Secretary of State on the effectiveness of work with individual offenders and children and young people aimed at reducing re-offending and protecting the public. www.justice.gov.uk/about/hmi-probation/index.htm

Independent Management Review (IMR)

A critical report by an organisation of its practice in relations to a child or children following a Serious Case Review or serious incident.

Independent Reviewing Officer (IRO)

The appointment of an independent reviewing officer (IRO) is a legal requirement under Section 118 of the Adoption and Children Act 2002. IROs primary focus is to quality assure the care planning process for each child, and to ensure that their wishes and feelings are given full consideration. www.education.gov.uk/childrenandyoungpeople/families/childrenincare/a0065612/independent-reviewing-officers-iros

Joint Strategic Needs Assessment (JSNA)

Joint Strategic Needs Assessment describes a process that identifies current and future health and wellbeing needs in light of existing services, and informs future service planning taking into account evidence of effectiveness.

www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_081097

Learning and Development Partnership (LDP)

LDP provides education services for schools, settings and the wider educational community. www.devonldp.org

LINX

The LINX programme is a group work programme run over 12 weeks for young people aged 12-18 who have escalating violent behaviour, or problems engaging with others and forming positive relationships. Often these young people may have come from a background of domestic violence. www.devon.gov.uk/linx-programme



Local Authority (LA)

Local Authorities include county councils and unitary authorities throughout England which are the administrative authorities over a local area. In the South West there is Devon County Council, Cornwall County Council, Somerset County Council and Torbay and Plymouth Unitary Councils.

Local Authority Designated Officer (LADO)

The role of the LADO is set out in Working Together to Safeguard Children (2006). Appendix 5 outlines the procedures for managing allegations against people who work with children. The LADO works in LA children's services and should be alerted to all cases in which it is alleged that a person who works with children has behaved in a way that has harmed, or may have harmed, a child.

www.nspcc.org.uk/Inform/cpsu/helpandadvice/organisations/lscbs/lado_wda68916.html

Local Safeguarding Children Boards (LSCBs)

LSCBs were created to emphasise the importance of effective joint working between agencies and professionals to safeguard children from harm and to promote their welfare. www.dscb.info

Multi-Agency Case Audit (MACA)

The audits measure against five key themes identified as serious areas of concern. See chapter 8.2, page 32, for more details.

Multi-Agency Risk Assessment Conference (MARAC)

If someone is assessed as at Very High Risk of domestic abuse, (scoring very high on a standard risk assessment) they will be referred to the MARAC. This is a monthly meeting chaired by the police where information is shared about Very High Risk cases to prevent serious harm, develop a safety plan, put support in place and lower the risk as soon as possible. The information shared is confidential and used solely to enable safety and support measures to be put in place. Discussing safety round the table in this way safeguards against gaps in the safety plan or duplication.

Generally, people will be told that their case is being referred to the MARAC. Actions which can come out of the MARAC include making the person's house safe, making schools aware to support the children, highlighting when children need extra support, help to find alternative accommodation and advice in getting benefits.

Multi-Agency Safeguarding Hub (MASH)

The Multi-Agency Safeguarding Hub (MASH) is the central resource for the whole of Devon receiving all safeguarding and child protection enquiries. The MASH is staffed with professionals from a range of agencies including police, probation, fire, ambulance, health, education and social care. www.devon.gov.uk/mash

National Institute of Health and Clinical Excellence (NICE)

NICE is an independent organisation responsible for providing national guidance on promoting good health and preventing and treating ill health. www.nice.org.uk

National Society for the Prevention of Cruelty to Children (NSPCC)

The NSPCC is an independent organisation which works to end cruelty to children in the UK. www.nspcc.org.uk

Ofsted

New Ofsted is the Office for Standards in Education, Children's Services and Skills. They regulate and inspect to achieve excellence in the care of children and young people, and in education and skills for learners of all ages. www.ofsted.gov.uk

Primary Care Trust (PCT)

Primary care services such as doctors, dentists, opticians and pharmacists are managed locally by PCTs. PCTs work with local authorities and other agencies that provide health and social care locally to make sure that a local community's needs are being met. www.nhs.uk/NHSEngland/thenhs/about/Pages/authoritiesandtrusts.aspx



Professionals Online Safety Helpline (POSH)

The Helpline is part of the UK Safer Internet Centre and is for all professionals and volunteers in the South West who work with children and young people, and aims to address online safety issues they face. www.dscb.info/practitioners/helpine-for-professionals

Sexual Assault Referral Centre (SARC)

Sexual assault referral centres (SARCs) can offer free and confidential help, support, examination and counselling. Within the sexual assault referral centre there are independent sexual violence advisors (ISVAs). <http://tinyurl.com/devonSARC>

Social Care Institute of Excellence (SCIE)

The Social Care Institute for Excellence's (SCIE) mission is to identify and spread knowledge about good practice to the social care workforce. www.scie.org.uk

Serious Case Review (SCR)

The prime purpose of a Serious Case Review (SCR) is for agencies and individuals to learn lessons to improve the way in which they work both individually and collectively to safeguard and promote the welfare of children. www.dscb.info/serious-case-reviews

Safer Internet Day

Safer Internet Day is organised by Insafe each year in February to promote safer and more responsible use of online technology and mobile phones, especially amongst children and young people. www.saferinternet.org/web/guest/safer-internet-day

South West Child Protection Procedures (SWCPP)

The procedures have been created by the South West Safeguarding and Child Protection Group to enable professionals to find out what they need to do if they work with children, young people or families to keep children safe from harm or possible abuse. Devon Safeguarding Children Board is a member of the South West Safeguarding and Child Protection Group. www.online-procedures.co.uk/swcpp/

Sudden Unexpected Death in Infancy (SUDI)

Also known as Sudden Infant Death Syndrome (SIDS) or cot death. It is the sudden unexpected death of an apparently well infant, for which there is no explanation. www.nhs.uk/conditions/sudden-infant-death-syndrome/Pages/Introduction.aspx

TEAM Programme

The (Together Everyone Achieves More) TEAM Programme was created to remodel Devon County Council's children's social care services to meet the national and local challenges following the Baby Peter tragedy in Haringey, Lord Laming's Review and the Government's response, the recommendations of the Final Report of The Social Care Taskforce and the Munro Report.

Violence Against Women and Girls (VAWG)

The Home Office has a strategic vision and action plan to end Violence Against Women and Girls and the Government has committed £28 million in total over the next four years for specialist services. www.homeoffice.gov.uk/crime/violence-against-women-girls

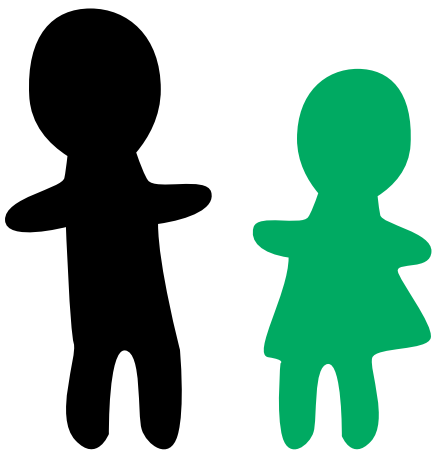
Youth Justice Board (YJB)

The Youth Justice Board for England and Wales (YJB) is an executive non-departmental public body with board members appointed by the Secretary of State for Justice. The YJB works to prevent offending and re-offending by children and young people under the age of 18, and to ensure that custody for them is safe, secure, and addresses the causes of their offending behaviour. www.yjb.gov.uk

Youth Offending Service (YOS)

The purpose of the Devon Youth Offending Service is to reduce offending by children and young people. www.devon.gov.uk/youth_offending_service





Devon Safeguarding Children Board Annual Report 2010/2011

DSCB is a partnership of public and voluntary agencies working together to safeguard children in Devon.

