Public Document Pack

MEETING:	Overview and Scrutiny Committee
DATE:	Tuesday, 12 September 2017
TIME:	2.00 pm
VENUE:	Council Chamber, Barnsley Town Hall

AGENDA

Administrative and Governance Issues for the Committee

1 Apologies for Absence - Parent Governor Representatives

To receive apologies for absence in accordance with Regulation 7 (6) of the Parent Governor Representatives (England) Regulations 2001.

2 Declarations of Pecuniary and Non-Pecuniary Interest

To invite Members of the Committee to make any declarations of pecuniary and non-pecuniary interest in connection with the items on this agenda.

3 Minutes of the Previous Meeting *(Pages 3 - 8)*

To approve the minutes of the previous meeting of the Committee held on 12th July, 2017 (Item 3 attached).

Overview and Scrutiny Issues for the Committee

4 Barnsley Safeguarding Adults Board (BSAB) Annual Report 2016-17 *(Pages 9 - 44)*

To consider a report of the Executive Director Core Services (Item 4a attached) in respect of BSAB Annual Report 2016-17 (Item 4b attached).

5 Barnsley Safeguarding Children Board (BSCB) Annual Report 2016-17 *(Pages 45 - 78)*

To consider a report of the Executive Director Core Services (Item 5a attached) in respect of BSCB Annual Report 2016-17 (Item 5b attached)

6 Exclusion of the Public and Press

The public and press will be excluded from this meeting during consideration of the items so marked because of the likely disclosure of exempt information as defined by the specific paragraphs of Part 1 of Schedule 12A of the Local Government Act 1972 as amended, subject to the public interest test.

7 Children's Social Care Reports

Reason restricted:
Paragraph (2) Information which is likely to reveal the identity of an individual.

Enquiries to Anna Marshall, Scrutiny Officer

Phone 01226 775794 or email annamarshall@barnsley.gov.uk

To: Chair and Members of Overview and Scrutiny Committee:-

Councillors W. Johnson (Chair), P. Birkinshaw, G. Carr, Charlesworth, Clarke, Clements, K. Dyson, Ennis, Franklin, Frost, Gollick, Daniel Griffin, Hampson, Hand-Davis, Hayward, Lofts, Makinson, Mitchell, Phillips, Pourali, Sheard, Sixsmith MBE, Tattersall, Unsworth, Williams and Wilson together with co-opted Members Ms P. Gould, Mr M. Hooton, Ms J. Whitaker and Mr J. Winter and Statutory Co-opted Member Ms K. Morritt (Parent Governor Representative)

Electronic Copies Circulated for Information
Diana Terris, Chief Executive
Andrew Frosdick, Executive Director Core Services
Rob Winter, Head of Internal Audit and Risk Management
Michael Potter, Service Director, Business Improvement and Communications
Ian Turner, Service Director, Council Governance
Press
Paper Copies Circulated for Information
Majority Members Room
Opposition Members Rooms, Town Hall – 2 copies

Witnesses
Item 4 (2:00pm)
Bob Dyson, Independent Chair, BSAB
Lennie Sahota, Service Director-Adult Assessment & Care Management, BMBC
Monica Green, Head of Service – Safeguarding & Quality Assurance
Brigid Reid, Chief Nurse, Barnsley Clinical Commissioning Group (CCG)
Sarah MacGillivray, Designated Nurse for Safeguarding Adults, Barnsley CCG - Chair of the Pathways and Partnership Sub-Group
Chief Superintendent Scott Green, Barnsley District Commander, South Yorkshire Police (SYP)
Detective Chief Inspector Joanne Bates, SYP
Michael Potter, Service Director, Organisation & Workforce Improvement, BMBC - Chair of the Performance Management Sub-Group
Cath Erine, Safeguarding Adults Board Manager, BMBC
Cllr Margaret Bruff, Cabinet Spokesperson - People (Safeguarding), BMBC

Item 5 (2:45pm)
Bob Dyson, Independent Chair, BSCB
Brigid Reid, Chief Nurse, Barnsley Clinical Commissioning Group (CCG)
Angela Fawcett, Designated Nurse Safeguarding Children, Barnsley CCG
Chief Superintendent Scott Green, Barnsley District Commander, South Yorkshire Police (SYP)
Detective Chief Inspector Joanne Bates, SYP
Mel John-Ross, Service Director, Children's Social Care and Safeguarding, BMBC
Monica Green, Head of Service-Safeguarding & Quality Assurance, BMBC
Nigel Leeder, BSCB Manager, BMBC
Cllr Margaret Bruff, Cabinet Spokesperson - People (Safeguarding), BMBC

BARNSLEY Metropolitan Borough Council

MEETING:	Overview and Scrutiny Committee
DATE:	Wednesday, 12 July 2017
TIME:	2.00 pm
VENUE:	Council Chamber, Barnsley Town Hall

MINUTES

Present Councillors W. Johnson (Chair), G. Carr, Charlesworth, Clements, Ennis, Gollick, Daniel Griffin, Hampson, Hand-Davis, Hayward, Lofts, Pourali, Tattersall, Williams and Wilson together with co-opted member Mr J. Winter

In attendance Councillors Bruff, Platt and Saunders

13 Apologies for Absence - Parent Governor Representatives

Apologies for absence were received from Ms K. Morritt in accordance with Regulation 7(6) of the Parent Governor Representatives (England) Regulations 2001.

14 Declarations of Pecuniary and Non-Pecuniary Interest

Cllr Jeff Ennis declared a pecuniary interest in minute 16 as Director for Public and Patients of Barnsley Healthcare Federation CIC.

Cllrs Gill Carr, Gail Charlesworth, Sarah Tattersall and John Wilson declared non-pecuniary interests in minutes 17 and 19 due to their positions on the Corporate Parenting Panel.

Cllr Phillip Lofts declared a non-pecuniary interest in minutes 17 and 19 due to his position on the Adoption Panel.

15 Minutes of the Previous Meeting

The minutes of the meeting held on 21st June, 2017 were approved as a true and accurate record.

The meeting was informed that the additional information which had been requested regarding 4:Thought had not yet been received, but would be circulated to Members at the earliest opportunity.

16 Intermediate Care Services

The following witnesses were welcomed to the meeting:

- Brigid Reid, Chief Nurse Barnsley Clinical Commissioning Group (CCG), Chair of the Alliance Management Team
- Jayne Sivakumar, Head of Commissioning and Transformation, Barnsley CCG
- Sean Rayner, District Director-Barnsley & Wakefield, South West Yorkshire Partnership NHS Foundation Trust (SWYPFT)
- James Barker, Director of Business Development and Strategy, Barnsley Healthcare Federation

- Diane Edwards, Associate Director of Nursing, Barnsley Hospital NHS Foundation Trust (BHNFT)
- Jacqui Howarth, Service Manager-Right Care Barnsley, BHNFT
- Rachel Dickinson, Executive Director-People, Barnsley MBC
- Lennie Sahota, Service Director-Adult Assessment and Care Management, Barnsley MBC
- Cllr Margaret Bruff, Cabinet Spokesperson, People (Safeguarding)

In introducing the item, the meeting was informed that the definition of intermediate care used in Barnsley was “active rehabilitation following an acute illness or early therapeutic intervention to prevent hospitalisation”.

The Committee received a presentation which provided information of the work which was undertaken through an Alliance Contract between SWYPFT, BHNFT, Barnsley Healthcare Federation, Barnsley MBC and Barnsley CCG to provide intermediate care. The main principles of the specification was to provide:

- Patient-centred care (ensuring that treatment meets the needs of the patient, rather than patients being treated in line with the needs of the service);
- effective clinical leadership;
- strong system knowledge (ensuring that the right service is provided at the right time);
- a partnership focus; and
- an increased role for early therapeutic intervention (as intermediate care was currently focused on rehabilitation following hospitalisation, rather than preventing hospitalisation).

The meeting was informed that RightCare Barnsley (the core and origin of the Alliance Contract set up between SWYPFT, BHNFT and Barnsley CCG) served as the single point of entry and exit to the intermediate care service. This approach sought to reduce the amount of communication required between different organisations, ensuring that patients were progressed through care appropriately.

The meeting was also informed that performance measurements regarding quality of life were being established, to ensure that rehabilitation and therapeutic intervention was enabling patients to be as independent as possible. This approach was being embedded in the service through the therapeutic staff being requested to upskill colleagues in therapeutic approaches, with the aim of staff being able to enable patients to be more independent.

It was explained to the meeting that hospitalisation could often lead to “deconditioning” of patients, where patients lost muscle mass and mobility, reducing their ability to rehabilitate and act independently.

Questions were asked in response to the presentation and report submitted, and the following matters were highlighted:-

- In relation to the history of RightCare Barnsley, it was explained that there had previously been an unplanned care board, led by the CCG. At that time, the default option for GPs had been to refer patients to hospital for unplanned care, which typically created pressure in the system. Therefore, a care co-ordination centre approach was sought, to provide a brokerage service by

phone to GPs. This allowed GPs to ensure that patients were directed to the most appropriate place.

- Mount Vernon Hospital was expected to close, with some of the capacity being provided through care homes. These would be procured in line with a strict service agreement, to ensure that the required standards were met. This would ensure that patients were cared for closer to home and would allow patients to be directed to homes which best met their treatment needs. It was explained that, in relation to the planned Transition Unit NHS inpatient beds there were currently vacant wards at Barnsley Hospital where this would be established (with an aim of a capacity of 24 beds).

- The staff currently employed on the wards at Mount Vernon Hospital would be at risk of redundancy, but it was expected that it was likely that these staff would be able to redeployed within the Alliance. Staff had been kept informed of the proposals for the future of Mount Vernon Hospital over the last 12 months, but formal consultation had not yet started. SWYPFT was the owner of the Mount Vernon Hospital site, which was expected to be sold following the closure. Proceeds from the sale would be handled in accordance with Department of Health guidance.

- Prevention of falls at care homes, while ensuring that patients retained mobility to prevent deconditioning, was an area of work which RightCare Barnsley would be undertaking in the coming year.

- Patient information systems were shared by all partners to the Alliance Contract (with due regard for patient confidentiality) to ensure that information was shared effectively, ensuring the best care for patients. There did remain some issues in ensuring compatibility of IT systems, but this would not put any patients at risk.

- If Members wished to support the intermediate care service in Barnsley, they were recommended to contact the Alliance Contract Management Team, through the Scrutiny Officer, as there was a range of public representative roles which Members could fill. In addition, Members were advised that the Alliance Contract team could provide them with the most up to date information regarding any proposals for the service, so that this information could be accurately transmitted to the public.

The Chair thanked the witnesses for their contribution to the discussion.

RESOLVED:

i. That Members who wish to support and contribute to the development of the intermediate care service should express their interest via the Scrutiny Officer.
ii. That the witnesses be thanked for their attendance and contribution.

17 Corporate Parenting Panel Annual Report 2016-17

The following witnesses were welcomed to the meeting:

- Rachel Dickinson, Executive Director - People, Barnsley MBC

- Mel John-Ross, Service Director - Children's Social Care and Safeguarding, Barnsley MBC
- Liz Gibson, Virtual Headteacher for Looked After Children, Barnsley MBC
- Angela Fawcett, Designated Nurse-Safeguarding Children, Barnsley CCG
- Andrea Scholey, Named Nurse Children in Care, 0-19 Service, Barnsley MBC
- Councillor Sarah Tattersall, Corporate Parenting Panel Member
- Councillor Margaret Bruff, Cabinet Spokesperson - People (Safeguarding)
- A Barnsley Foster Carer

The Committee considered a report which set out the responsibilities and statutory duties of the Council to act as good Corporate Parents.

Questions were asked in response to the presentation and report submitted, and the following matters were highlighted:-

- The report indicated that there had been many positive outcomes from the Council's work as a Corporate Parent, including children spending less time in care, high adoption rates, high placement stability, and good academic results. The witnesses commented that the Corporate Parenting Panel had served as an effective critical friend for the service. The witnesses confirmed that the Corporate Parenting Panel had been willing and able to challenge the service when this was required.

- The meeting was informed that the Council's Takeover Challenge in November 2016 achieved a Gold Commendation from the Children's Commissioner for England.

- Care leavers were provided with a significant level of support. All care leavers had a pathway plan and an allocated social worker to provide them with assistance as they transitioned towards independence. The process of working towards independence began when children were early teenagers and the pathway plan was designed with the young people to ensure that it met their needs. The meeting was informed that many care leavers stayed with their foster carers after leaving the service. The development of life skills (including cooking, managing money, diet, travel and knowing how to access services) was a paramount part of the transition towards independence and semi-independent accommodation was available for care leavers.

- Termly Personal Education Plans (PEPs) were in place for all children in care and PEPs were being rolled out for post-16 children (which was not a statutory requirement).

- The Public Health Nursing service was currently undergoing a redesign. The meeting was assured that no capacity had been removed from the service and a report could be provided to a future meeting to set out the new arrangements.

- 85.7% of children in care were placed within 20 miles of their home address, above the national average (74.7%) and the performance of statistical neighbours (84.3%). In some instances, those children who were placed more than 20 miles from their home address had particular reasons for this, such as

a need for specialist care or living with their prospective adoptive parents. 34% of Barnsley looked after children were placed outside of the Borough. Members were assured that, where looked after children were to be placed in schools outside of the Borough, the Virtual Headteacher worked closely with schools to ensure that they met the children's needs.

- A foster carer commented that foster carers felt highly valued by the Council and that their views and opinions were listened to.

The Chair thanked all of the witnesses for their attendance.

RESOLVED: That the witnesses be thanked for their attendance and contribution.

18 Exclusion of the Public and Press

RESOLVED that the public and press be excluded from the meeting during consideration of the following item because of the likely disclosure of exempt information as defined by the specific paragraphs of Part 1 of Schedule 12A of the Local Government Act 1972 as amended identified:

Minute No	Paragraph
19	2

19 Children's Social Care Reports

The following witnesses were welcomed to the meeting:-

- Mel John-Ross, Service Director - Children's Social Care and Safeguarding, Barnsley MBC
- Councillor Margaret Bruff, Cabinet Spokesperson - People (Safeguarding)

Mel John-Ross introduced the Children's Social Care monthly report for May 2017, containing a summary of performance and the major performance indicators for children's safeguarding and social care. Members were also provided with a summary report, together with supporting documentation, which outlined and explained the terminology used in the report and advised how to interpret the information given.

Members asked questions in response to the report submitted and the following matters were highlighted:-

- There was a discussion regarding the number of instances of children missing from care. The meeting was informed that a detailed presentation regarding this issue had been made to the Corporate Parenting Panel and this could be circulated to the Committee for information. Members of the Corporate Parenting Panel commented that children missing from care was an issue about which the Panel was especially vigilant.

- A similar report regarding adult social care services was in the process of being developed and it was requested that, once this was available, it be provided to the Committee.

- The number of pupils at schools which had not received a rating of at least Good in their most recent Ofsted inspection was discussed as a concern. The meeting was informed that the service worked closely with the Virtual Headteacher to ensure that looked after children were enrolled in the school which was most appropriate for their needs. Absences from school was typically higher than average for looked after children, which was an area the service was seeking to address.

- There had been an increase in contacts with the service in May 2017, but this had not continued in June 2017 and was not thought to be part of a trend.

RESOLVED –

i. That additional information be provided to the committee to provide clarity on 'children missing from care'.

ii. That the witnesses be thanked for their attendance and contribution.

**Report of the Executive Director Core Services,
to the Overview and Scrutiny Committee (OSC)
on 12th September 2017**

**Barnsley Safeguarding Adults Board (BSAB) Annual Report 2016-17
- Cover Report**

1.0 Introduction and Background

1.1 Local Safeguarding Adults Boards are a key system in every locality across the country to enable organisations to come together to agree on how they will cooperate with each other to safeguard and promote the welfare of adults. The Barnsley Safeguarding Adults Board (BSAB) has been operating since 2000 but was originally known as the Adult Protection Committee. However it was not until the Care Act 2014 that it became a statutory requirement for local authorities to set up a Safeguarding Adults Board (SAB) with core membership from the local authority, the Police and the NHS (specifically the local Clinical Commissioning Group [CCG]) and the power to include other relevant bodies.

1.2 The Government recognised that even though local authorities have been responsible for adult safeguarding for a number of years, there have never been any clear laws to support this. Therefore, under the Care Act 2014 there was a statutory responsibility for SABs to be in place from April 2015, enabling local partnership working amongst key organisations to hold each other to account and to ensure safeguarding adults remains high on the agenda across the area. The Care Act 2014 recognises that local authorities alone cannot safeguard individuals but requires joint-working with other agencies as well as awareness of the wider public.

1.3 The BSAB is a multi-agency Board comprising statutory, independent, voluntary organisations and service user/carer representation which have a stakeholder interest in safeguarding adults. The vision of the Board is 'that every adult – irrespective of age, race, gender, culture, religion, disability or sexual orientation, has a right to live a life free from abuse, neglect, exploitation and discrimination'.

1.4 The BSAB Annual Report 2016-17 (Item 4b - attached) outlines the work of the board and its local and regional partners from April 2016 to March 2017. Key achievements during this time include:

- Continued focus on embedding Making Safeguarding Personal (MSP)
- Improving policies and procedures and issuing practice guidance to staff
- Improved guidance on the application of thresholds for access to safeguarding services
- Work to develop a service user/customer forum
- Production of a communication strategy to raise public awareness of safeguarding
- Launch of a new and improved website to provide further information and guidance
- The first Safeguarding Awareness Week (SAW) with a number of events held to engage the public on a wide range of topics
- Continued improvements to performance management and data
- A strong focus on Care Homes and how well they are performing

1.5 BSAB's plans for 2017-18 are listed on page 30 of Item 4b (attached). The key pieces of work which are currently being undertaken include:

- Completion of a review of the South Yorkshire Safeguarding Procedures
- Sign off of the operational guidance
- Development and embedding of a people in positions of trust policy
- Sign off and embedding of a self-neglect and hoarding policy
- Establishment of an effective safeguarding customer forum
- Development of a multi-agency (Care Act compliant) dashboard
- Holding of the first learning event on Safeguarding Adult Reviews (SARs) and Domestic Homicide Reviews (DHRs)
- Embedding of a robust level three training programme
- Running of a joint Safeguarding Awareness Week with the Safeguarding Children's Board
- Work with the Safer Barnsley Partnership and Barnsley Safeguarding Children's Board to raise public awareness of adults at risk of mate and hate crime
- Continued work to complete audits to monitor practice
- Establishment of a network of safeguarding champions
- Agreement and circulation of a set of publicity materials

1.6 At today's meeting, a number of Board representatives have been invited to the meeting to answer questions from the Overview and Scrutiny Committee regarding the work of the BSAB over the last Annual Reporting year (April 2016-March 2017) as well as to talk about the work being undertaken this year.

2.0 Invited Witnesses

2.1 The following witnesses have been invited to today's meeting:

- Bob Dyson, Independent Chair, BSAB
- Lennie Sahota, Service Director-Adult Assessment & Care Management, BMBC
- Monica Green, Head of Service – Safeguarding & Quality Assurance
- Brigid Reid, Chief Nurse, Barnsley Clinical Commissioning Group (CCG)
- Sarah MacGillivray, Designated Nurse for Safeguarding Adults, Barnsley CCG - Chair of the Pathways and Partnership Sub-Group
- Chief Superintendent Scott Green, Barnsley District Commander, South Yorkshire Police (SYP)
- Detective Chief Inspector Joanne Bates, SYP
- Michael Potter, Service Director, Organisation & Workforce Improvement, BMBC - Chair of the Performance Management Sub-Group
- Cath Erine, Safeguarding Adults Board Manager, BMBC
- Cllr Margaret Bruff, Cabinet Spokesperson - People (Safeguarding), BMBC

3.0 Possible Areas for Investigation

3.1 Members may wish to ask questions around the following areas:

- What lessons have been learned over 2016/17 and how has this influenced practice?

- Are data management practices comprehensive and robust and are there any gaps that need to be addressed to ensure data quality?

- How do you know if practice reflects policies and that community needs are being met effectively?

- What mechanisms are in place to support adults at risk who may be scared or unable to report incidents, are unaware that they are being abused or are unwilling to accept help for abuse?

- How do you ensure that all staff and partners are working towards the same goals?

- How do the Barnsley Safeguarding Adults Board (BSAB) and Barnsley Safeguarding Children Board (BSCB) work together to protect families with multiple needs?

- To what extent are all partners engaged with the board's work and contribute resources to address identified needs?

- What evidence is available to show that the Communications Strategy is having the desired impact and how do you promote safeguarding to vulnerable people without IT access, who may have learning difficulties or may use English as their second language?

- What are the key risks and challenges for the forthcoming year and how will these be managed?

- What actions could be taken by Members to assist in the work of BSAB?

4.0 Background Papers and Useful Links

- BSAB Annual Report 2016-17 (Item 4b - attached)
- BSAB Annual Report 2015-16: https://www.barnsley.gov.uk/media/4288/safeguarding-adults-annual-report-2015-2016.pdf
- Barnsley Safeguarding Adults Board Website: https://www.barnsley.gov.uk/services/children-families-and-education/safeguarding-families-in-barnsley/safeguarding-adults-in-barnsley/barnsley-safeguarding-adults-board/
- Care and Support Statutory Guidance (Updated August 2017): https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance

5.0 Glossary

BSAB - Barnsley Safeguarding Adults Board
CCG - Clinical Commissioning Group
SABs - Safeguarding Adults Boards
SAW – Safeguarding Awareness Week
SYP - South Yorkshire Police

6.0 Officer Contact

Anna Marshall, Scrutiny Officer (01226 775794), 4th September 2017

This page is intentionally left blank

BARNSLEY SAFEGUARDING ADULTS BOARD

Annual Report

2016-17

Contents

Click the number
to visit the page

Independent Chair's Foreword

Bob Dyson QPM, DL

As the Independent Chair of the Barnsley Safeguarding Adults Board, I welcome the opportunity to publish information on the work of the board and its sub committees.

It is vital that we communicate with the public to both raise awareness on safeguarding issues but also to provide information on the actions being taken and the results being achieved. With that in mind, I am pleased to introduce the annual report.

2016/17 was a busy year for the board with considerable work being completed in support of our vision to ensure that every adult - irrespective of age, race, gender, culture, religion, disability or sexual orientation - has a right to live a life free from abuse, neglect, exploitation and discrimination.

This report provides detail on the actions taken during the year but just to mention a few of the achievements:

- A continued focus on embedding Making safeguarding Personal, not only for the board but also by the agencies that are represented on the board. This was the primary feature of the board's development day.
- Considerable work on improving policies and procedures and, very important, issuing practice guidance to staff working with vulnerable adults.
- Improved guidance on the application of thresholds for access to services.
- Work to develop a service user/customer forum; this will continue into 2017/18.
- A communication strategy that has been written to ensure we do what we can to raise public awareness of safeguarding issues. This has seen the launch of a new and much improved web site that contains further information and advice.
- The first Safeguarding Awareness Week (SAW) was held in July 2016. It saw events being held across the week, supported by press releases that engaged the public on a wide range of topics. This year's SAW was launched on 3 July 2017.
- Continued improvements to performance management and the data. This includes the quality audit of case files so that we pick on not just the numbers but also the quality of the service being provided. There is an acceptance that we still have more to do on data quality but I am confident that we are on course to deliver.
- A strong focus on Care Homes in recognition that they are of interest to the public. They provide services to vulnerable adults so it is right that the board understands how well they are performing.

There have been no cases in the last year that met the criteria for commissioning a Safeguarding Adults Review (SAR). (A SAR is commissioned when an adult with care and support needs dies as a result of abuse or neglect ,or is known or suspected to have experienced serious abuse or neglect, and there is concern that partner agencies could have worked more effectively to protect the adult) However, as part of the commitment to improving practice, two learning the lessons reviews were completed. They led to action plans that are being completed.

As the chair, I am satisfied that the agencies that are represented at the board and its sub committees continue to demonstrate their high level of commitment to keeping people safe.

I hope that you find this report both interesting and of reassurance that the board is being very active in driving forward improvements.

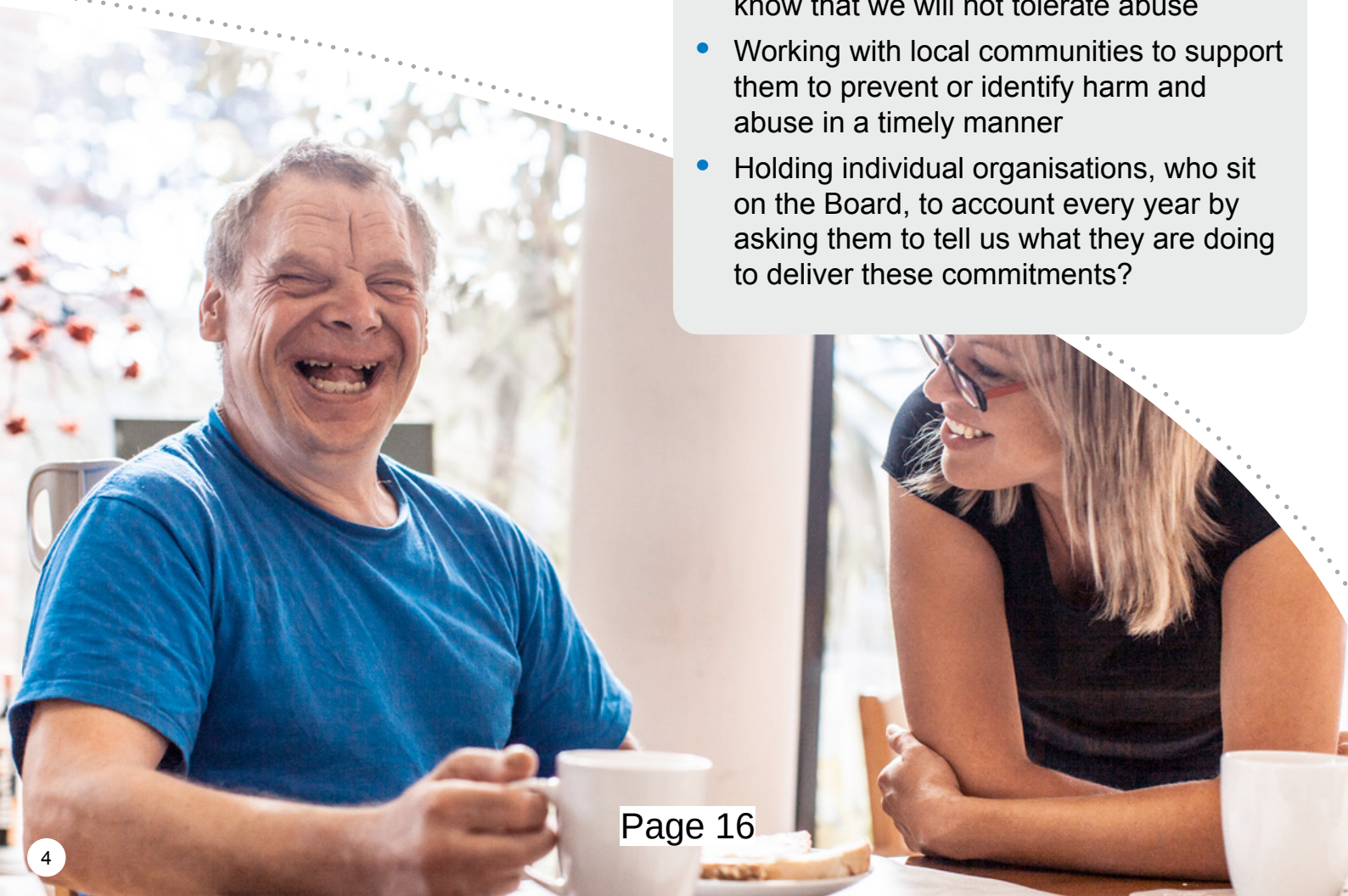
Introduction

This report explains

- What we mean when we talk about Safeguarding Adults
- Who are the members of the Barnsley Safeguarding Adults Board and how we work together to keep adults in Barnsley safe?
- What the Board and its member organisations have done between April 2016 and March 2017 to prevent abuse and harm and to protect adults who have been hurt or abused
- How we have worked to embed the 6 Care Act principles into practice
- What this has meant for adults who needed help to stay safe
- What our key priorities are for the coming year.

How we will keep adults safe?

- Providing the public with information to keep them safe and report concerns
- Supporting adults to feel confident to speak up about harm or abuse
- Working with the adult or their representative to agree what we need to do to keep them safe and who might need to be involved to achieve this?
- Respecting the wishes and feelings of adults and helping them to stay safe by providing them with information and support
- Supporting workers and organisations to deliver safe services and checking they are safe by visiting all the services we commission to provide support or care to adults
- Making sure that all staff and volunteers know that we will not tolerate abuse
- Working with local communities to support them to prevent or identify harm and abuse in a timely manner
- Holding individual organisations, who sit on the Board, to account every year by asking them to tell us what they are doing to deliver these commitments?



What is adult safeguarding?

Our safeguarding duty to safeguard adults applies to all adults aged 18 and over who:

1. Have a need for care and support, whether or not the Local Authority is meeting any of those needs
2. Is experiencing, or at risk of, abuse or neglect
3. And as a result of their care and support needs is unable to protect themselves from either the risk of abuse or the experience of abuse or neglect.

Adults who are unable to make decisions for themselves or unable to tell someone when they are frightened of being harmed or are being harmed are particularly vulnerable and we need to make sure that everyone is able to speak up on their behalf.

What is abuse?

Any action, deliberate or unintentional, or a failure to take action or provide care that results in harm to the adult (this is called neglect). There are many different types of abuse; more details about abuse can be found on the Safeguarding Web site: **https://www.barnsley.gov.uk/services/children-families-and-education/safeguarding-families-in-barnsley/safeguarding-adults-in-barnsley/**

When can abuse or harm happen?

When people deliberately take actions that they know will hurt an adult e.g hitting or hurting someone, refusing to feed someone or give them their medications, calling them names or threatening them

Without people meaning to (unintentionally). This might happen when staff have not been trained to do something (e.g. use a hoist) or if family member fails to recognise that their relative needs medical support or needs help to keep them safe in the home

If an adult refuses care or services they need to keep them well (this is called Self Neglect)

How do you recognise self-neglect?

Adults who self neglect may not wash/eat or clean their clothes, not keep medical appointments necessary to keep them physically well, allow workers into their home to provide support or care and/or not take medications prescribed to keep them well

In some cases the lack of self care can result in death. The cause of self neglect may be the use of illegal substances, mental ill health, personal choice, social isolation etc and may follow a traumatic or life changing event.

Who may hurt or abuse adults?

Anyone can hurt or abuse adults; sadly the majority of abuse/harm experienced by adults is as a result of actions by family members, or people they know and trust. The abuse can happen anywhere – in the home, in the community, in day or residential care, in hospital or at college

What is adult safeguarding?

The Care Act (2014) asks the Safeguarding Board and its partners to prevent and/or respond to harm/abuse, by working with the adult to agree what they would like us to do to stop the harm (these are called outcomes).

The Care Act asks us to use the following six principles to keep adults at the centre of all the work we do with them.

Principle one - Empowerment	
People being supported and encouraged to make their own decisions and informed consent	I am asked what I want to happen (my outcomes) as part of the safeguarding journey and these directly shape what happens.
Principle two - Prevention	
It is better to take action before harm occurs	I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help.
Principle three - Proportionality	
The response by external agencies is directly linked to the risks and the wishes of the person	I am sure that workers involved with me will keep my views at the centre of all their actions and that I will only see them when it is needed
Principle four - Protection	
Support and representation for those in greatest need, who may not be able to protect themselves	I get help and support to report abuse and neglect. I get help so that I am able to take part in the safeguarding process - as much or little as I want
Principle five - Partnership	
Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse	I have control over what personal and sensitive information is shared and if I can't make these decisions that this information will only be shared in my best interests and to get the best results for me
Principle six - Accountability	
We are accountable to the adults we help to stay safe and to other agencies working with the adult.	I understand the role of everyone involved in my life and so do they

Safeguarding is everyone's business and all of us can help keep adults safe by looking out for our neighbours and family members. Workers and volunteers can keep adults safe by talking to them if they are worried about their safety and if necessary sharing their concerns with the police, adult social care

Case Study: How we work in partnership to keep adults safe

The Board encourages its members and local services to work together to spot those at risk of abuse or neglect and take action to protect adults who might be at risk of harm. This may mean working together to make sure that all services have the right policies, guidance and training in place for their staff to follow or sharing information and helping each other to put things right when they are not as good as they could be. This is a regular feature of the work that takes place.

The Care Quality Commission (CQC) asked Barnsley Clinical Commissioning Group (CCG) and Barnsley Metropolitan Borough Council (BMBC) to help them with an inspection at a local care home as they were unhappy with some of the things they had seen there. These included how clean the home looked and smelled, the way that medicines were stored and given, how people's care was planned and the amount of activities that were available for the people living in the home. The CQC were happy that staff working in the home did care and were kind to the people who lived there.

Specialist staff from the CCG and BMBC went to visit the care home with CQC and found that the home was working hard to improve things but that they were in need of some extra help to make all the improvements needed. An action plan was agreed between the home and BMBC, CCG and CQC to make things better and to make sure that the people living in the home were kept safe. This included looking at people's care plans and giving advice about how the home could make these match exactly what the person needed, helping the home to plan how to improve the furniture and decoration to make the home look and smell clean and to help prevent people from getting infections. Support was also given to staff about best management of medicines.

The home worked hard to improve things. The CCG and BMBC staff visited the home regularly to make sure that the home was completing the actions agreed. Things are now much better, the home looks and smells clean, the care plans are up to date, there is an activity coordinator to make sure that people living in the home have plenty to do during the day and the way that care home staff look after people's medicines has improved.

Barnsley Safeguarding Adults Board
structure, vision and achievements

The Board's vision is that every adult - irrespective of age, race, gender, culture, religion, disability or sexual orientation - has a right to live a life free from abuse, neglect, exploitation and discrimination.

Residents of Barnsley are entitled to a strong commitment from BSAB and its partner agencies to ensure that they are safeguarded. BSAB will do everything possible to maintain a robust and effective inter-agency safeguarding response directed at safeguarding and promoting the welfare of adults at risk in Barnsley.

The Board's strategic priorities are as follows:

- Making Safeguarding Personal and supporting the adult at risk to achieve the outcomes they want.
- Preventing abuse and neglect from taking place and supporting people to feel safer.
- Making sure safeguarding works effectively.
- Making sure that all children, at risk, who transition into adult services, are protected from further abuse and neglect.
- Making sure the Safeguarding Adults Board provides effective leadership and strategic direction for safeguarding in Barnsley.

How are we going to deliver these priorities?

- Keep the structure and membership of the Board and its sub groups under review to maximise our effectiveness
- Examine our current funding to establish if our resources support delivery of the priorities
- Maximise our learning opportunities locally and regionally by working with partners and Boards across Yorkshire and Humberside. This will include developing a culture of constructive challenge of all Board members and developing our skills and knowledge by creating and attending local and regional learning events.
- The Board will promote an environment that encourages examination of examples of good practice and evaluation of cases, when things have not gone as well as we would have liked or we believe we can improve practice.
- Managing risks. The Board keeps a risk management framework that measures and reports threats and risks to the delivery of its key priorities. This will be reviewed by the Board regularly. A dashboard of local needs and issues will be produced to support us to take early action to prevent harm and abuse. We will continue to learn from case audits and support the development of staff to equip them to respond to safeguarding concerns in a person centred way
- Maintaining the Safeguarding Adults Web Site. To update the public with information and updates on what has been achieved via our news page.
- Developing and maintaining effective partnerships and information sharing agreements. The Board can only make some things happen by working in partnership with other Boards and committees. The Board will draw up a transparent framework of how we will work with other Boards to keep adults safe. This will include reviewing of our terms of reference, if necessary.

Barnsley Safeguarding Adults Board Structure

Barnsley Safeguarding Adults Board

Independent Chair Bob Dyson
Meets bi-monthly

- Develop and implement Board strategy and business plan
- Produce an annual report
- Ensure partners work closely at strategic level
- Oversee Safeguarding Adult Reviews and lessons learned events

Performance Management and Quality Assurance Sub Group

Chair Michael Potter
Meets bi-monthly

Responsibilities:

- Develop performance framework including collecting and analysing data
- Carry out quality assurance audits
- Monitor and evaluate new initiatives

Pathways and Partnership Sub Group

Chair Sarah MacGillivray
Meets bi-monthly

Responsibilities:

- Develop and monitor policies and procedures
- Training plan
- Communication and engagement strategy
- Maintaining good practice, e.g. making safeguarding personal and learning from research

Safeguarding Adults Review/ Domestic Homicide Review Executive Group

Chair Bob Dyson
Meets as and when necessary

Responsibilities:

- Considers requests for Safeguarding Adult Reviews (SAR's) and Domestic Homicide reviews

Views of the Lay Member

The Lay member is a member of the public who is keen to contribute to the work of the Safeguarding Board. Lay members are often a member of other groups and our current lay member is an unpaid carer for a relative and a member of the Barnsley Carers' Group.

Lay members don't receive payment for their time, but their travel costs are covered. Going forward in 2017/18, we aim to create a safeguarding customer forum to support the Board to be aware of the range of issues and challenges faced by adults in Barnsley

From a Lay member perspective this has been a positive year and the highlights are:

- The first Safeguarding Awareness week held in July 2016
- The Board's agreement to fund the development of a new customer forum in 2017.
- The Board's commitment to design and promote new publicity materials
- The production of guidance to help staff work with adults who have been harmed or abused in a person centred way

Challenges for the Board in the coming year:

- Making sure that the customer forum is fully represented in all the activities of the Board and its sub groups
- Obtaining honest feedback from adults who have been safeguarded to allow the Board to develop additional training, policies and guidance to assist all staff to deliver person centred safeguarding

Work plan for 2017/18:

- Creation of a customer forum with its own terms of reference and work plan
- Working with other customer forums in South Yorkshire to share learning and best practice.

What have we achieved?

In April 2017 we set ourselves an ambitious plan which we have updated to show our progress

What we set out to do / by when	What we have achieved
Devise new data collection methods and user surveys to monitor 'Making Safeguarding Personal'. (March 2017).	Significant improvements have been seen in practice; however the data collection methods still require improvement. This will continue to be an action for the Board in 2017/18
Carry out regular file audits, single and multi-agency to quality assure frontline practice (March 2016).	Regular file audits have taken place and a rolling programme is in place for 2017/18. Briefings on the key learning have been provided to Board members
Review and refresh our approach to 'Making Safeguarding Personal, putting the adult at the centre of safeguarding. (June 2016)	Operational guidance was produced and signed off for all workers and cascaded to all organisations
Audit how partner organisations prevent abuse and deal with low level concerns (September 2016)	Audits have been completed and work has commenced regionally to improve the response of organisations who work across South Yorkshire and/or Yorkshire and Humber. This work will continue into 2017/18
Develop framework and policies for people in positions of trust who pose a risk (December 2016)	We know what our partners are doing and have commenced work to establish what other organisations do to manage workers or volunteers who pose a risk to adults. A policy will be developed and signed off in 2017/18
Update the communications strategy and develop new ways of engaging with stakeholders and communities. (September 2016)	A communication strategy is in place, it is reviewed every two months. The Board committed some funding to support this work. The new safeguarding web site was produced.
Work with the other three local councils to ensure South Yorkshire Safeguarding Procedures are effective and up-to-date and develop local guidance for Barnsley (March 2017)	Local guidance has been produced and positively received. The South Yorkshire Safeguarding Procedures have been launched to test in practice. They will be reviewed by the four South Yorkshire authorities in 2017/18 and if necessary changes agreed
Review use of thresholds to screen concerns and decide what needs a safeguarding enquiry (September 2017)	Decision Support Guidance has been produced to support staff to respond proportionately to safeguarding concerns. The impact on safeguarding practice will be reviewed in 2017/18
Address gaps in our performance reporting so that the Board has a good understanding of how well people are being safeguarded and can take action where necessary. (March 2017)	Work has started on a multi agency, person centred, performance dashboard. This will be completed in 2017/18

What we set out to do / by when	What we have achieved
Carry out a training needs analysis and develop safeguarding training plan, so that partners have a competent workforce (September 2016)	Training needs analysis completed and some training has been identified to meet these needs. Additional work will take place in 2017/18 to address outstanding training needs
Consider how to strengthen the delivery of and access to safeguarding adults training. (September 2016)	Funding for a safeguarding adults multi agency trainer has not been identified. Use of the multi agency children's trainer and regional resources have addressed some of the needs identified
Monitor child protection incidence for young people in transition, to ensure they are protected while moving into adulthood (September 2016)	An audit of Child Protection cases involving 17 year olds has been completed. Joint work with the Children's Board has commenced to identify the need for additional policies, guidance and training
Partner organisations to carry out self assessment on their safeguarding work, with The Board chair holding check and challenge events (October 2016)	All Board partners completed the self assessment and met with the Chair of the Board and Board Manager to identify any areas for development or good practice. This self assessment will continue annually
Agree new safeguarding adult review protocol and develop methods for carrying out learning (September 2016)	Joint protocol written and approved. Learning exercises have been held and action plans produced. These will continue as necessary in 2017/18
Publish annual report for 2015/16 year (July 2016)	Completed – see web site for 2015/16 report
Develop and launch SAB website as resource for partners, professionals and the public (July 2016)	Web site went live in May 2017.
Review budget and how much statutory partners contribute to pay for the Boards work (November 2016)	Budget reviewed and some additional contributions have been agreed. This will continue to be reviewed in 2017/18

Sub Group and Partner activity
to deliver our priorities

Priority one

Making Safeguarding Personal (MSP) and supporting the adult at risk to achieve the outcomes they want.

Significant progress has been made this year to support workers, volunteers and organisations to "put the adult" at the centre of all the work we do to help keep them safe. The six principles of the Care Act can be seen demonstrated in the summaries shown below from the sub groups and the Board member organisations. The Board will continue to identify and implement Making Safeguarding Personal to empower all Barnsley residents to stay safe or stop harm in a timely way. Operational Guidance has been developed, to support workers and volunteers to work with adults in a person centred way, this may include supporting the adults to stay in situations that are not safe.

Pathways and Partnerships have:

Committed to include Making Safeguarding Personal (MSP) on every meeting agenda; MSP now forms a "golden thread" running through all newly developed policies and guidance, such as the new Operational Guidance which was developed and released in 2017. The guidance reinforces the need to keep the adult at the centre of all safeguarding activity by listening to them, agreeing a set of outcomes they believe will help keep them safe and reduce the risk of future harm.

Included in its work plan is a commitment to develop an "aide memoire" to help managers deliver high quality supervision that equips workers to deliver MSP focussed safeguarding practice.

Performance Management and Quality Assurance have:

Supported Barnsley Council (Adult Social Care) and South West Yorkshire Partnership Foundation Trust (Mental Health) to start developing Care Act and Making Safeguarding Personal compliant recording systems, which will start to deliver data in 2017/2018.

Included MSP questions in our audit tools to test how well workers and organisations are working to the principles of MSP, results of these audits are shared with the Board on a regular basis.

Our Partners have demonstrated their commitment to keeping adults safe and providing person centred responses throughout the year, some examples are shown below. (Additional examples are included on our web site)

Making Safeguarding Personal and the Care Act, asks all Boards and their partners to pro-actively respond to risks to prevent harm, when possible and to work with the adult to agree a plan to stop harm and abuse in an empowering way to reduce the risks of further abuse and harm.

Our partners have demonstrated this throughout the year, examples include:

- Berneslai Homes' scheme managers' work with tenants on a pro-active basis to reduce the risk of harm and this reduces the need for a more formal response.
- Barnsley Council has established, in collaboration with South Yorkshire police, a Safer Neighbourhood Service; the service will work with local communities to identify adults and families who may be at risk of harm and to provide an early intervention service. This is a new service and the impact of this will be included in future reports.
- Mental Health (SWYPFT) has a Safeguarding lead nurse for Barnsley who offers advice and support to workers on an individual and a team basis.

Priority Two

Preventing abuse and neglect from taking place and supporting people to feel safer.

The Board, its partners and other agencies in Barnsley work hard to deliver safe high quality services that prevent harm and abuse to adults, who may struggle to keep themselves safe.

We do this by:

- Providing education and training to workers and volunteers
- Providing information and guidance to workers and the public
- Making sure that adults have information about support services that might help prevent them from harm and abuse (e.g. scam mails/bogus callers etc.)
- Working with care providers to help them deliver high quality services that keep adults safe and well.

We have looked at:

- What sort of harm/abuse adults in Barnsley have experienced
- Where the alleged harm took place
- What worked to keep them safe

Sadly, in spite of our best efforts, we are not able to keep all adults safe and we continue to work to identify ways we can do more to prevent harm and abuse.

What other actions we could take to prevent harm and abuse in the coming year:

This information will assist us to prioritise our efforts and resources in the coming year and to develop partnerships when the actions of the Safeguarding Board will not be enough to keep adults safe.

Examples of this include Mate, Hate Crime and Domestic Abuse, which are addressed by the Safer Partnership Board, Adults who have care and support needs may be more vulnerable to becoming a victim of these crimes, we share information between Boards to prevent harm.

We have taken joint action to help care providers, to improve the quality of care to the most vulnerable adults in Barnsley. The Pathways and Partnerships sub group work in tandem with the Performance Management and Quality Assurance, sub group, to identify risks and take action to address these.

The Board has supported and contributed to a review of the effectiveness of the MARAC, (Multi Agency Risk Assessment Conferences) who develop risk plans to protect adults who are experiencing Domestic Abuse, this will support the development of guidance for MARAC chairs and an audit programme to evaluate the impact in 2017/2018.

Pathways and Partnership Sub Group

Approved and launched a multi-agency self-neglect policy and procedure to help workers to address the risks faced by adults who self neglect. A number of these adults also hoard, it was agreed that a policy would help workers to address the risks to the adult and people around them

Members have actively contributed to the review, development and dissemination of a number of important policy and guidance documents relating to adult safeguarding such as the Yorkshire and Humber Persons in Positions of Trust Policy and the recent refresh of the Barnsley Covert Administration of Medicines in Care Homes Policy.

Included in their action plan lessons from two multi agency learning events that were held to examine the deaths of two adults to identify any learning and improvements to practice.

Led on the creation of a new Safeguarding web site, this provides easy access to information for the public, workers and volunteers about safeguarding adults – including what abuse is, how to recognise it and how to report it/stop it. The web also makes public the work of the Board and its sub groups

PMQA have overseen case file audit to make sure that we did make adults feel safer Included actions from the two lessons learnt events into their work plan.

Barnsley Safeguarding Adults Board

Held their first joint Safeguarding Awareness week with the Barnsley Safeguarding Children's Board in July 2016; The week included training for staff and volunteers, education and advise for the public with the aim to support adults, children and families to keep themselves safe. A larger scale Safeguarding Awareness week will be held in 2017/18, with events being held across the Borough.

Our Board partners have embedded the need to keep adults safe in their daily practice:

Berneslai Homes have:

- Completed over 3,800 visits as part of their vulnerability strategy – "Something doesn't look right", which lead to over 1,700 supportive interventions, some of these interventions led to a safeguarding concern being shared with BMBC Adult Social Care.
- Employed a number of Mental Health Housing Support workers to work with tenants with mental ill health issues. The aim of the posts is to increase the chances of the person keeping their tenancy and to intervene at an early stage to prevent or respond to abuse.

Northern College have:

- Maintained their commitment to employ Safeguarding Leads within the college and they have delivered regular safeguarding sessions for staff and students and explored how they will prevent students who might be at risk of radicalisation.

NHS England have:

- Launched "React to Red", a competency based training package for care home staff to prevent pressure ulcers. Since its launch in 2016 a high number of care homes, domiciliary care providers etc have expressed interest in it. NHS England will continue to encourage adoption and use in 2017/18

South Yorkshire Police have:

- Established their Safeguarding Adults Team at Wombwell Police Station, the officers in the team are highly skilled and deal with the most serious and complex abuse cases, working closely with other Barnsley partners to deliver high quality responses.
- Provided training to the majority of their officers in the new Safer Neighbourhood Service.

South Yorkshire Fire and Rescue have:

- Introduced a "Safe and Well Check", in addition to checking an adults home for fire safety they will also give advice or signpost adults to services to prevent falls, crime and identify concerns about the adult's sight.
- Introduced High Risk Coordinators who manage high risk fire cases linked to self neglect or safeguarding

Barnsley Council have:

- Agreed four new contracts for services to deliver support for adults who are homeless, who need help with substance misuse or need help to reduce or remove the risks of domestic abuse. All of the contracts include a requirement to demonstrate an ability to work to keep adults safe and to report safeguarding concerns.
- Created a new steering group to refresh and extend the Barnsley Safe Places scheme.
- Supported their Trading standards colleagues to engage in a national scheme to highlight the risks of "scam mail" and bogus callers.

Case Study: Early intervention by Barnsley College and social care resolved family issues without the need for formal safeguarding

A 23 year old College student with a learning disability disclosed to a member of staff that his Dad had been "cross" with him when they were at home and he said his Dad had grabbed his arm and hit him. Dad has learning difficulties and the family is supported by a social worker. College staff listened to the adult who was keen to stay at home but wanted help to prevent his Dad causing him any further harm. The college staff worked with the family social worker to agree a plan to keep the student safe and meet any support needs for Dad. Dad and son agreed to the mediation offered by the social worker and college and this was successful. Dad and son continue to live together happily. The student reports that he feels happy and safe at home

Priority Three

Making Sure that Safeguarding Works Effectively

The Board receives reports at each meeting from both sub groups, including copies of their work plans, which show how well they are doing. The chairs of the two sub groups bring a report of any issues they would like help to complete or to identify that this action may not be possible to deliver. Pathways and Partnership have identified that we are not able to deliver the volume of level three training to equip staff to be involved in safeguarding enquiries and to oversee the quality of level one and two training delivered within partners agencies. They recommended that this could be addressed by the creation of a multi agency trainer post (in common with Safeguarding Children), however a lack of finances has prevented this and alternative approaches have been agreed to address some of the risks, including the use of multi agency learning groups to review cases. This will continue to be reviewed and addressed in the coming year.

Annually all partners are asked to complete a self assessment to identify areas of good practice and areas of risk or development. In the last year, meetings were held with representatives from each of the Board partners and the Independent Chair and Board Manager to discuss their self assessment and identify any areas that would need to be addressed by the Board. The meetings offered an opportunity to identify any growth areas for individual partners and good practice that it would be beneficial to share with other Board members.

Feedback from front line staff has demonstrated that adults are feeling more confident in telling us what they want from safeguarding and what help they want in staying safe. This is essential to support us all to keep adults safe in a way that empowers and enables them to take control of their lives.

The Board and the Sub group have committed to review the South Yorkshire Safeguarding Adults procedures and this work will continue into 2017/18 with our South Yorkshire Safeguarding neighbours (Doncaster, Rotherham and Sheffield). Locally operational guidance has been produced to demonstrate how we will work with adults and in a multi agency way to keep adults safe. The guidance is included on the Safeguarding Adults Web Site and training was delivered to a wide range of organisations, including advocacy services, care homes, colleges etc.

Pathways and Partnerships have:

- Completed a training needs analysis and business case to the Board, to meet the training needs of staff who are required to complete part or all of safeguarding enquiries. (Level three training)
- Attended a wide range of regional working together events and/or received feedback from them to keep the group updated on best practice
- Received presentations from Trading Standards on scams and rogue traders, South Yorkshire Fire and Rescue, who described their Home Safety and Fire safety checks and the Prevent Coordinator who helped us to assess our ability to stop radicalisation of vulnerable adults.
- Produced and launched a comprehensive set of operational guidance, supported by free training sessions, which were attended by over 150 staff. The guidance will be reviewed in July 17 to confirm that they are effective. Staff feedback included ***"they help me to better understand how some decisions are made, particularly some to exit safeguarding"*** and ***"I am now much clearer about what I need to do when I am asked to do a S42 enquiry and why I have been asked to do it."***

Performance Management and Quality Assurance (PMQA) have:

- Completed a number of case file audits to make sure that practice is in line with our policies and expectations.
- In partnership with BMBC Contract and Compliance department, provided the Board with information about the quality of care homes in Barnsley.
- Completed an audit of our Board partners' ability to respond to allegations about People in Positions of Trust. This showed that robust processes were in place to reduce the risk of "unsuitable" workers who pose a risk to vulnerable adults being able to move from one job to another.

Board Partners have demonstrated their commitment to making sure that they deliver effective safeguarding within their organisations by appointing named staff for Safeguarding who provide advice and support to staff employed or commissioned by them. A number of these leads hold internal safeguarding adults meetings to share information and learning and to develop practice. South Yorkshire Fire and Rescue have an internal Safeguarding Executive Board and Reference subgroup to strengthen governance by looking at how we work and challenge each other to learn and improve internally and in how we work with other agencies to keep adults safe.

Board partners are committed to commissioning safe services and they receive regular information from their commissioned services to reassure them that adults who are provided with care are kept safe; this information is shared with a range of forums e.g. Barnsley Clinical Commissioning Group share information with the Quality and Patient Safety Committee.

NHS England regularly review all commissioned health organisations (e.g. Hospitals, GP surgeries etc.) and make sure that they are working to safeguard adults by defining and leading safeguarding practice via documents such as the Safeguarding Vulnerable People Accountability and Assurance Framework.

Provision of high quality education and training is essential if staff are confident to deliver high quality safeguarding support to adults in Barnsley. A range of in-house, multi agency and regional events were held in 2016/17 to meet the wide range of needs of staff

Barnsley Council is a key partner in the design and delivery of the regional "Working Together" programme which delivers a two day safeguarding course (four times a year) and up to four conferences a year. In 2016/17 these have included modern slavery, hate crime, working with the Disclosure and Barring service etc.

In 2017/18 the NHS England document detailing competencies required by Health staff will come into force. (The Safeguarding Adults: Roles and Competencies for healthcare staff – intercollegiate document.) South Yorkshire Fire and Rescue have an established a training programme for all frontline staff, including volunteers, to improve knowledge and confidence to respond to adults who may need safeguarding; including adults experiencing domestic abuse and, modern slavery.

Barnsley Council workforce development support the independent sectors (Care Homes, Home Care, voluntary and charitable organisations) by delivering multi agency safeguarding courses and providing access to National Vocational Qualifications. Independent sector forums are held quarterly and safeguarding adults is a regular topic of discussion. PMQA have agreed with the BMBC contracts department a set of data to each Board meeting about the quality of Care Homes in Barnsley. This will be extended to Home Care providers in 2017/18.

Barnsley Hospital delivered level one training to 92% of its staff and level two training to 87% of staff in 2016/2017.

SWYPFT staff in Barnsley has a training target for level one and two training of 80%. In 2016/17 91.76% attended level one training and 88.98% completed level two training *.

**- (Level one training is provided for staff who have no patient contact, level two is provided for staff with patient contact.)*

Many of the organisations with safeguarding leads provide advice and support to staff and some screen safeguarding concerns to improve our person centered focus; , Barnsley Hospital have a team of three nurses who support staff to respond proportionately to harm and abuse. In 2016/17 the hospital safeguarding team screened 471 concerns and they shared 64 of these with Adult Social Care.

NHS England have updated and circulated the Safeguarding Adults pocket guide, which is very popular with health professionals, an App has also been released for staff who prefer to view via their mobile phones or laptops.

Many of our partners are inspected by the Care Quality Commission (CQC), SWYFPT were inspected in 2016/17 and CQC commented that:

"'The trust had robust governance arrangements in place to safeguard adults and children. Staff had good knowledge of how to identify a safeguarding concern and the procedures to follow. At this inspection, we reviewed the trust's approach to safeguarding to assure ourselves that safeguarding remained one of the trust's highest priorities and that governance approaches continued to be robust. We also reviewed the trust's on-going actions in relation to the Saville report, and the trust's whole family approach to the 'think family' agenda'

The Safeguarding Board recognise the value of a Board Manager to coordinate its activities and to support the development of their strategic agenda, despite financial pressures this post was recruited to after the departure of the last permanent Board manager.

South Yorkshire Police have a regional safeguarding hub that coordinates all the Safeguarding Adults Reviews and the Domestic Homicide Reviews. The Hub also works with the South Yorkshire Board Managers to agree policies, performance measures and to address any issues relating to practice

NHS England have developed a Safeguarding Quality Assurance Tool for use with the Clinical Commissioning Groups in the North of England; the Designated Nurses completed a review of each regions action plans to identify key themes and trends with the plan to identify common areas of required support.

Priority Four

Making sure that all children, at risk, who transition into adult services are protected from further abuse and neglect

The Board is aware that the thresholds for adult services are not the same as children's services, despite this the Board is committed to make sure that the most vulnerable young people are supported into adulthood and empowered to reduce the risk of further harm and abuse.

The Board manager has joined the Children with Complex Needs and Disabilities sub group to support joint work. Children with disabilities are considered as a "Child in Need" in line with the 1989 Children's Act and is entitled to an assessment. The number of children with disabilities who have experienced abuse is small, but it is essential that any safeguarding risks are fully addressed as they reach adulthood. A small audit of young people on Child Protection plans aged 17 plus was completed to provide baseline data for both the Adults and Children's Boards. This will be repeated in 2017/18 to inform the work of the Boards and Social Care services.

We hope to extend membership of the new Safeguarding Forum in 2017/2018 to include young people to provide direct feedback on their experiences and examine the impact for the way we support them in the future.

Barnsley Safeguarding Adults Board have:

- In partnership with the Safeguarding Children's Board identified shared priorities and actions to support the safe transition of young adults who need safeguarding beyond the age of 18. Shared lessons from Serious Case Reviews, Safeguarding Adults Reviews and lessons learnt across the Boards and sub groups.

Pathways and Partnerships have:

- Agreed with the Children and Complex Needs Sub group of the Barnsley Safeguarding Board a number of actions that will be completed in 2017/18.

Performance Management and Quality Assurance have:

- Agreed with the Children's Safeguarding Adults Board sub groups that they will receive data from their audits completed in 2016/17 to identify the numbers and vulnerabilities of young people in transitions. This work will continue in 2017/2018 to inform their work plans and audit programme.

Our Health Partners have named nurses and/or GPs for both adults and Children and they provide a safe transition for young people who require health support into adulthood.

The Colleges regularly work with young adults who require safeguarding support beyond eighteen, through the education and support provided they aim to equip young adults to protect themselves from harm and abuse once they leave the support of college.

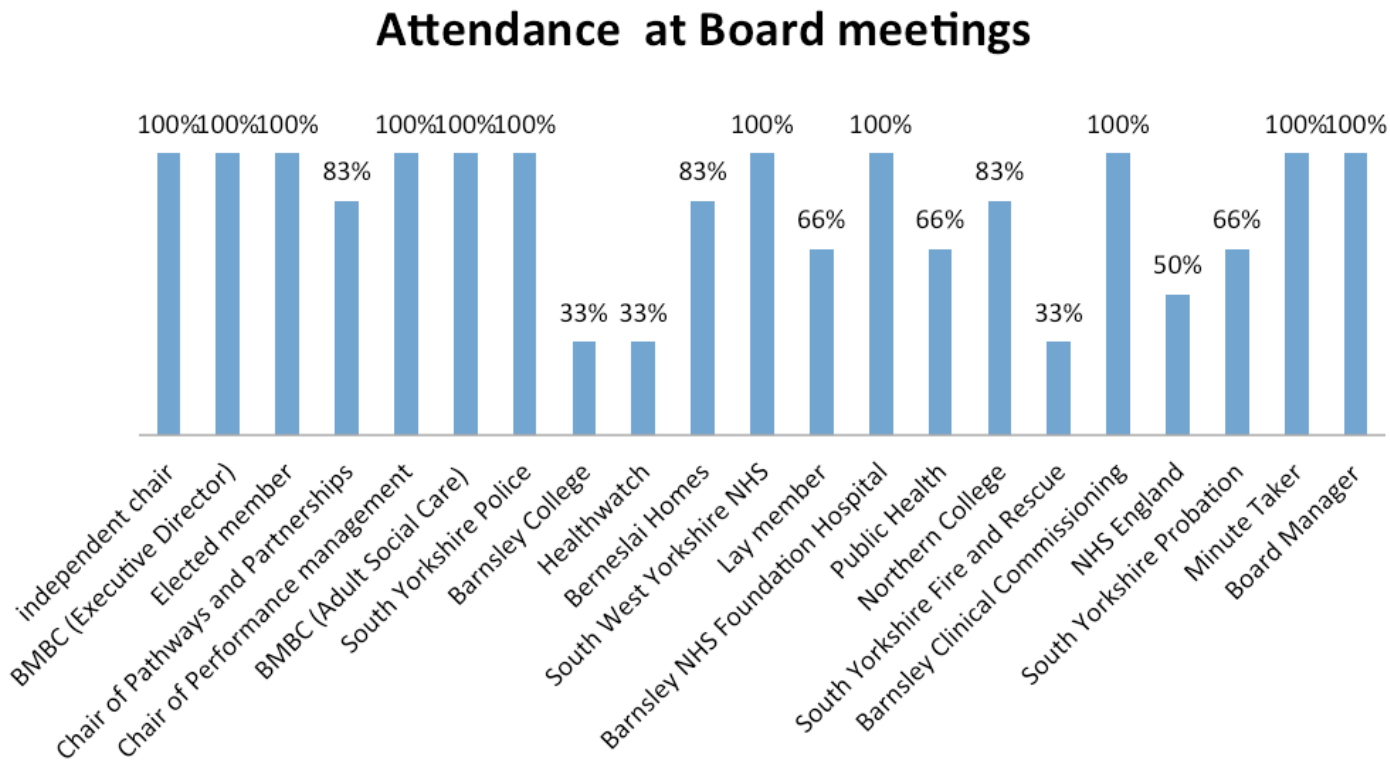
Priority Five

Making sure the Safeguarding Adults Board provides effective leadership and strategic direction for Safeguarding in Barnsley

The Board is chaired by an Independent Chair (Bob Dyson) who is able to support Board members to work together to deliver the shared vision and objectives. This includes active monitoring of attendance. Our statutory partners (Barnsley Council, South Yorkshire Police and the Clinical Commissioning) have attended 100% of the meetings.

We are delighted that our non statutory partners have demonstrated their ongoing commitment to the Board by high levels of attendance, South Yorkshire Fire and Rescue are unable to attend all meetings due to their requirement to attend both Adult and Children's Board in four Local Authority areas).

Commitment to the Board



The Board has worked hard to strengthen relationships between the Board partners and key individuals to increase our ability to challenge each other to deliver our agreed plans.. The Chair and Board manager require all Board members to complete an annual self assessment to provide assurance that we are all working to keep adults safe by preventing harm and abuse. The results from these audits inform the development of our strategic plans.

The Board agreed to provide funding to support the development of a new Safeguarding Forum, run by and for members of the public with an interest in keeping adults safe and influencing the work of the Board.

The Board has a number of members, who sit on other Boards, and they share responsibility to keep Adults safe.

These include the:

- Health and Wellbeing Board
- Barnsley Safer Partnership Board
- Safeguarding Children's Board

The Safeguarding Adults Board has endorsed the creation of "map" of the work of all the Boards working to keep adults and children safe to support effective joint work on common issues, these include Domestic Abuse, Hate and Mate Crime, etc.

The Board's sub groups have supported the Board to deliver this priority by overseeing the development of a Multi-agency communication and engagement plan that is discussed at each sub group meeting.
The communication plan increased the use of social media to provide information to adults to assist them to maintain their personal safety. The sub groups led on the joint review (with Safer Partnership colleagues) of the Domestic Homicide Review and Safeguarding Adults Review guidance, (available on the Safeguarding web site).

The Pathways and Partnerships and the Performance Management and Quality Assurance (PMQA) sub groups have updated their terms of reference to reflect the changes in legislation, local and national guidance and the priorities of the Board. These will be reviewed annually.
To provide the Board with assurance that all its partners are working in line with the six Care Act principles and MSP, they are supporting PMQA to develop a multi agency dashboard. This dashboard will be included in the 2017/18 annual report.
The Board demonstrated its commitment to embed Making Safeguarding Personal, which puts the adult, who has been harmed, at the centre of our safeguarding response by holding a development event for all Board Partners. Learning from this will be included in our strategic plan for the coming year.

In recognition of the importance of the Barnsley Safe Places scheme, governance arrangements were established to the Barnsley Safer Partnership Board. Additionally it was agreed that the Safeguarding Adults Board would receive information about how the scheme is helping to keep adults in Barnsley safe.

The Safe Places scheme provides a network of businesses that have trained their staff to feel confident to support adults who call in when they need help when they are frightened or lost when out and about in Barnsley. All the businesses who have signed up to the scheme display a sticker making them easily identified by the members of the scheme. The Board Manager contributes to the work of the multi–agency steering group.

Safeguarding Data

Keeping adults safe

The main aim of Safeguarding is to keep or help adults feel safe. The tables below show figures from 2015/16 with regional comparisons and figures for 2016/17 (comparator data is not available until autumn 2017)

The proportion of people who uses servies who feel safe

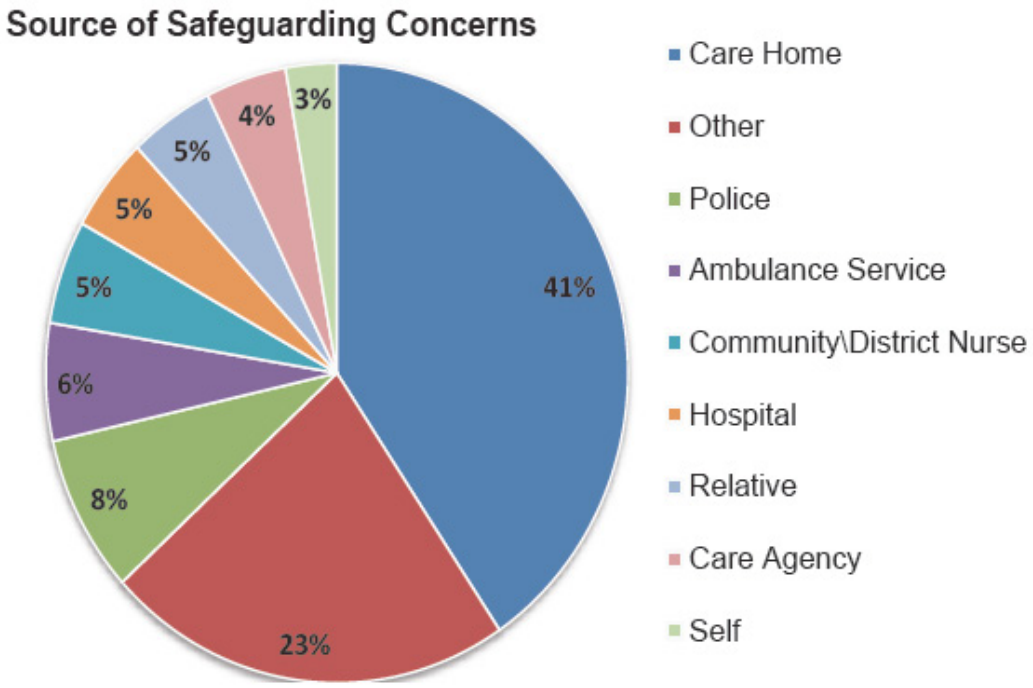
Year	Barnsley	Yorkshire & Humber	Comparator Group[i]	National
2015/16	73.3%	69.9%	69.1%	69.2%
2016/17	76%			

The proportion of people who say those services have made them feel safe and secure

Year	Barnsley	Yorkshire & Humber	Comparator Group	National
2015/16	95.2%	85.9%	84.6%	85.4%
2016/17	95%			

The charts above show that adults in Barnsley feel much safer than other Local Authority areas of a similar size (regional and national comparators), this would suggest that the contributions by the Board partners to prevent abuse and harm and to respond to abuse have been successful in keeping adults safe.

Who is telling us they are worried about the safety of Barnsley adults?



Barnsley Adult Social Care received over 1.400 concerns from the organisations shown above. The CQC asks Care Homes to share all their safeguarding concerns with Adult Social Care, even if the adult was not harmed, a lot of these concerns are closed at an early stage following a conversation with or a visit to the care home. The number of concerns received from relatives and self referrals is evidence that the public know about safeguarding and know how to report their concerns. This is essential as many adults do not receive services and will be reliant on friends/ neighbours to "look out for them". We hope to see this number increase in future years by increasing the ways the public can share their concerns, this will include a text service and a web based form, in addition to email and phone calls.

When we receive a safeguarding concern we make a decision about what action is needed.

This includes:

- Taking no action either because the adult was not harmed or the adult does not want any action taking and no other adults are at risk
- Providing or reviewing a care package or signposting to other support – e.g. asking domestic abuse service to help the adult
- Starting a safeguarding enquiry based on what the adult has told us they want to happen (these are called outcomes), once we have agreed these with the adult we call this a section 42 enquiry

In 2016/17 we started 386 section 42 enquiries; this is in line with other Local Authorities of similar size.

Who did we safeguard via a section 42 enquiry?

Age and Ethnicity

	2016/17 - Number / Percentage	Population / Percentage
18-64 year old	136 (35.2%)	144,824 (76%)*
65+ year old	250 (64.8%)	44,811 (24%)*
Male (18+)	164 (42.4%)	92,749 (49%)*
Female (18+)	222 (57.5%)	96,886 (51%)*
White (18+)	351 (90.9%)	179,132 (98.1%)**
Other Ethnic Group (18+)	8 (2.1%)	3,399 (1.9%)**
Not stated	24 (7.0%)	N/A

*2015 Population Estimates
**2011 Census

The majority of the adults, who needed help to stay safe in Barnsley, were women over the age of 65; however more men over 65 were referred to safeguarding in 2016/17 than in 2015/16 from 38% to 42.4%). National data from the Department of Health shows that adults over 65 are most commonly referred into safeguarding. This is, in part, due to the large number of adults over 65 who are in receipt of care, in their own homes or in care settings, who are protected by the actions of staff who identify risks to their safety, in addition to their increased vulnerabilities (physical and mental health).

Barnsley has a mainly white population, and this is reflected in the number of safeguarding concerns; however adults from Ethnic Minority groups are safeguarded appropriately, shown by the number of referrals linked to the population percentages.

Care and support needs

	Number of adults who need safeguarding support	Adult Social Care Clients
Physical Support	147 (38.0%)	1939 (61.0%)
No Support Reason	118 (30.6%)	N/A
Support with Memory & Cognition	54 (14.0%)	398 (12.5%)
Learning Disability Support	48 (12.4%)	591 (18.6%)
Mental Health Support	13 (3.4%)	161 (5.1%)
Sensory Support	1 (0.3%)	22 (0.7%)

Adults can be safeguarded even if they don't receive care from Adult Social Care; this is reflected in 30% cases with no recorded support reason. The high numbers of adults with learning disabilities and memory problems highlight the vulnerability of these groups, but reassuringly suggest that we identify harm and take action to stop it . We need to consider if we need to increase the information we provide to the public to protect all adults who are at risk of abuse.

What setting is the alleged abuse/concerns happening in?

	Who has allegedly hurt the adult?			
Where the adult is living	Service Provider	People known to the adult	People not known to the adult	Total
Care Home - Residential	105	42	45	192 (52.9%)
Own Home	15	46	30	91 (25.1%)
Care Home - Nursing	14	14	5	33 (9.0%)
In a community service	11	3	3	17 (4.7%)
In the community (excluding community services)	1	6	6	13 (3.6%)
Other	0	4	4	8 (2.2%)
Hospital - Acute	1	2	3	6 (1.7%)
Hospital - Mental Health	0	2	1	3 (0.8%)
Hospital - Community	0	0	0	0 (0%)

The majority of safeguarding concerns reported to Adult Social Care are received from Care Homes, this is linked to their commitment to provide safe service and the requirement placed on them by CQC to report all issues, even if the adult is not harmed. Care Homes are often able to identify that other people may be harming people/relatives that live in care settings.

The majority of the abuse that adults experience in their own homes is from adults they know and trust, family, friends and neighbours; who make up 5% of the total figure. Harm by families is often unreported as adults are embarrassed or too scared to tell anyone about it and it happens in secret, unless the adults has someone they can trust to share with. This could include their doctor, social worker etc.

Location of risk/harm

	Own Home	Community Service	Care Home	Hospital	Other
Barnsley	25%	0%	50%	15%	11%
Y&H Average	39%	3%	42%	7%	8%
Comparator Group	41%	4%	41%	7%	7%
England	43%	3%	36%	6%	11%

Barnsley has lower than average reports of abuse in people's own homes compared with other Local Authorities of similar size, (see table above showing data from the Department of Health Safeguarding Adults Collection 2015/2016. The 2016/17 data will not be available until the end of 2017).We cannot be sure that this means adults are safer in Barnsley, as we do have comparable levels of domestic abuse in the Borough. One of our challenges for the coming year will be to explore how we empower adults to tell us when families are hurting them.

What sort of alleged abuse is reported in Barnsley

Type of abuse	Numbers in 2016/2017
Neglect and Acts of Omission	190 (44.4%)
Physical Abuse	99 (23.1%)
Financial or Material Abuse	55 (12.9%)
Psychological Abuse	41 (9.6%)
Sexual Abuse	25 (5.8%)
Organisational Abuse	16 (3.7%)
Discriminatory Abuse	2 (0.5%)

The majority of the neglect cases, reported to Adult Social Care, suggest that concern around perceived poor care from workers or services may have resulted in harm (110 cases); however, adults who are in receipt of paid care are more likely to be identified as at risk of, or experiencing harm than those who do not receive care services or other support. In 2016/17, Barnsley received reports that 41 adults were allegedly being neglected by family and friends.

The majority of the alleged financial abuse reported involved adults whose alleged abuser was a person known to them (20 cases), we received 7 referrals alleging that workers and/or services took money or goods from adults they provided care to.

The low number of discriminatory cases reported locally, regionally and nationally and raises questions about how easy it is for adults to tell someone when they are being bullied or victims of mate or hate crime. Adults who are victims of discriminatory abuse may be forced out of their homes, have money taken off them on a weekly basis, be subjected to name calling or physical attacks on a regular basis. The number of hate crimes now reported locally and nationally has increased, following a sustained awareness campaign. In light of this we will be looking to scope out the issue in the coming year with support from the safeguarding customer forum.

Data from the Department of Health on the types of harm adults experienced in 2015/16 is shown below, this evidences that we have fewer reports of financial abuse than our comparators and the regional and national averages.

	Physical Abuse	Psychological Abuse	Financial or Material Abuse	Neglect and Acts of Omission	Other Risk Types
Barnsley	17%	8%	11%	37%	28%
Y&H Average	21%	16%	18%	35%	11%
Comparator Group	25%	14%	16%	36%	9%
England	26%	15%	16%	34%	9%

Do adults feel safer as a result of safeguarding?

Safeguarding aims to help adults to stop the harm and reduce the risk of further harm, the following chart shows how well we did this. We ask the adult (or their advocate), where possible to tell us if they feel safer at the point we close the Section 42 Enquiry

Risk Remained	**4.6%**
Risk Reduced	61.4%
Risk Removed	34.0%

Adults have the right to make choices to remain in situations that may not be totally safe and many will make decisions to maintain relationships with people who harm them, rather than lose contact with them and risk feeling alone.

Safeguarding works with the adult, respecting their wishes and feelings to reduce the risk of harm to them and other adults.

In future annual reports we will include information about how well we did in meeting the adults' outcomes and if they feel safer as a result of our interventions

Learning Lessons

The Board is committed to learn lessons by examining cases that did not meet the threshold for formal reviews. In 2016/17, two multi-disciplinary events were held.

Adult 1

Older adult living in a residential care setting, with complex health needs which required the use of a catheter. He died of natural causes and no concerns were raised about the conduct of the professionals involved with his care by the Coroner's Court or the police enquiry. The case was considered as a potential Safeguarding Adults Review, but it did not meet the threshold, however the Board agreed that lessons could be learnt by reviewing the cases.

Each agency who had been involved in the care of Adult 1 completed an evaluation of their actions and identified areas that could potentially improve the care of other adults in care settings with complex needs. The board manager collated the responses and identified the following themes that would benefit from closer examination

1. Communication with partners, family members and other key agencies
2. Timeliness and quality of the safeguarding enquiry
3. Referrals to Disclosure and Barring Service and other professional registration bodies
4. Ability to deliver high quality organisational abuse enquiries
5. Role of professionals visiting care settings to address care standards and /or raise safeguarding concerns.
6. Risk assessments and identification of wider issues (e.g. shortage of skilled nurses available in the region)

The board manager was encouraged by the willingness of all agencies to engage with the exercise and feedback indicated that the review was a positive experience for all involved

Key actions were identified from the event and these have been included in the work plans for the Sub Groups of the Board and these include

Improvements to the way in which we manage organisational abuse enquiries

Exploring ways to provide families and adults with information to support them to choose appropriate care for themselves or their relatives

Increasing the role of commissioners to make sure that employers make referrals to the Disclosure and Barring service or other professional registration bodies in a timely way

Encouraging visiting professionals to increase their "curiosity" and issues that "don't feel or look right" and to share these if they are not able to resolve their concerns

A number of these actions have been completed, including:

- Production of a Safeguarding decision support tool
- A new framework for managing organisational abuse cases
- The Board have been briefed on the impact of the lack of nurses on care homes
- A briefing session has been provided to the Independent sector forum

The Board and its sub groups will continue to monitor the progress of remaining actions to deliver the desired changes.

Adult 2

Adult 2, died of liver failure, as a result of an overdose (it was unclear if she intended to take her own life?)

Adult 2's death was considered as a possible Domestic Homicide Review, but it was agreed that as the overdose did not appear to be linked to her abusive relationship that it did not meet the criteria.

Her oldest daughter spent significant time with her mum and regularly reported concerns to the police about the violence her mum experienced from her male partner. The police visited Adult 2 several times but were unable to secure her agreement to press charges against her partner or to accept offers of help via domestic abuse services.

Male friends visited adult 2 and plied her with alcohol and then raped her. The police attended but were unable to persuade Adult 2 to make a complaint

Later that day, Adult 2 took a large number of pain killers and continued to drink alcohol; she disclosed this to her partner when he returned home, however he did not take any action to obtain medical help. Three days later he called an ambulance when he discovered Adult 2 vomiting blood, he did not tell the ambulance staff about the tablets she had taken and did not travel to the hospital with her. The hospital obtained this information after admission, via a telephone call to him.

A multi agency group looked at this case and identified the following areas that would benefit from further examination

1. The quality of risk assessments and the narrow focus of these not taking account of the wider context of the situation
2. Did we share information in a timely way to prevent harm and respond to the needs of Adult 2 and her oldest daughter
3. Are workers able to identify the risks to others in the household beyond the person they are employed to provide care to (adult worker recognising the risks to children and vice versa)
4. Was the Mental Capacity Act used appropriately , as Adult 2 was often under the influence of alcohol and drugs
5. Are workers able to complete high quality domestic abuse risk assessments and make the necessary referrals to the MARAC process (Multi-Agency Risk Assessment Conference)

Following the review of this case we agreed that the following actions should be included on the work plans of the sub groups of the Board.

- All agencies to review information sharing systems and advice provided to workers when working with families affected by domestic violence
- BSAB and BCSB to consider a joint review of the quality of Domestic Abuse Risk Tool (DASH) and the assessments of domestic abuse cases at the Multi Agency Risk Assessment Conferences (MARAC). The review considered the option of extending the review to other South Yorkshire Local Authorities.
- Review knowledge of Care Act and Adults at Risk in Children's Social Care and implement measures to address any gaps ; including providing training, information sheets, etc to assist workers to identify young adults who may benefit from assessments in their own right.
- Boards to review their strategic plans to strengthen the robustness of transitions arrangements
- Review Children's Case Conference agenda with a view to implementing prompts to encourage assessment of parents/other adults vulnerability
- Review screening by Central Referral Unit within South Yorkshire Police.
- Review if the Person Posing a Risk process is robust within Barnsley
- Examine the role of the Public Service Hub in addressing Domestic Abuse cases that don't meet the MARAC threshold
- Embed knowledge of and use of Meghan's Law

Actions completed

- A local review of the quality of MARAC meeting has taken place and a series of actions agreed
- Increased information about Adults at Risk and the Care Act has been included in training delivered by the multi agency children's trainer
- Work has commenced with the Public Service Hub (now the Safer Neighbourhood Service) to agree thresholds
- A review of the children's case conference agenda has been completed, but this will be reviewed to evaluate impact on practice.
- The sub groups are reviewing how we respond to People in Positions of Trust and reports will be shared with the Board.

What we intend to do in 2017-2018	By when
Complete a review of the South Yorkshire Safeguarding Procedures	**September 17**
Sign off the operational guidance	**September 17**
Develop and embed a people in positions of Trust policy	**January 18**
Sign off and embed a self neglect and hoarding policy	**January 18**
Establish an effective safeguarding customer forum	**August 17**
Develop a multi agency (Care Act compliant) dashboard	**December 17**
Hold the first learning event on SARs and DHRs	**September 17**
Embed a robust level three training programme	**January 18**
Run a joint Safeguarding Awareness Week with the Children's Board	**July 18**
Work with Safer Partnership and Barnsley Safeguarding Children's Board to raise public awareness of adults at risk of mate and hate crime.	**January 18**
Continue to complete audits to monitor practice	**Ongoing**
Establish a network of safeguarding "champions"	**January 18**
Agree and circulate a set of publicity materials	**December 17**

Safeguarding Adults Board Budget 2016/2017

The Board is funded by the agencies shown below and funding levels are reviewed on an annual basis.

Barnsley Safeguarding Adults Board Final Position 2016/17			
Income £		Expenditure £	
Partner Contributions			
Barnsley MBC	£57,276	Staffing	£86,945
Police & Crime Commissioner	£5,595		
NHS Barnsley CCG	£26,648	Running Costs	£2,574
TOTAL	£89,519	TOTAL	£89,519

Resources

How to report abuse
https://www.barnsley.gov.uk/services/adult-health-and-social-care/keeping-safe/report-adult-abuse/

Barnsley Safeguarding Adults Board
https://www.barnsley.gov.uk/services/children-families-and-education/safeguarding-families-in-barnsley/safeguarding-adults-in-barnsley/

Link to South Yorkshire Adult Safeguarding Procedures
http://asg.returnonideas.co.uk/

Care Act 2014 – Care and Support Statutory Guidance
https://www.gov.uk/guidance/care-and-support-statutory-guidance

Financial Abuse 'Under the Radar'
https://www.citizensadvice.org.uk/about-us/how-citizens-advice-works/media/press-releases/financial-abuse-going-under-the-radar/

Social Care Institute of Excellence (SCIE)
http://www.scieorg.uk/

Care Quality Commission
http://www.cqc.org.uk/

Healthwatch Barnsley
http://healthwatchbarnsley.co.uk/

Action on Elder Abuse
http://elderabuse.org.uk/

Call 01226 773300
To report adult abuse, harm or neglect

Call 0844 984 1800
To report urgent concerns outside office hours

**Report of the Executive Director Core Services,
to the Overview and Scrutiny Committee (OSC)
on 12th September 2017**

**Barnsley Safeguarding Children Board (BSCB) Annual Report 2016-17
- Cover Report**

1.0 Introduction and Background

1.1 Local Safeguarding Children Boards (LSCBs) are used across the country to enable organisations to come together to agree on how they will cooperate with each other to safeguard and promote the welfare of children. The Children Act 2004 gave a statutory responsibility for the boards to be in place, to enable local partnership working to hold each other to account and to ensure safeguarding children remains high on the agenda across the area.

1.2 The Barnsley Safeguarding Children Board (BSCB) was established in 2006 and brings together key representatives from local agencies. BSCB is an independent body with an independent Chairperson who is able to hold partner organisations to account for their effectiveness in safeguarding children and promoting their wellbeing.

1.3 In December 2015 the Prime Minister announced that a fundamental review of the role and functions of LSCBs within the context of local strategic multi-agency working would be undertaken. This resulted in the Wood Report which was published in March 2016. Following this, the government responded to the report's recommendations and highlighted that instead of a statutory requirement to have an LSCB, they will introduce a stronger but more flexible statutory framework that will support local partners to work together. The plans for the framework are that it will set out clear requirements for the key local partners to work together, while allowing them freedom to determine how they organise themselves.

1.4 Services are currently awaiting further government guidance on statutory local arrangements. However, locally, the current arrangements remain in place, with the BSCB continuing to meet to ensure that:

- children and families are getting the help they need, including early help;
- local services are doing what they should to safeguard and promote the welfare of children in the area;
- the quality of the work done is to the highest standards;
- lessons are learned for the future from when children have been harmed (e.g. Serious Case Reviews [SCRs]);
- local training is provided to help professionals to keep children safe.

1.5 An Ofsted inspection of BSCB in 2012 highlighted that a number of areas required improvement and further development. A further inspection in 2014 acknowledged that improvements had been made which led to the Department for Education's Notice to Improve being lifted and the disbanding of the Improvement Board in January 2015. This leaves the BSCB with a significant governance role in ensuring that the comprehensive Continuous Service Improvement Plan is implemented and changes continue to be embedded.

2. Current Position

2.1 The BSCB Annual Report 2016-17 (Item 5b - attached) outlines the work of the Board over the last year and indicates its plans for continued improvement. The Board's key priorities for 2017-18 are outlined on p22-23 of the attached report.

2.2 The governance structure of the Board outlining its relationship with a number of other partnership groups such as the Health and Wellbeing Board (HWB) and the Children and Young People's Trust is shown in Appendix 1 (p24) of the attached report. The governance structure of the Board itself including its subcommittees who are able to progress the work of the Board, is shown in Appendix 2 (p25) of the attached report.

3.0 Invited Witnesses

3.1 At today's meeting, a number of Board representatives have been invited to answer questions from the Overview and Scrutiny Committee regarding the work of the BSCB over the last Annual Reporting year (April 2016-March 2017) as well as to talk about the work currently being undertaken:

- Bob Dyson, Independent Chair, BSCB
- Brigid Reid, Chief Nurse, Barnsley Clinical Commissioning Group (CCG)
- Angela Fawcett, Designated Nurse Safeguarding Children, Barnsley CCG
- Chief Superintendent Scott Green, Barnsley District Commander, South Yorkshire Police (SYP)
- Detective Chief Inspector Joanne Bates, SYP
- Mel John-Ross, Service Director, Children's Social Care and Safeguarding, BMBC
- Monica Green, Head of Service-Safeguarding & Quality Assurance, BMBC
- Nigel Leeder, BSCB Manager, BMBC
- Cllr Margaret Bruff, Cabinet Spokesperson - People (Safeguarding), BMBC

4.0 Possible Areas for Investigation

4.1 Members may wish to ask questions around the following areas:

- What have been the most challenging areas of work in the last 12 months and have these been effectively addressed?

- What sorts of harmful behaviours are children most exposed to in Barnsley and what is being done to reduce the potential of these incidents occurring?

- What evidence do you have that the policies and processes for keeping children safe are robust and effective?

- What is in place to ensure continuous improvement and to hold partners to account? Are all partners engaged and actively participating?

- What impact has the establishment of the Multi-Agency Safeguarding Hub (MASH) had?

- What were the findings of the Anti-Bullying Strategy Task & Finish Group and how will these be used to drive improvements?

- How do you ensure that the voice of our children and young people is heard by BSCB and influences its work?

- What has been learnt from Serious Case Reviews nationally and how has this influenced local practice?

- What strategies are being explored as a result of the findings of the Child Death Overview Panel?

- What potential risks do you foresee that may prevent the Board from achieving its priorities and fulfilling its responsibilities for 2017-18 and how will these be mitigated?

- What actions could be taken by Members to assist in the work of BSCB?

5.0 Background Papers and Useful Links

- BSCB Annual Report 2016-17 (Item 5b - attached)
- Working together to safeguard children: A guide to inter-agency working to safeguard and promote the welfare of children (March 2015): https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419595/Working_Together_to_Safeguard_Children.pdf
- Wood Report – Review of the role and functions of LSCBs (March 2016): https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/526329/Alan_Wood_review.pdf
- Government's response to the Wood Report (May 2016): https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/526330/Government_response_to_Alan_Wood_review.pdf
- Barnsley Safeguarding Children Board Website: https://www.safeguardingchildrenbarnsley.com/

6.0 Glossary

BHNFT - Barnsley Hospital NHS Foundation Trust
BSCB – Barnsley Safeguarding Children Board
CAFCASS - Children and Family Court Advisory and Support Service
CCG – Clinical Commissioning Group
CDOP – Child Death Overview Panel
LSCBs – Local Safeguarding Children Boards
Ofsted – Office for Standards in Education, Children's Services and Skills
SCRs – Serious Case Reviews
SWYPFT - South West Yorkshire Partnership NHS Foundation Trust
SYP – South Yorkshire Police

7.0 Officer Contact

Anna Marshall, Scrutiny Officer (01226 775794)
4th September 2017

This page is intentionally left blank

annual report 2016-17

barnsley safeguarding children board

a BRIGHTER future for EVERY CHILD make EVERY DAY count

365

children young people families

Contents

Chair's foreword

I am pleased to introduce the Annual Report of the Barnsley Safeguarding Children Board for 2016/17.

Whilst there have been inevitable changes in some of the representatives of partner agencies at the board, I am pleased to be able to report that there has been no change in the commitment being shown to keeping children and young people safe in Barnsley.

The board continues to play a leading role in ensuring that continuous improvement takes place to improve partnership working and to hold partners to account. The Continuous Service Improvement Plan is a standing item at every board meeting with the plan having been refreshed to reflect the progress that has been made and to identify new actions.

The main body of this report provides more detail of the work of the board and its individual sub-committees but just to highlight a few notable achievements from the last year:

- The Multi-Agency Safeguarding Hub (MASH) was established. This brings together front line staff from a range of agencies including Children Social Care, Health, Education and the Police working together in the same offices at one location. This is a step forward in close partnership working.

- There has been a marked increase in the number of Early Help Assessments being completed. (From 1047 in 2015/16 to 1752 in 2016/17) This is welcomed as it evidences that agencies are identifying families and children at an early stage; this allows support to be given aimed at improving their situation before their circumstances become more chronic.

- There has been a reduction in the number of children on Child Protection Plans. (257 at the end of March 2017)

- A task and finish group was established to review and refresh the Anti Bullying Strategy. This is an important piece of work that will come to the board in the summer of 2017.

- For the second year in a row there has been a 100% return of Section 175 self assessments on safeguarding in schools. The board recognises the important role that schools play in keeping children safe; the self assessment is a tool that gives considerable information to the board on the safeguarding procedures in schools.

- For the first time, the self assessment process was extended into early years settings, an example being nurseries. I consider this to be a strengthening of the board's role in ensuring that children are being kept safe.

- The board continues to have a high quality training programme. A day conference on domestic abuse, mental health and substance misuse (often referred to as the toxic trio) was oversubscribed and saw over 100 staff attend the event.

- Work has been commissioned to improve the Board's web site. The new web site went live on 16 May 207. We know that the web site is an important source of information for both professionals working with children and the public. The new web site will be much more user friendly and accessible.

https://www.barnsley.gov.uk/services/children-families-and-education/safeguarding-families-in-barnsley/safeguarding-children-in-barnsley/

- The first Safeguarding Awareness Week was held. This saw partners commit to running events across the borough to raise public awareness of safeguarding issues. It is being repeated again this year; more details of this year's programme of events can be found on the recently updated Barnsley Safeguarding Website

There is much more that I could add to that list but it gives a flavour of the work of the board over the last 12 months and evidences that we continue to commit ourselves to improving the services being provided to children and their families.

Looking ahead, I would like to see the board offering more information on how children and young people can stay safe when using the internet; this would include advice for parents and carers.

In conclusion, I am satisfied that the board and its member organisations consistently demonstrate their commitment to keeping children and young people safe.

Bob Dyson QPM, DL
Independent Chair, Barnsley Safeguarding Children Board

Introduction and local safeguarding context

Barnsley Safeguarding Children Board comprises of representatives from a range of statutory partners, who are passionate about promoting the safeguarding and welfare of local children, young people and families in Barnsley.

Our vision is that:

Every child and young person should be able to grow up safe from maltreatment, neglect, accidental injury/death, bullying and discrimination, crime and anti-social behaviour.

Children are entitled to a strong commitment from the BSCB and its constituent agencies to ensure that they are safeguarded. Where possible, this will be done in partnership with parents and carers, and by engaging the active support of the public. We will do as much as we can within the resources available to us and, with every agency providing services, we can maintain an inter-agency safeguarding system directed at safeguarding and promoting the welfare of all Barnsley's children.

We will endeavour to ensure that every child is safe, well cared for and thereby supported to fulfil their potential to make the transition from childhood to adulthood.

The board's prime responsibilities are:

To co-ordinate what is done by each person or body represented on the board for the purpose of safeguarding and promoting the welfare of children in the area, and "To ensure the effectiveness of what is done by each person or body for that purpose".

The board oversees work undertaken by partners to provide integrated services for children and families, with particular focus on safeguarding and promoting the welfare of children and young people.

This Annual Report provides:

- An outline of the main activities and achievements of the Barnsley Safeguarding Children Board during 2016 and 2017.
- An assessment of the effectiveness of safeguarding activity in Barnsley.
- An overview of how well children are safeguarded in Barnsley.
- Ambitions for future service developments and identification of key priorities.

Local relationships

The board is strongly committed to further strengthening its relationship with other strategic partners, including the Children and Young People's Trust Board, the Health and Wellbeing Board, the Safer Communities Partnership and the Barnsley Safeguarding Adult Board.

The board articulates clear improvement priorities in its Business Plan, with actions to accomplish improved outcomes.

A chart of the structural relationship between the BSCB and its strategic partners is shown on page 25 Appendix 1.

To ensure effective safeguarding and child protection, the BSCB operates under an up-to-date information sharing agreement to which all partners are signatories.

Local Demographic Context

Barnsley is part of a broad South Yorkshire conurbation located around traditional community bases of former mining and market towns. The latest data from the Office for National Statistics (ONS) (2015) shows the population of those under 18 years is approximately 21% of the total population at 49,700 (ONS Mid-Year Estimates 2015) and is expected to increase by approximately 4% by 2020 to 51,700. The predicted population increase has implications for increased demands on all services, including those providing child and family support. The School Census (January 2017) shows that 8.6% of primary school pupils and 6.7% of secondary school pupils are from minority ethnic origins.

Growing Up in the UK report (2013) recognises a link between infant mortality and deprivation; those born to the most deprived parents have a higher infant mortality rate per 1,000 live births compared to babies born to the least deprived. The Public Health Outcomes Framework 2013-15 data shows the Barnsley infant mortality rate at 4.0 deaths per 1,000 live births. This is slightly lower than the regional average 4.3 but slightly higher than the England average 3.9. The Index of Multiple Deprivation 2015 ranks Barnsley as the 39th most deprived local authority in England out of 326 where'1' is the most deprived.

NUMBER OF CHILDREN ON A PLAN IN BARNSLEY		
	2015 – 16*	2016 – 17*
Number of Children on CiN Plan	1628 (CiN at 31/3/16)	1550 (CiN at 31/3/17)
Number of Children on CP Plan	409 (CPP at 31/3/16)	257 (CPP at 31/3/17 – monthly social care report [May])
Number of Children Looked After	280 (LAC at 31/3/16)	288 (LAC at 31/3/17 – monthly social care report [May])
The number of children on a Plan varies. Therefore the reference date for the above Table is the same as the reference date for any other data reported in the BSCB Annual Report. The reference date for data in the BSCB Annual Report is annually on the **3rd May**. (Unless otherwise stated – ONS for example)		

Coordinating local work to safeguard and promote the welfare of children

Governance and accountability

The Board has six planned business meetings each year, together with additional sessions, to allow time for member development and reflection on specific issues. Special meetings are convened when required, for example to receive the findings from Serious Case Reviews or discuss key member financial contributions.

To promote optimum focus on priority issues, the board retains its sub-committee structure as in 2016-17 ensuring it continues to be sighted on emerging priorities. The terms of reference and the membership for each subcommittee will however be reviewed over the course of the year and task and finish groups will be established to help progress some subgroup priorities, for example, one completed piece of work is the Harmful Sexual Behaviour Strategy.

The current sub-committee structure, as depicted in Appendix 2, provides for focus on our priorities and promotes activities aligned to the board's statutory functions. The functions of the sub-committee and sub-groups, all meet at least six times a year.

Update from Sub Committees:

Performance, Audit and Quality Assurance Sub-committee

This is the key forum through which the Board examines and verifies the quality of individual agency safeguarding practice. It oversees performance management, scrutinises a developing suite of key performance indicators (KPIs) and secures quality assurance through findings from single and multi-agency audit activity.

Performance management and quality assurance framework

Remit

- Implement an effective strategy to monitor quality & effectiveness though analysis of relevant safeguarding performance information from partner agencies including, where appropriate, service users' views.
- Develop and oversee a planned programme of single and multi-agency audit review and quality assurance in relation to safeguarding activities.
- Secure quality assurance and performance management through receipt of reported audit activity arising from agencies and Sub-Committees.
- Co-ordinate Section 11 self-assessment audits and analysis, monitoring agency action plans by reviewing summary data and determining response in respect of non-compliance
- Oversee the Section 175 and 157 audit process relating to schools and outcomes
- Undertake reviewing activity and performance data analysis, providing regular updates/recommendations to the BSCB to mitigate risk, highlight trends, areas of concern and recommendations for further activity / monitoring designed to improve quality and promote good practice.
- Commission specific audits, thematic reviews or case management reviews at the request of the Safeguarding Children Board.
- Ensure that findings from case audits and other enquiries are communicated effectively to frontline staff and managers
- Ensure that messages from inspection, case reviews, audit and quality assurance are acted upon to address inspectorate recommendations and improve practice, through regular learning events.
- Embed performance issues into other Sub-Committees to evaluate and monitor the work of single agencies and reflect the Sub-Committee's role as an external quality check.
- Highlight and disseminate required improvements and areas of good practice through the Policy, Procedures and Practice Developments and Workforce Management and Development Sub-Committees

A Quality Assurance and Performance Management Framework is in place and has been endorsed by the Board. This confirms the need for continuous service improvement and delivery to be driven through quality standards, monitoring of improvement targets and focus on a suite of selected KPIs.

The Board and sub-committee have held development sessions to determine the data to be received by the Board and sub-committee. Respective scorecards of multi-agency KPIs have been identified for regular reporting. The sub-committee will escalate any issues of concern to the Board. The Board has developed a more effective performance management culture through increasing focus on performance and

quality assurance. More valid data with contextual information will enable constructive challenge and provide proper reassurance about safeguarding from partner agencies.

The Board's own set of KPIs, framed around the child's journey from early intervention through to Tier 4 and looked after status includes:

Early Intervention

1. Number of Early Help assessments

Contacts, Referrals and Assessments

2. Number of contacts received
3. % of contacts to referral
4. Numbers of referrals
5. % of referrals to assessment under S17 and S47
6. % of Section 47 Investigations converting to initial child protection conference
7. % of assessments completed within 20 days
8. % of assessments completed within 45 days and those out of timescale

Child Protection

9. % of children becoming the subject of a CP Plan for the second or subsequent time within 2 years
10. % of open CP Plans lasting 2 years or more

Children in Care

11. Looked after children missing from care incidents (episodes)
12. Police Data. In May 2015 new police measures and safeguarding performance data was provided by South Yorkshire Police (SYP) across a range of categories
13. During 2016/17 the numbers of unallocated assessments to Children's Social Care have been reported.

Assurance from audit activity

The sub-committee promotes practice improvement through review of audit outcomes, drawn from an evolving programme of planned single and multi-agency agency audits. For 2016 – 17 the sub-committee considered the following findings from partner and multi-agency audits:

- PAQA Scorecard of Indicators (at every meeting)
- Monthly Social Care Scorecard (at every meeting)
- Education Data Performance Reports (children missing, excluded, elected home educated)
- Youth Offending Data Performance Report
- SY Police Performance Information

The following audits were considered and completed:

- Multi Agency audit of agency reports to Child Protection Case Conference for children who had who had been on CP Plans for 18 months+
- Following the above audit PAQA led a review of Child Protection Case Conference Reports & Templates to improve the quality of reports to Child Protection Case Conferences Audit
- Children's Social Care Cultural Diversity Audit
- Multi Agency audit of Children with Substance Misuse difficulties
- Multi Agency dip sampling of children where a S. 47 has been completed with an outcome NOT progressed to an Initial CP Case Conference
- Multi Agency Self-Assessment & Audit of Children Living with Domestic Abuse

Overview of vulnerable groups:

In fulfilling its objective to review the welfare of vulnerable groups of children, the sub-committee questioned information on the following during the year:

- Children not in Education: This relates to children of compulsory school age, not on school roll or educated otherwise, who have been out of any educational provision for at least four weeks. The sub-committee sought information on local numbers and how the children were monitored to ensure they receive suitable education and are safeguarded. Although potential complications relate to school transfer and relocation to another area, the EWS request a safe and well visit to ensure a child's welfare as soon as relocation is known. The sub-group have also looked at performance information and safeguarding arrangements for children who are excluded from school and children who are home educated

- Looked After Children (LAC): The sub-committee continue to closely review performance indicator data relating to looked after children.
- Child Sexual Exploitation (CSE): Quarterly multi agency audits are undertaken by the CSE

Strategic Group and reported in to PAQA. Audits are showing an improvement in joined up responses to young people.

Priorities for 2017 – 2018

- Improve a systematic reporting of single and multi-agency practice in terms of identifying key themes for learning and improvement, informing priority areas and promoting multi-agency contribution
- Continue to develop an analysis of Police data to better understand and inform priority areas for multi-agency contribution
- Continue to undertake quarterly multi agency audits:

  - Children where a S. 47 has been completed but have NOT progressed to an Initial CP Case Conference
  - Neglected Children – CiN and CP
  - Missing LAC and the Return to Care Interviews
  - Multi Agency Audit of Child Sexual Abuse Cases including harmful sexual behaviour

Policy, Procedures and Practice Development Sub-committee

This Sub Group ensures that policy and procedures are current, implemented, embedded and reflective of best practice.

The PPPD sub group oversees a range of areas of safeguarding practice and has continued to benefit from the work across the People directorate with adults to:

- Develop and consult on new multi-agency protocols, policies and procedures on specific safeguarding issues or in response to Serious Case Review findings.
- Ensure relevant communications to frontline staff.
- Identify any gaps in safeguarding practice that need to be addressed through development of new safeguarding policies/procedures across both the children and adult boards.
- Respond to national and local policy changes and advise the Board of the implications of relevant publications and safeguarding developments.
- Maintain oversights of interagency arrangements to protect young people who are vulnerable/exposed to risk of harm through multiple vulnerabilities and complex abuse (MVCA). Receive reports from the Missing and MVCA Forum. Report on specific areas of unmet need to advise the Board of potential and necessary resources/services to meet these needs.
- Strengthen engagement of young people with the Board through maintenance of links with relevant forums, such as the Care 4 Us Council, to secure the voice of the young person.
- Continue to promote better awareness of the impact of adult mental health, learning difficulties, substance misuse and domestic abuse (Toxic trio).
- Ensure that work relating to anti bullying policies and strategies reflects a zero tolerance approach and ensures that any hate or harassment related behaviour is appropriately recorded and responded to.

Development of new policies and procedures

The Board's web enabled policies and procedures were revised and updated in September 2016 and March 2017. In response to identified needs or recommendations from SCRs/learning events, the Board approved the following new policies and procedures, developed with multi-agency consultation:

- Missing from Home or Care and Runaways - Multi-agency protocol - April 2017
- Revised arrangements and TOR for the weekly overview of cases involving children missing from home, education and care
- Developed missing and MVCA oversight arrangements through the development of CSE Forum to include children at risk of MVCA or missing
- Anti Bullying Policy - Task & Finish Group has been established to strengthen links with schools to report incidents of hate and harassment, to update policy in summer 2017
- Developed a new Sexual Harmful Behaviour policy and procedure underpinned by specialist training and delivery
- Re-written and developed a combined FGM /Honour Based Abuse/ Forced Marriage – to ensure consistency across both children and adult boards

Serious Case Review Sub-committee

The Serious Case Review (SCR) sub- committee has members from a range of partner organisations including Children Social Care, Health, the Police and the voluntary sector. It is chaired by the Independent Chair of the BSCB.

Serious Case Reviews are commissioned in circumstances which are detailed in the Department for Education guidance document 'Working Together'

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/592101/Working_Together_to_Safeguard_Children_20170213.pdf

It defines a Serious Case as one where:

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

The sub-committee monitors and drives the progress of actions that have arisen from SCRs and Learning Events. An Independent Author is commissioned for all SCRs and Learning Events to ensure that Barnsley benefits from the reports being prepared by someone who has had no involvement in the case and is not employed by any of the agencies that work to safeguard children in Barnsley.
The information and findings from SCRs and Learning Events are used to ensure that we continue to improve practice in Barnsley to Safeguard Children and Young People.

It has also examined SCR reports from other areas with a view to identifying and implementing any transferable lessons for Barnsley. We have also been able to use information collated, by the NSPCC, from Serious Case Reviews elsewhere in the country to provide check sheets for some of the agencies represented on the board so that they can ensure they are addressing the issues identified.
During 2016/17 no new Serious Case Reviews were commissioned and none were published. At the time of writing this report there is one Serious Case Review that is awaiting publication but cannot be published until a Coroner's Inquest has been held.
During 2016/17 one action plan, arising from a Learning the Lessons review, was monitored to completion and sign off by the full BSCB. The primary learning point from this review was around the discharge procedure from the Paediatric Unit of Barnsley Hospital. The relevant procedures were changed and compliance with the revised procedure has been monitored through case audits.

Serious Case Review Panel

The Serious Case Review Panel is convened to bring together agencies where there is a case to be considered to establish whether or not it meets the criteria for a Serious Case Review to be commissioned.
During 2016/17, the SCR Panel did not meet to consider any new cases as there were no cases that had the potential to meet the criteria for a Serious Case Review. The panel did meet to assist in the enquiry into the ongoing Serious Case Review which will be concluded later this year (2017).

Child Death Overview Panel

Following the death of Victoria Climbé in 2000, national guidance was produced in the form of Working Together to Safeguard Children. This Guidance states that that all agencies who have a responsibility towards children should work together to look at ways to keep children safe. This led to the formation of Child Death Overview Panels (CDOPs) who are accountable to the Local Safeguarding Children Boards.

The child death review process is not about apportioning blame but aims to learn lessons in order to improve the health, safety and wellbeing of children and to seek to reduce the number of deaths.

Compared to national data, Barnsley has relatively few child deaths. However, the circumstances surrounding the death of each child are considered on an individual basis in order that any modifiable factors identified may form the basis of recommendations to the Barnsley Safeguarding Children Board (BSCB). Consideration is given to how local services can work together to mitigate future harm to children and young people. The findings from all child deaths inform local strategic planning, including the local Joint Strategic Needs Assessment, on how to best safeguard and promote the welfare of children and young people in Barnsley.

The Graphs referred to in the following report are to be found at **Appendix 3**

Number of child deaths notified

From 1 April 2016 to 31 March 2017 there were 10 deaths notified to Barnsley CDOP.

Figure 1
Shows the number of Barnsley child deaths by year, 2008-09 to 2016-17
Figure 2
Shows the number of these that were expected and unexpected
Figure 3
Illustrates the number of deaths by month
Figure 4
Shows the breakdown of child deaths reviewed by CDOP by age over the period 2008-09 to 2016-17
Figure 5
Shows the percentage of child deaths reviewed by cause category over the period 2008-09 to 2016-17 (this does not include the cases that have not yet been reviewed)

Cases Reviewed

The panel met 4 times (quarterly) and 14 reviews were completed during the April 2016 - March 2017 reporting period. Due to the small numbers of deaths that occur each year in Barnsley, identifying trends and patterns is difficult. However, we are currently working with the South Yorkshire region to enable us to identify trends and patterns regionally and co-ordinate actions. Additionally analysis has been undertaken of the child death information held on the CDOP database over the period 2008/09 to 2016/17 to provide a picture of what is happening over a longer time period.

The findings show that the pattern of child deaths seen locally reflect those identified in national findings with approximately a third of deaths being associated with premature birth.

Progress against recommendations

In accordance with the previous year's proposed service developments, the following have been successfully completed:

- Participation with South Yorkshire CDOPs in a peer audit review around decision making for modifiable factors.

In addition to the above:

- A training session relating to the CDOP procedures was delivered specifically to Public Health Officers to ensure business continuity; this provided an understanding of the CDOP procedure and what actions are required in the event of receiving a notification.

Recommendations for 2017-18

The National Wood Review of the role and functions of Local Safeguarding Children's Boards made a number of recommendations for Child Death Overview Panels; as a result the statutory basis of Child Death Overview Panels is changing with responsibility passing from the Department for Education (DfE) to the Department of Health (DH). NHS England and DH are preparing new statutory guidance for child death reviews, when published we will review local arrangements as required.

Further references

Barnsley Joint Strategic Needs Assessment:
https://www.barnsley.gov.uk/services/public-health/joint-strategic-needs-assessment-jsna

Working Together to Safeguard Children, 2015:
https://www.gov.uk/government/publications/working-together-to-safeguard-children--2

Wood report: Review of the role and functions of local safeguarding children boards 2016:

https://www.gov.uk/government/publications/wood-review-of-local-safeguarding-children-boards

Workforce Management and Development Sub Committee

The Workforce Management and Development Sub-Committee's remit is to oversee and manage the planning, design, delivery and evaluation of Barnsley Safeguarding Children Board (BSCB) multi-agency safeguarding children training, within the wider context of workforce development, including training relating to adults at risk. To ensure that all training in safeguarding and promoting the welfare of children and adults at risk, creates an ethos of working collaboratively with others, respects diversity (including culture, race and disability) upholds equality, is child/ adult at risk centred and promotes the participation of children and families in safeguarding processes. To ensure that all partner agencies of the BSCB can evidence compliance with Chapter 3 requirements of Working Together to Safeguard Children 2015. The Sub-committee also oversee local standards for safer recruitment, retention and supervision of those working with children (in conjunction with Adult Services and the Section 11 Audit). Links are maintained with other BSCB Sub - Committees in order to inform safeguarding policies, procedures and practice developments and ensure the voice of the child is demonstrated to inform training and recruitment.

During 2016-2017 there has been continued high demand for multi-agency training, an extensive programme of training, lunchtime seminars and events were attended by a total of 2319 practitioners from across partner agencies. Attendance at training is prioritised by agencies despite budget cuts and a reduction in staff numbers, this is an excellent example of partnership working and learning together.

There are strong links with the adult workforce training and efforts are made to take a whole family approach to safeguarding training.

The training programme has been developed and delivered in response to statutory requirements, local and national Serious Case Reviews, current research, report findings and local audits.

The need to provide early help, remain alert to child sexual exploitation, neglect and the recognition of how the co-existence of key issues such as domestic abuse, parental mental illness and parental substance misuse can significantly contribute to the abuse and neglect of children has remained a priority for 2016-2017.

In addition to the variety of multi-agency courses and popular lunchtime seminars, further new topics have been added to the programme.

These include:-

- More Than Just Attention Seeking? Responding to Self-Harm in Young People
- Awareness Raising of the Safeguarding Adult Process
- Understanding Multi-Systemic Therapy
- Sudden Unexpected Infant Death – How You and Your Agency Can Help To Reduce This
- Communicating Effectively with Children – Hearing the Voice of the Child
- Neglect Awareness Workshops
- Engaging Families and Young People in Interventions
- Understanding the Toxic Trio and the Impact on Children
- Recognising and Responding to Harmful Sexual Behaviour and the Brook Traffic Light Tool
- Recovery Awareness Workshop

* An extensive programme of E-learning is also available.

Contribution from partner agencies

Many of the courses benefit from partner agency colleagues co-delivering training with the Multi-Agency Trainer or sole delivery, this and the use of free venues, helps to gain maximum benefit from the training budget. Partners that help deliver training are: Barnsley Hospital NHS Foundation trust, Barnsley College, Child and Adolescent Mental Health Service (CAMHS), Independent Domestic Abuse Service (IDAS), Lifeline, Targeted Youth Support and South Yorkshire Police.

Key achievements

The sub committee agreed to undertake a piece of work on behalf of the Children and Young People's Trust Executive Group with the aim to improve the children's workforce skills to deliver quality services to children and young people:

- Induction programmes for all agencies were reviewed and refined to ensure that the purpose, vision and strategic priorities of Barnsley Children and Young People's Trust are clearly defined and that common core skills, attitudes and behaviours for the children's workforce are clearly outlined.
- A vision and strategic priorities leaflet was developed to be used by all agencies as part of staff induction.
- Children and young people have a voice and input into the recruitment to key posts within the children's workforce.

The Safeguarding Children Board training Policy and Course Attendance confirmation letter were both reviewed and updated to ensure that agencies are charged for staff that book a course then do not attend and for staff leaving the course after a few hours (unless an emergency arises). Also the policy outlines the charging system for agencies that do not contribute to the safeguarding Children Board budget. Hopefully this will generate income that can be used to fund future courses.

Early years settings safeguarding audits (similar to a section 11 audit) commenced reporting into the BSCB although this is not a requirement it is viewed as good practice by Board members.

An audit was undertaken to evidence the impact of safeguarding children training.

A full day conference on the Toxic Trio and Neglect was held 13 October 2016, which was oversubscribed. The conference is being repeated in July 2017.

Evaluation of multi-agency training

All training is evaluated by participants following each course and courses amended accordingly as required.

It is important that BSCB can demonstrate that the Safeguarding Children training it provides is improving the outcomes for children. A variety of methods are employed across agencies to evidence this via Professional Development Review's, Supervision and audits, this evidence is tested using the Section 11 audit challenge meeting.

Future Plans

To repeat the audit to demonstrate that training impacts on the practitioners safeguarding practice and improves outcomes for children.

Develop storyboards detailing anonymised cases to evidence good outcomes for children as a result of staff attending Safeguarding Children training.

The second presentation of the Toxic Trio Conference will take place on the 7th July 2017 at The Core in Barnsley.

Children with Disabilities and Complex Health Needs Sub- Committee

The remit of this sub committee is to provide multi-agency oversight and assurance in relation to the arrangements for safeguarding children and young people with disabilities and complex needs in the borough. To drive the continuous improvement of safeguarding services for this group of children and provide effective multi-agency representation and collaboration for this purpose.

Work undertaken:

- Terms of Reference Reviewed and Agenda Setting
- Multi Agency Themed Audits have been established
- Definition of 'Disabled' for the purposes of this sub group agreed
- Reviewed the Safeguarding Disabled Children in England Report to strengthen safeguarding arrangements for this group.
- The Sub group regularly reviews the data from the Disabled Children's Team against the whole data for Children's Social Care and this has supported action to increase the number of section 47's and CP plans for this vulnerable group of children and young people.

Partner agency contributions to safeguarding

The Board values the contributions of all partner agencies in promoting and monitoring the effectiveness of safeguarding in the area. An effective Board requires all partner agencies to participate fully, engage in the Board's business and transfer the safeguarding ideology into their own sphere of activity.

Children and Family Social Care (BMBC)

Children's social care works closely with partner agencies to ensure appropriate measures are in place to safeguard children and young people. We recognise that by working together we are a stronger force for improving outcomes for children young people and families. A key focus of our work is ensuring that children and families are appropriately helped and protected at the right time by the right agency thus avoiding drift and delay which can be harmful to children and young people. The importance of working together cannot be overstated and to that aim we are committed to developing, building and maintaining relationships.

Barnsley Hospital NHS Foundation Trust (BHNFT)

BHNFT continues to meet the requirements of an ever challenging safeguarding agenda. The Safeguarding Team supports staff through the provision of training, supervision and by offering advice and support. Practice is underpinned by appropriate policies/guidance and an audit programme is in place to ensure adherence to standards. The Trust has a combined adult and children safeguarding steering group. This has appropriate membership from across the Trust and oversees the work and governance of safeguarding. The Safeguarding Team are active members of the Safeguarding Board, its subgroups and various work streams.

NHS Barnsley Clinical Commissioning Group

In addition to safeguarding requirements incorporated into closely monitored contracts with health care providers, the Designated Nurse for Safeguarding Children, the Designated Nurse for Adults and the Named Doctor have developed a Safeguarding Vulnerable People Section 11 Audit to inform the forth coming 'safeguarding stock take' of primary care.

The issue of children failing to attend health appointments has featured in national and local child deaths and remains of concern to the Safeguarding Board. Steps have been taken to address this issue and the Board has received assurance that health providers are monitoring failure to attend medical appointments and poor engagement with services more effectively to assess risk to children.

We have a Commissioning Strategy which includes meeting the needs of children and young people in Barnsley and reflects our vision and values which are fair and equitable access to reduce known inequalities. Furthermore as part of the Executive Commissioning Group for the Children and Young People Trust we are committed to partnership working to achieve the Trust's aims e.g. we are leading on developing the offer for emotional wellbeing

South West Yorkshire Partnership Foundation Trust (SWYPFT)

South West Yorkshire Partnership NHS Foundation Trust (SWYPFT) covers four local authorities and eight Safeguarding Boards, both children and adults, across the region.

The strength within this spread is that the learning experience and confidence around safeguarding can be shared across the service for the benefit of children, young people and their carers.
Services provided for children in Barnsley include, speech and language, physiotherapy, occupational therapy, vaccination and immunisation, audiology, epilepsy, health integration team, children's disability, child and adolescent mental health services and early intervention in psychosis for young people from age 14.

The teams also promote the think family agenda, as was identified by the Care Quality Commission (CQC) 2016/2017 inspection, and offer services across health and wellbeing and mental health. The recent CQC Inspection rated the Trust as 'Good' and identified that comprehensive governance systems remained in place to safeguarding adults and children. Additionally, the CQC found that staff had good knowledge of how to identify safeguarding concerns and the procedures to follow.

Key achievements last year have been:

- The Safeguarding team have been an active member of the Safeguarding Board, its subgroups and various work streams
- Successful and supported transfer of the 0-19 service during the financial year
- The service has met the Section 11 challenge and continues to strive towards demonstrating improved outcomes for children and young people who have contact with SWYPFT services
- A proactive response which seeks to offer an extensive programme of training for all staff groups as identified within the RCPCH Intercollegiate Document (2014). The Trust has continuously achieved above the mandatory 80% requirement for safeguarding children training. Additionally, Child Sexual Exploitation (CSE), Domestic Abuse and Neglect training has been delivered to the Barnsley BDU and staff attendance at the BSCB multi-agency training has been encouraged
- The CQC have rated the organisation as 'Good' and have made particular reference to the robust safeguarding arrangement in place

SWYPFT provides the following messages to its staff in relation to safeguarding:

- Assessment should be thorough and utilise all information available; systematic risk assessment should look at all aspects of the child's journey and adults involved in the delivery of care. The wishes, feelings and the voice of the child need to be heard throughout our assessments and interventions.
- To be aware of the importance of Early Help Assessments and the instrumental role for health as the lead professional where appropriate within this arena
- The rule of optimism should be understood by all staff and objective assessment of the facts should take place taking account if all interrelated dynamics, a holistic picture, always ask is the child safe and healthy
- Compliance with supervision supports staff to develop professional resilience and is instrumental in improving outcomes for children and young people
- Non-attendance at appointments should always be assertively challenged and risk-assessed
- Children should not be invisible
- Be professionally curious, always. Be observant and ask key questions, if unsure seek advice from the line manager, safeguarding children link professional, safeguarding team or supervisor
- Share information – understand the NHS code of confidentiality and when it is important to share information
- Good record keeping is essential to facilitate high quality care
- Families can be vulnerable – Think Family

South Yorkshire Police

Protecting Vulnerable People is a priority within the Police and Crime Plan 2013/2017. The Barnsley located Police Public Protection Units fall under the central control of Specialist Crime Services, reporting to an Assistant Chief Constable who holds responsibility for all areas of Protecting Vulnerable People.

However, the provision of services in terms of safeguarding children is locally delivered, with strong ties to the Barnsley district command who has responsibility for local children's safeguarding.

In recognition of the importance of effective, locally based partnership working, the force is disbanding the Central Referral Unit and introducing Multi-Agency Safeguarding Hubs. The Barnsley M.A.S.H. is based within Barnsley District and incorporates partners from Police, Social Care and Health, working together to safeguard children. This means that all child protection referrals will be received and actioned by a dedicated team of professionals within the M.A.S.H., who are also able to progress joint investigations and ensure services required by children and families are signposted to the relevant partner agency without delay.

Over the last year, Barnsley PPU has gradually increased in size as a result of increased funding provision from the Police and Crime Commissioner. The team now has additional staff across all areas, with increased capacity available for child abuse and child sexual exploitation investigations. In Barnsley there is also a new team dedicated to vulnerable adult investigations, which includes all high-risk domestic abuse cases. It is acknowledged that the impact on children living in families where domestic abuse features can be immense and negatively affect a child's quality of life. This team has strong links to child protection colleagues and partners within the M.A.S.H., which means that the risk to any children is identified and managed at the earliest opportunity.

This strengthened approach to partnership working in Barnsley will enable a more timely and effective response to safeguarding which will provide greater reassurance to victims and families.

Barnsley College

Barnsley College is committed to safeguarding the total college community, including learners, staff and visitors. In 2016 - 17, the College continued to embed safeguarding across all College activity by:

- A robust safeguarding structure led by the Assistant Principal (Access to Learning), operationally led by the Head of ALS, Counselling & Safeguarding. The College continues to provide dedicated frontline support through the work of the Safeguarding Team Leader, Safeguarding Officer, Safeguarding Advisors and Departmental Safeguarding Representatives. These staff provide a range of advice, guidance and safeguarding support to learners, staff and visitors
- Linking up with secondary schools and other key agencies to support the transition of learners into College
- CPD for staff to improve skills and knowledge and excellent partnership working arrangements, so the workforce is able to safeguard the college community. College delivers safeguarding awareness training in-house so that the training can be tailored towards how best to safeguard the College community

The college will continue with its approach to embedding safeguarding throughout College activity in 2017 - 18, with a particular focus on:

- further CPD for staff, in particular in key safeguarding roles, leading to a recognised safeguarding qualification
- reviewing and refreshing the College's safeguarding policy to ensure that it reflects recent legislative and statutory guidance updates
- ensuring that the Prevent agenda is fully embedded into College policies and procedures and that staff are suitably trained to meet their statutory duties.

Berneslai Homes

Berneslai Homes' primary contribution to Safeguarding is via its established Vulnerability Strategy: 'Something Doesn't Look Right'. Through this approach, they provide practical support and interventions to address identified issues to prevent progression to other services for example social care or the police. Their strategy aims to ensure the early intervention of risks during routine visits to thousands of homes within the Borough, at the start of tenancies and at various times throughout them. For example, they are able to provide practical support, make referrals to other appropriate support providers and carry out housing application assessments as part of their response to the early identification and intervention with tenants in need.

Berneslai Homes continues to undertake proactive visits to Council properties specifically to identify any support or vulnerability issues early.

During the last year they carried out over 4, 500 support visits, with nearly 2,500 resulting in supportive interventions. This included a number of cases where there were safeguarding concerns around the safety of children and adults. During the year we have also continued to visit vulnerable individuals affected through Universal Credit although this is still to be fully rolled out across the borough and we continue to support those affected by welfare reform.

Berneslai Homes Family Intervention Service (FIS) provides cross tenure family support and interventions to families across the Borough, often with multiple and complex needs. The FIS continues to make significant progress in achieving positive outcomes for families under the Troubled Families Programme; supporting over 270 families ranging from those requiring early intervention to those requiring intensive support during the last year.

The primary aim of this work is to secure and sustain clear behavioural change, thus reducing the effect of a family on the surrounding community. Positive changes are evidenced through reduced antisocial behaviour and criminality, addressing worklessness and improving progress to work, and improved opportunities for children through better school attendance. Families are allocated dedicated keyworkers, delivering an evidence based approach of early intervention/prevention, non-negotiable support and enforcement in order to provide families with a positive incentive to change.

Progress on key priorities and achievements in 2016-2017

Last year's key priorities relating to the coordination of local safeguarding activity and promotion of children's welfare are set out below, with commentary on the extent to which they were achieved. More detail and examples of specific activities relating to each priority is contained in the sections of this report which outline the work of the subcommittees throughout the year.

Continue to promote activities to mitigate the risks to children arising from neglect, domestic abuse, adult mental health, substance misuse and digital technology

These areas of safeguarding are progressed by the PPPD Sub-Committee by monitoring emerging trends and ensuring partners are supported with updated policies and procedures to help keep sight of the changing child protection landscape. It is important to maintain oversight of all these vital areas, together with other emerging themes such as bullying, and promoting activities to mitigate the risks.

Maintaining a strong commitment to continuous improvement and challenge through oversight and taking forward relevant actions from the Continuous Service Improvement Plan

The board has maintained oversight of activity under the Improvement Programme through regular updates, Section 11 interviews, individual reports on particular areas of concern, and evidence from specific audit activity. The board has sought to encourage more open challenge during debates in order to secure service improvement and embraces its role in monitoring the Continuous Service Improvement Plan under the direction of the Executive Director for People.

Oversight of Children who are Missing from Home, Care and Education

A weekly Multiagency meeting has been developed since the new CSE arrangements came into place to ensure there is scrutiny of all the episodes and circumstances where a child is reported as being missing to the police.

This is chaired by the Service Manager, Safeguarding and attended by the Police, Missing from Home Co-ordinator, Targeted Youth/Early Help and Youth Offending Team representative, Education Welfare Service, CSE Social Worker and LAC health colleague.

The purpose of the meeting is to ensure the effectiveness and robustness of response to any child who is reported as missing, to prevent any further missing episode and ensure that the South Yorkshire Missing Protocol and Safeguarding Procedures are being followed and to alert and escalate cases inappropriate.
The group track each case and will identify any emerging themes and feedback to the CSE Strategic Group, Corporate Parenting Panel and Children at high risk of Multiple Violence and Complex Abuse (MVCA) Panel

The MVCA Panel meeting is chaired by the Head of Service to identify and track the most challenging Child Protection/LAC cases. This allows for the development of a central list and tracking process that can ensure a focus and effort into ensuring that high risk and complex cases are identified and considered to strengthen safeguarding arrangements for those children who are often placed from out of the area.

This group reports into the CSE Strategic Group, Corporate Parenting Panel and Senior Safeguarding leadership group.

Accelerate joint working arrangements with

the Barnsley Safeguarding Adults Board where this could be mutually beneficial

The Safeguarding Adults Board is represented on the BSCB and its sub-committees to facilitate joined up working around those issues that both affect adults, but also impact on children. The focus on joint practice needs to be maintained in order to ensure a whole family approach to policy, practice and assessment around issues to do with, for example, HBV, FM, Domestic Abuse and Harmful Sexual Behaviour.

Continue to develop and refine our Performance Management Framework

The board is able to secure systematic reporting of valid and useful KPIs, with sufficient contextual analysis to understand and identify improved performance across all partner organisations.

Address the increasingly high profile risk relating to Child Sexual Exploitation, (CSE) in conjunction with relevant partners

The current problem profile for CSE supports the position that there is little evidence of organised CSE criminality in Barnsley; this is not to say that we do not remain alert to the possibility and monitor trends and events. Trends continue to be monitored and managed through partnership working.
A further profile is currently being produced to inform future delivery and response to CSE and child abuse.

A full children's integrated front door and MASH has been introduced which houses the multi-agency CSE team ensuring effective information sharing, multiagency investigations, safeguarding and support.

Work continues with the private sector to raise awareness of CSE.

The multiple vulnerability and complex abuse group continues to monitor those cases where the risk is highest whether it be due to CSE or wider vulnerability. This group ensures appropriate intervention across the agencies and reports to the CSE sub group.
Regular Deep Dive Audits are undertaken in relation to CSE investigations.

Ongoing training specific to CSE continues to be delivered.

Funding continues to provide therapeutic support to those who have been subject to CSE.

Work has been undertaken to introduce an assessment tool to consider those posing a risk in relation to CSE and to ensure appropriate interventions and activity to prevent harm and prosecute offenders.

Going Forward:

- Continue to work as a partnership to support victims reporting CSE and to pursue and prosecute offenders.
- Undertake a review of the problem profile to ensure that the CSE picture is up to date to ensure appropriate response and allow for planned preventative work.
- Continue to work with the private sector to raise awareness of CSE.
- Improve links with minority ethnic communities to raise awareness of CSE.

Integrated working with partners

Integrated and partnership working is a particular local strength and all the individual partner agency contributions to safeguarding are valued. The Board maintains links with partners and contributes to local initiatives on a variety of safeguarding themes, through representation on a range of multi-agency working groups.

Early Help and Early Years

The emphasis of the work undertaken by the board and partners continues to move towards effective early intervention and prevention. Early Help services in Barnsley form part of the continuum of help and support to respond to the different levels of need of children and families aged 0-25. The way practitioners work together, share information, put the child and family at the centre, move swiftly to provide effective support to help them solve their problems and find solutions at an early stage is at the heart of a strong Early Help approach.

It is recognised that Early Help is everyone's responsibility across the partnership. There is commitment at all levels to work more closely together to build upon what we do for and offer to children and families. The focus of the work over the last period has been to strengthen understanding of the approach across the partnership ensuring that the shift to Early Help is embedded and is sustainable. Barnsley's whole family approach to working with families continues with the further embedding of the implementation of the Early Help approach.

Early help services are co-ordinated and delivered through the Early Start & Families Service and the focus this year has been on:

- Continuing to roll out workforce development through a programme of tiered Early help training for the Children's Workforce.
- Refreshing key documents including the threshold guidance in relation to early help
- Developing other formats to promote the benefits of early help to families and providers e.g. Early Help video
- Developing and strengthening consultation and referral mechanisms with Social Care and other partners

The early years sector has also been supported and challenged by the service to respond to the requirements of the safeguarding audit. This has been strengthened and built into the funding agreement as a contractual requirement for early years funding. This in turn has resulted in a higher than ever before response rate. Key findings are that the childcare sector understand safer recruitment and have single central records in place; have a Designated Safeguarding Lead Officer who has recently accessed specifically designed early years and childcare sector safeguarding training and are also aware of the multi agency safeguarding training available through the Safeguarding Board; have procedures in place for staff to disclose their association with others who may not be suitable to have access to children, and have procedures in place to monitor employee medication changes .

Focus on priorities

Each year, the board reviews its current Business Plan to identify success in achieving objectives and identify new priorities for next year. The BSCB Chair and the Sub Committee Chairs meet before each meeting of the Safeguarding Board, to review progress and ensure that workload is managed and implemented effectively. These meetings also consider emerging issues of interest or concern in light of the board's priorities.

When testing effectiveness the BSCB draws on both performance data and quality assurance activity that examines in detail the quality and effectiveness of front line practice ensuring a 'line of sight' to practice at the front line. All board members and specialist advisors have a strategic safeguarding role in relation to their own agencies. Accountability to local communities is promoted through the two lay representatives.

The BSCB provides a forum to hold partners to account and test effectiveness of multi-agency working to safeguard children. The BSCB 'holds the ring' on challenging performance providing a forum for partners to challenge across the piece.

Effective partnership working and relationships with strategic partners

The board's functions and responsibilities complement those of the Children and Young People's Trust and provide for leadership and ownership of safeguarding at all levels in the council and partners.

The Children and Young People's Trust, chaired by the Executive Director for People, secures the cooperation of partners to strategically plan and align service commissioning to improve children's outcomes. These arrangements encompass all strategic partners, with a focus on working together to improve the wellbeing, life chances and outcomes of every local child.

The BSCB refers to the Children and Young People's Trust matters that have commissioning implications. The chair of the BSCB escalates matters to the governance structures of partners and / or the Health and Well-Being Board where it is considered that agencies are failing to discharge responsibilities under 'Working Together' (2015).

Our high aspirations for children and young people, relating to their ability to secure optimum health, safety, educational attainment and contribution to their communities, recognises that families need support across the whole spectrum of services, including social care, education, health, police, voluntary organisations, safeguarding and other stakeholders.

Responsibility for establishing a secure continuous service improvement approach for children, young people and families rests with the Children and Young People's Trust and the BSCB.

The shared ambition of the Barnsley Children and Young People's Trust and BSCB is to go beyond Ofsted's judgement of 'requires improvement' and to deliver the best possible outcomes for local children, young people and families. This means collectively working together to deliver services which are judged to be at least good. In order to achieve this ambition services for children, young people and families will use the Continuous Service Improvement Framework.

The framework is made up of a number of dynamic elements. It is understood that it is the people

(officers, elected members, non–executive officer, independent chairs) operating at different levels with different functions in their organisations who will make the children's system work effectively. This requires everyone operating within the system to discharge their responsibilities effectively and to be held to account.

These elements include:

- The Children and Young People's Trust
- The Safeguarding Children Board
- Elected Member led challenge
- A Continuous Service Improvement Officers Group
- A Continuous Service Improvement Plan
- External Review and Challenge
- Culture of Respectful Challenge
- The Voice of the child
- Joint review of the framework.

At the annual joint meeting of the BSCB and the Children and Young People's Trust Executive Group (CYP TEG) held on 18 November 2016 key areas for discussion included: An understanding of the responsibility of both boards; the Continuous Service Improvement Plan; the combined risk register; further consideration of the ways in which both boards could work more effectively together in future to achieve improved outcomes, and enabled shared priorities.

The group identified the following key areas for joint development and focus:

- Keeping the needs of children at the centre of all activities.
- Keeping children safe.
- Early Help
- Improving Education, Achievement and Employability
- Tackling Child Poverty and Improving Family Life
- Membership roles and responsibilities
- Supporting all children, young people and families to make healthy lifestyle choices
- Encouraging positive relationships and strengthening emotional health
- Improving staff skills to deliver quality services

The Children and Young People's Trust Children and Young People's Plan 2016 – 19 continues to recognise the nature and value of its relationship with the BSCB through its three main safeguarding priorities:

- Improving the safety of children by developing the engagement and focus of all partners via the BSCB.
- Increasing confidence and understanding of referral processes and thresholds
- Developing data use, information and quality assurance.

During the year, these priorities were progressed as the BSCB continued to hold individual agencies to account in discharging their responsibilities to keep children safe.

The Children and Young People's Trust and partners identify the following as continuing priorities:

- maintain oversight of and take forward actions from the Continuous Service Improvement Plan relevant to the BSCB
- To continue to improve performance management and quality assurance systems to ensure robust and continuous service improvement, supported by workforce development programmes to secure safe practice.
- Ensure that the board maintains a comprehensive overview of the work of partner agencies involved with safeguarding, including the voluntary sector.
- Ensure the implementation of actions within the Child Sexual Exploitation Strategy.
- Ensure all board members are up-to-date with changes in policies, guidance and practice to provide strategic direction and scrutiny of core safeguarding and child protection processes and data, and provide effective challenge.

These were addressed as major priorities in the BSCB Business Plan 2016 - 17 and will continue to be in the BSCB Business Plan 2017 - 18.

Safeguarding vulnerable children and young people

Children in Care

The Barnsley Safeguarding Children Board's oversight of children and young people in care is maintained through membership of the Care4Us Council and receipt of individual reports, including the Children in Care KPI Scorecard. The Care4UsCouncil, which comprises of young people in care, board members and relevant council officers, meets regularly to address issues which are important to this group. During 2016-17, the council, led and chaired by young people:

- A new Full time dedicated Participation Worker was employed on 1st April 2016 to drive the CICC

forward and work with Care Leavers. This post enables, develops and delivers a participation service. It furthers the work of the children in care council to ensure it continues to impact on service design and delivery within the Local Authority, especially Corporate Parenting. It enables time to work directly with children, young people and care leavers to empower them to share their views and build resilience and to improve outcomes for these children more effectively.

- Children in Care took part in take over Challenge and were awarded 'silver' commendation from the Children's Commissioners Office. This was a great success and is a yearly event.
- The Pledge has been revised through consultation and now used within the Review process by the IRO's. The Participation worker has sent a copy to all LAC placed out of the Local Authority and also taken some out personally to meet the Young People. The Participation Worker will also take a copy of the Pledge out to Children who become Looked After when aged 10 or above when appropriate.
- Apprentices at Council have been very successful securing 2 young people's places to continue for a further period of time.
- CICC are attended the Yorkshire & Humber Children's Social Work Matters Conference. The conference celebrates and promotes good social work practice. Some of the Young People participated in some one minute film clip interviews to talk about their positive care experiences.
- LAC attended a Summer School at Sheffield University as part as the Go Further, Go Higher campaign looking at LAW to raise aspirations to further their education and give them a different experience other than school.
- Care Leavers have produced a White Goods Catalogue to help with independence and provides information of were to go for the best priced essential items when moving into their own property and contact details of services they may need.

Health of Children in Care

Work is continuing to build on the substantial improvements already achieved in terms of performance and health outcomes for children in care. Data collection and audits of LAC health assessments show that 96.6% of review health assessments are completed within timescale and 100% of LAC have access to dental care. This is better than our statistical neighbours and the national average. 99.2% have up to date vaccination status which is excellent but at present there is no data available for comparison. The Timeliness of Initial health assessments has improved month on month since the appointment of a new Designated Doctor for Looked after Children.

The delays are usually as a result of a delay in notification from an outside placing authority when a child is placed in by a Local Authority outside Barnsley. To improve notification quarterly meetings are held with Private providers and this has improved notification of Children in Care placed in Barnsley by outside authorities. The Clinical Commissioning Group (CCG) has also written to every CCG in the country requesting that they encourage notification of children placed in Barnsley.

Children and young people in care in Barnsley receive consensual and holistic health assessments. Assessments are carried out at times and in venues that minimise disruption to the child and their education. All our children in care have excellent access to and use primary care to promote their health and development. Older children and young people are given the opportunity to be seen alone, this has recently been identified as key to empowering LAC to speak freely and honestly about their health and care.

There is a monthly meeting between the Designated Doctor and Service Managers for Children in Care to ensure actions related to the health of Children in Care are implemented. This includes the need to improve waiting times for the Children and Adolescent Mental Health Service (CAMHS) for Children in Care and that the improvement in timescales for health assessments and dental checks are maintained.

The Health and Wellbeing of Children in Care and Care Leavers Steering Group, reporting to the CCG Quality and Patient Safety meeting, meets every six weeks to identify service improvements to address the health needs of this group and to ensure ongoing improvement. In addition to this CQC made some recommendations that would improve practice and lessons were learned from a serious case review.

Together all these are or have:

- Ensured that the completion and use of Strengths and Difficulties Questionnaires (SDQ) continue to be embedded into practice and inform a wider assessment of emotional health and wellbeing.
- Prompted the Designated and Named Nurse for LAC to provide revised training to health professionals undertaking health assessments to further increase awareness of the health needs of LAC and quality of health assessments.

- Developed a process for gaining consent from young people age 16 years and over to release GP summary records.
- Incorporated processes for ensuring GPs and CAMHS contribute to health assessments.
- Initiated the Named Nurse to undertake live audit of Review Health Assessments of children placed both in and out of Barnsley. This allows for timely challenge of assessments that don't meet the required standard, and feedback to health professionals to support continuous improvement.
- Instigated a process of follow up and monitoring of Barnsley LAC who are placed out of area to ensure their health needs are met by the receiving area.
- Ensured that the CCG have reviewed the Service Specification for Children in Care and Care Leavers, to ensure it remains appropriate in light of new statutory guidance. They have also liaised with Public health to ensure LAC provision is considered within the new commissioning arrangements for 0-19 children's community services.

What difference have these made?

- Better use of the SDQ both within individual health assessments and data collection to identify themes and trends.
- Health professionals that undertake LAC health assessments have received training to support competency requirements recommended in the Looked after Children: Knowledge, skills and competences of health care staff

(Intercollegiate Role Framework March 2015)

- Young people's right to consent or dissent is supported and upheld.
- Information from a wider range of health provision is used to inform health assessments.
- There is closer timely monitoring of health assessments by provider agencies, and any problems are escalated including to the CCG when appropriate.
- Children and young people placed out of Barnsley are not disadvantaged in terms of their health needs.

Continuous Improvement

There is a commitment to constantly challenge and improve practice and services to LAC. Areas of focus for the coming year are:

- Ensure that consideration of ethnicity, faith and identity is incorporated and documented in health assessments.
- Strengthen the voice of LAC and use feedback to influence service improvement.
- Work with LAC to improve information for them regarding health assessments.
- Reinforce the use of existing health screening tools to support and enhance health assessments, particularly in terms of emerging issues such as child sexual exploitation, female genital mutilation and radicalisation.
- Continue to develop systems and processes to ensure significant health information is chronicled and follows the child.

Arrangements for Private Fostering Support in Barnsley

The Board oversees local arrangements to safeguard privately fostered children and young people and monitors the extent to which the local authority undertakes its responsibilities. A private fostering arrangement is one made without the involvement of a local authority for the care of a child under the age of 16 (under 18, if disabled) with someone other than a parent or close relative for 28 days or more. Anyone involved in, or knowing about, such an arrangement must notify the local authority at least six weeks before it begins and the fostering service takes active steps to advertise this responsibility through a range of measures:

- information disseminated via specific information sessions and training
- distribution of an updated Statement on Private Fostering to key stakeholders, including schools, school nurses, health visitors, GPs, children's social care teams, housing and voluntary sector professionals, setting out notification requirements, the local authority's duties and the role of local professional agencies
- distribution of a private fostering flyer to the same stakeholders

Specific awareness raising activity, supported by the board, has continued throughout the year, including local advertising. Information leaflets are available for carers, parents, children and young people and professionals. Leaflets, posters and business cards are displayed in major public buildings and information is available on the board and council websites.

Parents, carers, children and young people can receive advice and support, including training opportunities, from the private fostering social worker.

The requirements on a local authority under private fostering span both child and carer focussed services. The service in Barnsley is currently based with the Fostering Service and the balance is more towards ensuring this is a suitable placement for the child. The needs of the child/young person remain very much to the fore while the suitability of the placement is assessed. However, should the child need more support through services for children in need or children in need of protection the Private Fostering Worker will liaise with Assessment and Safeguarding Services.
The Board funds this publicity as private fostering still remains a priority of the Board. Work to ensure assessments are child-focussed as well as addressing the carer's needs is taking place alongside a focus on involving birth parents more within the process.

Above all assessments need to be timely to ensure children do not drift in unsuitable home conditions or emotionally unsupportive environments. Improvements are being made but this is still work in progress and work will continue around all aspects of private fostering in 2017/18.

Children with disabilities, complex needs and/or special educational needs

The Children with Disabilities and Complex Health service has continued to work with a range of partner agencies, children, young people and the Barnsley Parents and Carers Forum to develop and improve services for children and young people with disabilities and complex health needs.

The key areas of work undertaken during 2016/17 have included:

- Continued review and development of services around short breaks and use of direct payments
- The continued development of Education, Health and Care Plans and the Local Offer outlining all local service.
- The development of a Disability Register
- The extension of person centered planning, transition planning the development of the Autism pathway and Strategy.

Education Welfare Service (EWS)

The Education Welfare Service works in partnership with schools to support and advise on attendance and safeguarding issues. School attendance is tracked, including vulnerable groups such as children in care, children subject to a child protection plan or child in need, those at risk of child sexual exploitation, children who have special educational needs (SEND) and children who are involved or at risk of criminal activity.

The EWS also oversees children missing education (CME) and those whose parents elect to provide education at home (EHE). Since 2014 a central record keeping system has been used which schools complete and return on a half termly basis to the LA. This identifies pupils who are not in full time education provision with a focus on the most vulnerable groups. This became an Ofsted requirement following the publication of "Pupils missing out on education" published in November 2013. The service also contributes to a number of the board's sub-committees and related multi-agency safeguarding forums, including child sexual exploitation and missing forum.

As part of the Education Welfare Service on-going attendance strategies, the service continued to raise the importance of school attendance throughout the summer holiday period. A number of initiatives took place they included;

- Attendance sweeps to parents whose children's attendance was less than the schools attendance target,
- Home visits and contact with families who were open cased to the EWS, identified as vulnerable (needing additional support throughout the summer holidays) or whom required a safe and well visit.
- Year 6 to Year 7 transition
- Monitoring and tracking of children missing education
- Elective home education monitoring
- Visits for pupils without an identified school place in September for both primary and secondary schools
- Support with Springwell Special School summer school

Dealing with allegations against professionals

The Ofsted Inspection Report published on 8 August, 2014, identified that:

"There are very good arrangements in place to make sure that children are protected when allegations of abuse are made against professionals."

This indicates that practice has remained consistently good from the previous inspection findings.

Dealing with allegations against professionals, carers and volunteers

During the period April 2016 to March 2017 the LADO was consulted about 222 matters, compared with 171 during the previous year. This represents an increase of 23% and is in contrast to a decrease of 27% reported for the period April 2015 to March 2016. The previous report noted a need to ensure that the role of the LADO continued to be highlighted at times of staff and organisational changes and the activity during 2016-2017 would seem to provide reassurance that this continues.

Of the 222 issues discussed with the LADO 74 were judged to meet the criteria of indication a risk of harm to children or possible criminal offence committed against or related to a child. This figure is consistent with the previous year, when 73 matters were deemed to meet the criteria.

A significant majority (57%) of concerns related to possible physical assault, including occasions were restraints had been used. This compares with 44% of cases in 2015-16. Allegations of sexual abuse, including historical allegations, made up 22% of the total, a slight decrease from 24% in the previous period. Emotional abuse (15%) and neglect (7%) remain relatively low in number.

As in previous years referrals were made from a wide range of statutory and voluntary agencies, with the education sector (schools and colleges) accounting for 39% of the total, which is comparable to the figure for last year and reflects the proportion of contact between this sector and children and young people. Foster care and residential care combined to account for 28% of referrals.

Records provide evidence that referrals are made promptly and therefore can receive a timely and robust initial response, which in turn ensures that children and young people are protected. Almost half (47%) of cases involved police investigation, whether as a single agency or jointly with Social Care, with other cases being investigated either by management or regulatory bodies. 4 cases have led to criminal charges being brought and a further 4 cases have led to dismissals.

73% of cases had been concluded by 31 March 2017, a small improvement on the 69% reported for the previous year. The outcomes as recorded as follows: 13 cases have been substantiated, 21 were regarded as unsubstantiated, 8 unfounded and 5 malicious. 7 matters originally referred in Barnsley were dealt with either by another authority or another organisation by agreement.

Although the LADO role focuses on children and young people, there is some crossover into the safeguarding of vulnerable adults and a number of instances have been brought to light where parents whose care of their children has been found wanting in some way have been employed in a caring capacity for vulnerable adults. Given the range of care providers within the borough and the projected continuing increase in the elderly population, this is likely to remain an issue requiring attention.

In addition, the LADO monitors and tracks notifications of concerns received from Ofsted and in some cases liaise with schools and other settings to prepare responses to them.

In promoting the role and activity of the LADO as part of wider safeguarding activities, monthly training sessions have been delivered to licensed and prospective taxi drivers as well as a bespoke one-off event for BMBC Transport managers. The LADO continues to contribute to training around Child Protection Conferences and Core Groups, training for new and continuing Designated Safeguarding Leads as well as the termly Designated Safeguarding Leads Forum.

Equality, diversity and participation

The board is strongly committed to promoting equality of opportunity and ensuring that all safeguarding activities take account of the diverse needs of all children and young people in the borough.

Equality objectives for children and young people include:

- providing support to schools and settings to meet their public sector equality duty
- helping schools and settings identify, record and deal with bullying and harassment in schools
- narrowing the gap between different sections of the community, including where different levels of achievement are related to disability, gender, ethnicity or economic background
- challenging the barriers faced by looked after young people
- fulfilling the 'Pledge' to children in care.
- meeting the needs of children and young people with special educational needs, learning difficulties, disability and complex health needs
- implementing/reviewing the One Path One Door strategy
- continuing to reduce the number of young people not in education, employment or training and address the needs of specific groups
- undertaking work to improve transition of vulnerable groups, particularly those with learning difficulties

All newly developed strategies, policies and procedures are subject to an equality impact assessment. Active steps taken to facilitate inclusion include the provision of appropriate support for families to enable them to participate fully in child

protection conferences and representation of young people's views at the board's sub-committees. Where necessary, specialist support, for example, interpretation and translation services are engaged to support families.

Key points of development within the Continuous Service Improvement Plan for the BSCB are:

- The needs arising out of ethnicity, faith and identity should be consistently considered and reflected within assessments.
- The introduction of systematic use of cultural competence tool
- Review BSCB training to ensure ethnicity, faith and identity are included in all relevant training.
- Monitor impact and outcomes through multi and single agency case file auditing and S11 audit process

Planned future developments and key priorities for 2017 - 18

Barnsley Safeguarding Board's strong commitment to continuous service improvement and addressing the needs of the most vulnerable children and young people is evidenced through the objectives in our 2017 - 18 Business Plan. Future aims and priorities are identified in the context of significant change, nationally and locally, particularly in the light of continuing budgetary pressures. The continuing effectiveness of the Board's work will continue to be subject to close scrutiny. The synergy obtained from strong partnership working remains an essential element of effective safeguarding. The objectives of the Board and sub-committees/groups for the coming year have been determined with multi-agency input and will be subject to regular review throughout the year to measure their achievement and impact.

Oversight and progress of actions from the Continuous Improvement Framework

The Board will assume responsibility for driving forward and monitoring practice to secure mainstreamed continuous service improvement. It will assimilate learning from the Improvement Framework and use it to inform future safeguarding developments through partner agency participation. The Board will also require regularly updated reports of specific case file thematic audit and general audit activity.

Encourage challenge

The Board will seek to strengthen and evidence its own effectiveness through rigorous challenge, participation and engagement. This will include challenge sessions for each refresh of the Section 11 self assessment, encouraging challenge at Board debates, monitoring use of the escalation policy and promoting participation and engagement of stakeholders wherever possible. The Section 11 challenge will also seek evidence that current austerity measures and budget reductions are not having an adverse effect on the ability of partner agencies to fulfil their responsibilities.

Child Sexual Exploitation

Although the Board has an approved strategic approach in relation to CSE there is a need for continuous focus which will include a strategy refresh and procedure update. The development of the Multi-Agency Safeguarding Hub (MASH) will support the early identification and intervention for children at risk of CSE.

Promote understanding on thresholds and monitor pressures on the front door

Continued work to ensure that the thresholds are understood and correctly applied by partner agency staff and that effective use is made of the escalation process in cases where there are concerns about the decision making.
To encourage agencies to ensure that non urgent referrals and contacts into social care are quality assured and discussed with agency safeguarding leads prior to children's social care.
Developments in relation to Early Help and the Early Help Offer are supported and monitored.

Strengthening work with partners

The Board will seek to improve its overview of the work of partner agencies involved with safeguarding children, including the voluntary and community sector and local faith groups through issues reported and escalated by the sub-committees. It will actively seek to strengthen existing links with the VCS and associated groups and continue to explore the benefits of closer co-operation through multi-agency working, building on establishment of the Joint Investigation Team and the MASH.

Performance management and quality assurance

Development of the Board's Performance Management Framework and routine reporting of key indicators has continued to be refined. The Board is able to scrutinise performance in an informed and systematic way and challenge areas where it appears

that improvements are required. This approach continues to evolve to ensure the Board receives the necessary information to be assured about the safety and quality of frontline services. Responsibility for regular mainstream scrutiny rests with the PAQA Sub-Committee, who will escalate areas of concern to the Board through exception reporting.

Through oversight of a comprehensive audit programme, the PAQA Sub-Committee continues to scrutinise findings from commissioned single and multi-agency audits to ensure actions are embedded through practice changes. The Board has also agreed to receive themed presentations on performance from partners for challenge at Board meetings. The Board are keen to retain a key focus in relation to CAMHS and monitor improvements within this service.

Developing stronger means of engaging with young people and their families to be clear about how they feel safe in the borough

Securing the voice of children and young people to inform strategic and service planning has developed over the year. There are examples of engagement with young people for specific activities and the Board maintains participative links to the views of young people through membership of the Care4Us Council and the Youth Council which is represented on the Policy, Procedures and Practice Developments Sub-Committee. The Board also holds meetings in schools, and enters into dialogue with young people about their priorities and views on safeguarding.

In 2017 – 18 it is planned for a young person to become a Board member.

Learning from serious case and other reviews to inform practice

Continue to assimilate and act on the learning and improvements derived from Serious Case Reviews, the CDOP, and other learning events in order to improve practice and service delivery. The SCR Sub-Committee will continue to inform local practice through examining findings from SCRs held elsewhere to identify lessons with local resonance for dissemination to agency practitioners.

Member attendance at Safeguarding Children Board meetings in 2016 - 17

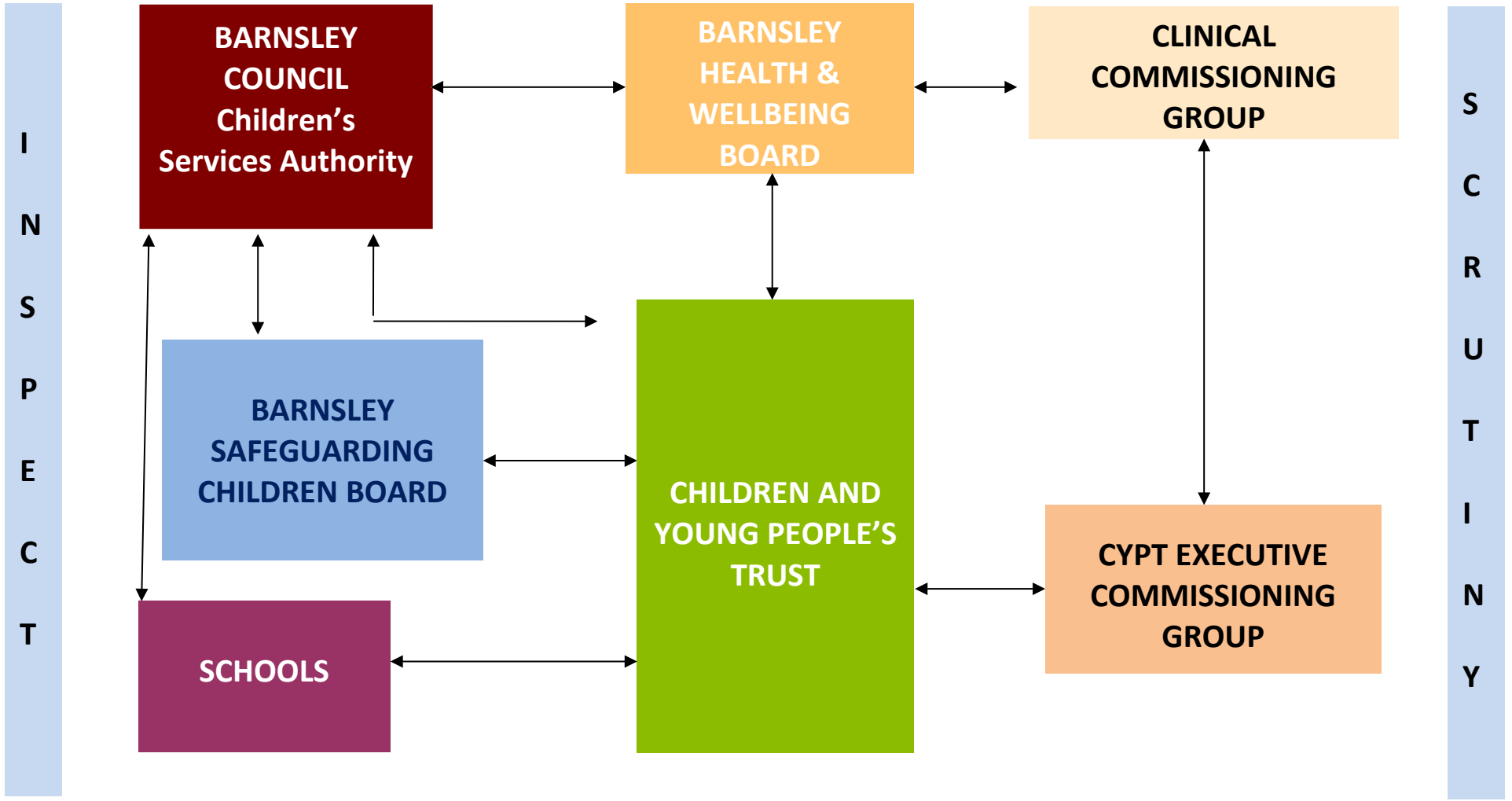
From March 2016 until March 2017 there were six ordinary meetings and a joint meeting with the Children's Trust Executive Group (TEG).

The Board maintains regular oversight of attendance to promote regular and consistent participation. Analysis shows that attendance and participation is generally very good, especially by key stakeholder representatives from the local authority, health services, secondary schools, Barnsley College, the police and the voluntary and community sector.

The BSCB Budget 2016 - 17

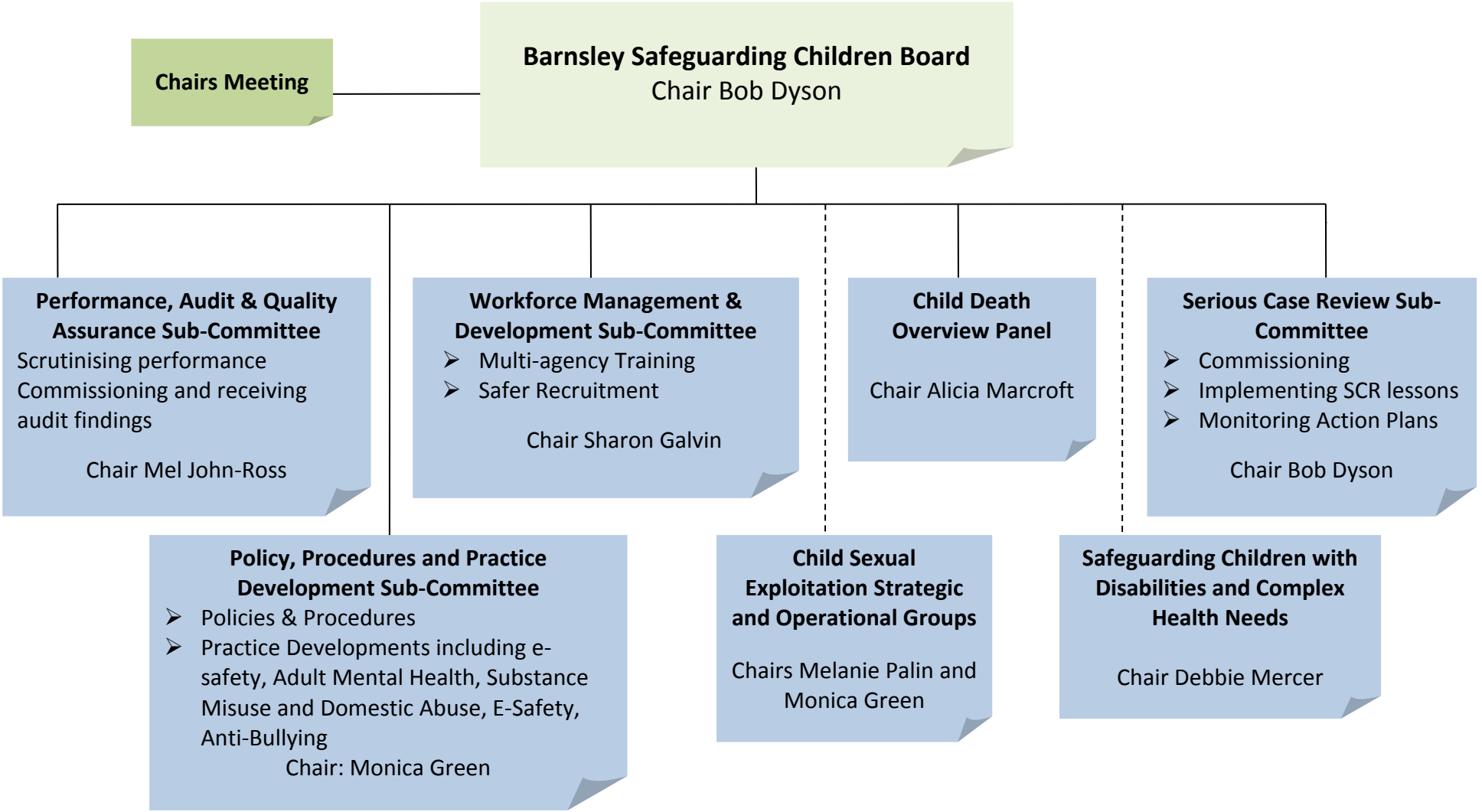
The Board is funded by contributions from partner agencies, in accordance with a locally agreed formula. The budget breakdown and contributions made by member organisations for the 2016 - 17 year are shown at Appendix 5.

WORKING TOGETHER PARTNERSHIP GROUPS



BARNSLEY SAFEGUARDING CHILDREN BOARD GOVERNANCE STRUCTURE

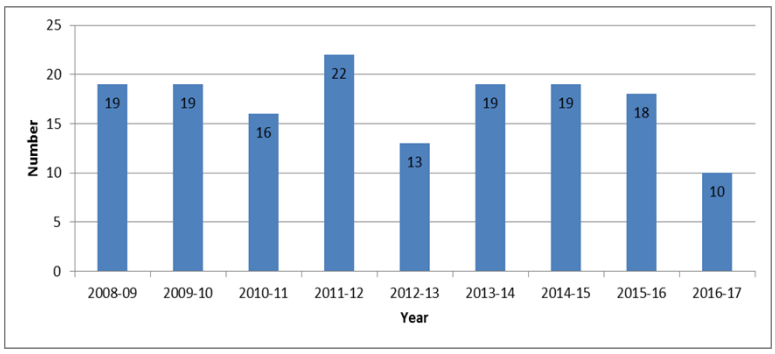
Appendix 2



Graphs Accompanying Child Death Overview Panel Update (Page 8)

Figure 1

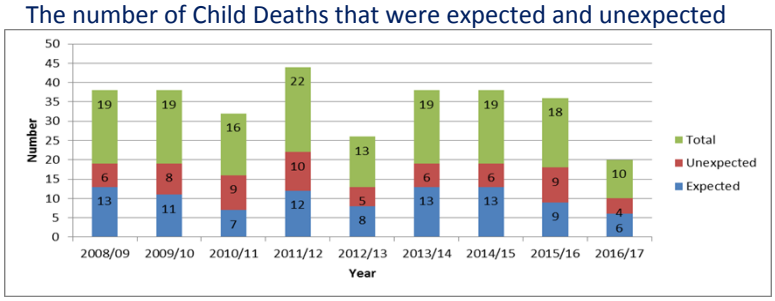
The number of Barnsley child deaths by year, 2008-09 to 2016-17



Source: Barnsley CDOP Database

Figure 2

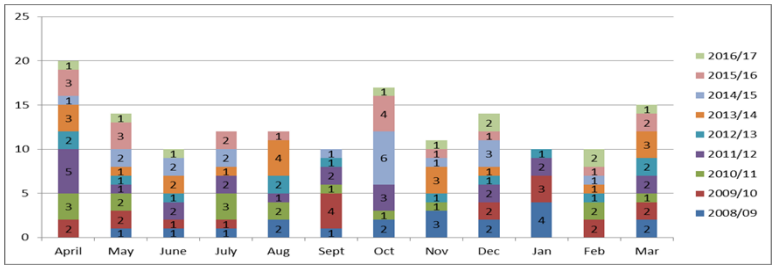
The number of Child Deaths that were expected and unexpected



Source: Barnsley CDOP Database

Figure 3

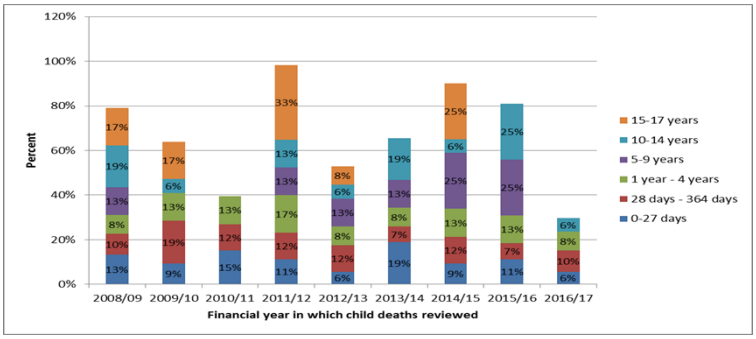
The number of Child Deaths by month
(1 April to 31 March)



Source: Barnsley CDOP Database

Figure 4

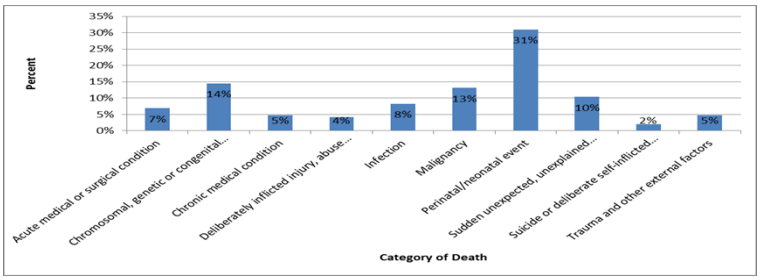
The breakdown of child deaths reviewed by CDOP by age
over the period 2008-09 to 2016-17



Source: Barnsley CDOP Database

Figure 5

The percentage of child deaths reviewed by cause category over the period 2008-09 to 2016-17



Source: Barnsley CDOP Database

Appendix 4

MEMBERSHIP AND ATTENDANCE

The list of members and advisors to the Barnsley Safeguarding Children Board, as at 3 May 2017, is set out below.

Members	Representative Agency
Bob Dyson	Independent Chair
Rachel Dickinson	Executive Director People, BMBC
Susan Barnett	Barnardos/Voluntary and Community Sector representative
Tim Breedon	Director of Nursing, South West Yorkshire Partnership NHS Foundation Trust
Scott Green	Chief Superintendent, South Yorkshire Police
Heather McNair	Chief Nurse Barnsley Hospital NHS Foundation Trust
Brigid Reid	Chief Nurse, NHS Barnsley Clinical Commissioning Group
Alicia Marcroft	Head of Public Health, BMBC
Ben Finley	Service Manager Barnsley Youth Offending Team,
Ann Powell	Director of Probation , Barnsley
Stephen Carroll	Deputy Director, SYCRC
Susan Barnett	Children's Service Manager, Barnardo's
Pat Sokell	Lay Member
Pat Armitage	CAFCASS
Phil Briscoe	Assistant Principal, Barnsley College
Dan Foster	Headteacher representative, Greenacre School
Judith Wild	Sub Regional Senior Nurse NHS England (Yorkshire & The Humber)
Advisors	**Representative Agency**
Cath Erine	Service Manager, Safeguarding Adults, BMBC
Sharon Galvin	Designated Nurse Safeguarding Children, Barnsley CCG
Pete Horner	Head of Public Protection Unit South Yorkshire Police
Mel John-Ross	Assistant Executive Director of Children's Services, Safeguarding, Health and Social Care, BMBC
Dr Saqib Iqbal	Designated Doctor, Barnsley Hospital NHS Foundation Trust
Dave Fullen	Director of Housing Management Berneslai Homes
Kathryn Padgett	Assistant Director of Children's Health Improvements, SWYPFT
Dawn Peet	Safeguarding Officer South Yorkshire Fire & Rescue
Cllr Margaret Bruff	Cabinet Spokesperson
Monica Green	Head of Service for Safeguarding
Nigel Leeder	Safeguarding Children Board Manager

Appendix 5

Barnsley Safeguarding Children Board Final Position 2016/17			
Income **£**		**Expenditure** **£**	
Partner Contributions			
Barnsley MBC	£94,524	Staffing	£117,637
NHS Barnsley CCG	£49,000	Professional Fees including SCR	£40,567
PCC	£24,048	Running Costs	£9,918
Cafcass	£550		
TOTAL	£168,122	TOTAL	£168,122

This page is intentionally left blank