

**KINGSTON AREA CHILD PROTECTION  
COMMITTEE**

**ANNUAL REPORT 2004/2005**

**AND**

**ACTION PLAN 2005/2006**

## ACPC MEMBERS 2004/2005

NAME	ROLE	AGENCY
Cathie Pattison	Chair of ACPC / Head of C&FS	Children & Family Services
Eoin Rush	Child Protection Adviser/MAPPA Rep. PM, Child Protection & Family Support	Children & Family Services
Sara Beresford	Child Protection Service Manager	Children & Family Services
Carla Thomas	ACPC Training Officer	Children & Family Services
Pam Jefferies	PM, Disabled Children's Service	Children & Family Services
Anna Dowd/ Neville Stevenson-Watt	ACPC Legal Adviser	RBK Legal Services
Dr. S Balasingham/ Dr. Junaid Syed	GP Incoming GP	Kingston Primary Care Trust
Jane Willett	ACPC Vice Chair / Clinical Services & Nursing Manager	Kingston PCT
Dr. Jane Scarlett	Consultant in Public Health	Kingston PCT
Caroline Catlow	Designated CP Nurse	Kingston PCT
Sara Patience	Named CP Nurse	Kingston PCT
Dr. W. Anshasi Dr. Linda Soutter	Designated Consultant Paediatrician Named Consultant Paediatrician	Kingston Hospital NHS Trust
Anne Boatman	Liaison Health Visitor	Kingston Hospital NHS Trust
Sue Byford	Named Midwife	Kingston Hospital NHS Trust
Sharon Gregory	Manager, Women & Child Health	Kingston Hospital NHS Trust
Janet Shepherd	Incoming Director of Nursing	Kingston Hospital NHS Trust
Vicky Boswell	ACPC Vice Chair / Borough Commissioner	South West London & St. George's Mental Health Trust (SWLAG-MHT)
Janette Brown	Named CP Nurse	SWLAG-MHT
Dr. Diana Cassell	Consultant Child Psychiatrist	KCAMHS
D.I. Pat Lewis	Detective Inspector	Met. Police CP Unit
Jill Roucroft	Head of Social Inclusion Service	Education
Tom Gibson	Secondary Head Teacher	Education
Margaret Hurrell	S/W London IRSC	Education
Jennifer Wilson	Area Manager	OFSTED
Daphna Pitman	Senior Probation Officer	Probation
Penny Karmel Jill D'Aprano	Chair of Family Panel Incoming Chair	Family Panel
Rod Thomas	Service Manager	CAFCASS
Derek Churchman	Business Relationships Manager	CSCI
Anne Nicholson	Chair of Welcare	Kingston Welcare
Karen Penney	Co-Ordinator	Kingston Homestart
Helen Sheppard	CP Development Officer	Diocese of Southwark
Sue Barnett	Minutes, CP Administrator	Children & Family Services

Representatives from Housing, Adult Services and the Domestic Violence Forum will be invited to join the ACPC membership next year. The creation of a Local Children's Safeguarding Board to replace the ACPC may also identify other agency representatives.

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## 1. Introduction by Cathie Pattison, ACPC Chair

Dear Colleague,

The past year has seen huge changes in the landscape of Children's Services.

November 2004 saw the introduction of the Children Act, which underpinned the "Every Child Matters" programme with its emphasis on positive outcomes for children.

The Act also legislates for integration of children's service across all major partner agencies with an expectation that all authorities will move to Children's Trust arrangements by 2008.

Naturally there is an expectation that "Extended Schools" and "Children's Centres" will be available in every locality and will play a major role in delivering quality services to children and their families.

All of these exciting developments are being taken forward locally and this is having an impact on all services including the Area Child Protection Committee and its work on Safeguarding Children.

Locally in Kingston we have seen the appointment in April 2005 of Patrick Leeson as first Director of Children's Services for the borough. We have also seen the Children Services Development Board grow in membership and strength. We wait eagerly the formation of one Children and Young People's Partnership and the development over the next year of one overarching Children and Young People's Plan.

**All of these changes place an even greater emphasis on the importance of children, of keeping them safe and of working effectively together to ensure no child slips through the net of excellent universal services supported by efficient targeted services.**

During the past year Kingston has worked hard on the same issues that are exercising all ACPC's nationally.

We recognise the importance of effective sharing of information and to this end, are working very hard to establish ASKK (Advancing Services for Kids in Kingston) as the information hub, where all children who are vulnerable and require extra support will be logged.

We recognise the importance of early intervention and working with communities and the voluntary sector. Many children are now receiving regular support as a result of Children's Fund activities, thus freeing professionally trained staff to work with more troubled families.

Like many authorities we have struggled with issues around thresholds applied by social services in their child protection and family support work and we need to continue to keep this under review.

We have also suffered difficulties in recruiting social workers and managers prepared to specialise in child protection work.

However, we have continued with a significant amount of excellent partnership child protection activity as detailed in the report. We will continue the process of analysing the statistics and asking difficult questions where we are out of line with national figures.

Looking back at last year's report, I note that we started this year in the middle of a serious case review, following the death of a child.

That review was successfully completed and has led already to some improved systems to try to ensure that our communication between agencies is as good as it possibly can be.

Looking forward, the next year will be a very important year for us all as the ACPC changes to a Local Children's Safeguarding Board (LCSB).

The guidance has finally emerged and is out for consultation. There are several significant debates to be had. Do we want to see Child Protection Registers disappear? Do we want to see the new Safeguarding Board take on a wider range of responsibilities than those previously assigned to the ACPC? Do we have a clear sense of how the LCSB will relate to the Children's Service Development Board and how it will retain a sense of independence?

Answering these important questions and changing to a LCSB will occupy much of our work plan for next year.

At this time of change it is very important that we continue to work well together and to "keep our eye on the ball" as we move to different ways of working and strengthened partnerships.

It remains for me to say how much I have enjoyed working with you all throughout the last year. I look forward to a very busy, exciting and productive year ahead.

Finally, can I thank Sara Beresford, Carlal Thomas and Sue Barnett for all the work they do supporting the ACPC.

Best wishes

Cathie Pattison  
ACPC Chair

## 2. Attendance at Child Protection Conferences 01/04/04 – 31/03/05

Agency	Initial Conferences 23		Review Conferences 55		Agency	Initial Conferences 23		Review Conferences 55	
	Invited	Attended	Invited	Attended		Invited	Attended	Invited	Attended
Parent/Family member	23	21	55	48	CMHT	3	2	6	6
Young Person	1	1	1	1	Kingston CAMHS	0	0	4	2
Social Worker	23	23	55	55	CDAT	5	0	15	5
Health Visitor	18	18	33	33	ASCA	1	0	7	2
Police Officer	23	22	55	5	Kaleidoscope	3	2	4	3
Legal Adviser	23	6	55	5	Parents' solicitor	0	0	2	2
Ed. Welfare Officer	6	4	28	11	Foster carer	0	0	10	10
Teacher	8	6	29	26	Housing officer	10	7	25	17
School Nurse	6	6	22	21	Mentor	0	0	0	0
GP	22	2	54	4	Psychologist	1	0	1	1
Hospital Nurse	3	3	1	0	Asylum Team	0	0	0	0
Midwife	6	5	2	2	Env. Health	0	0	0	0
Probation	3	1	4	1	Children's Participation Officer	0	0	1	1
People with a Learning Difficulty Team	0	0	1	1					
Young Carers Network	0	0	2	1	Day Nursery	0	0	3	2
Family Placement Team	1	0	8	4	Interpreter	1	1	0	0
Community Paediatrician	23	2	54	4	Mother & Baby Unit	1	1	5	4
MAPPA	1	0	0	0	Refuge Worker	3	3	1	1
DV Outreach Team	0	0	3	0	Looked After Nurse	0	0	3	3
Special Ed. Needs Co- Ordinator	0	0	2	1	Looked After Education worker	0	0	1	1
Pupil Referral Unit	0	0	1	1	Guardian	1	1	9	3
Private Fostering Agency	0	0	3	2	Youth Service/Club	1	0	1	0
Fassett Road	0	0	1	1	Welcare	0	0	2	2

### 3. ACPC Budget Statement 2004/2005

	Original Estimate 2004/05	Revised Estimate 2004/05	Actual Expenditure
<b>Expenditure</b>	£	£	£
Salaries	48,000	48,000	48,745
Training	2,600	2,600	1,686
Hire of Rooms	0	3,000	1,265
Management & Support	8,400	8,400	15,423
Supplies & Services	5,400	2,900	4,544
<b>Total Expenditure</b>	64,400	64,900	71,663
<b>Income</b>			
Contribution Education	9,000	9,000	9,200
Contribution Police	1,100	1,100	1,133
Contribution SWLP	1,200	1,200	1,000
Contribution KPCT	12,400	12,400	12,731
Other contributions	0	500	541
<b>Total Income</b>	23,700	24,200	24,605
<b>Balance carried forward</b>	0	0	0

### 4. Progress on Last Year's Action Plan by Agency

#### Police Child Protection Team (PCPT)

- A suitable candidate has been recruited and trained for the role of Care Officer.
- Written reports are provided to every child protection conference.
- The Radbourne Road interview and examination facility has been fully updated and re-equipped.

#### Local Education Authority (LEA)

- The Education Services have successfully piloted ASKK (Advancing Services for Kingston Kids) and identified the key issues that need to be to be addressed. Throughout the process, the Education Services have developed a procedure to address the issue of gaining parental consent for information sharing. The experience of the pilot scheme has been disseminated to schools.
- Working with the Children & Family Services, the Education Services have completed the training of all designated child protection teachers. There remain 19 designated child protection governors to be trained.
- The Education Welfare Service has mapped the needs in school attendance and child welfare and has a plan for contributing to the "Extended School" cluster scheme.

### **Kingston Primary Care Trust (KPCT)**

- Training in the Trust has continued to expand through staff presentations of case studies. Other agencies are invited and multi agency representation is increasing. Case studies are a familiar and successful training format in the Trust.
- The Trust continues to work with ASKK and the Initial Response Team. The Trust continues to work with ASKK with developments such as the Common Assessment Framework.
- Community Pharmacists are enthusiastic about training and the Trust is currently delivering the third round of training.
- All GPs Criminal Records Bureau checks were completed by 1<sup>st</sup> April 2005

### **South West London & St George's Mental Health NHS Trust**

- The Kingston Community Mental Health Teams [CMHTs] and Children & Family Services continue to work in collaboration. Recently an operational review of the local joint protocol has started titled "Assessment and Care Co-ordination of Parental Mental Health Problems & the Needs of Children"
- The CMHTs have joint managers' meetings as recommended in the London Child Protection Procedures.
- Kingston Child & Adolescent Mental Health Services [KCAMHS] have started a new service with a Child Mental Health Worker placed within the local Looked After & Leaving Care Team. The KCAMHS worker offers a monthly consultation with the LA&LC Team and provides advice and brief interventions.
- The Mental Health Trust continues to provide basic child protection awareness training for all staff and specific training for the Trust child protection lead professionals. However mental health staff have to be encouraged to take up other appropriate ACPC Courses.

### **Children & Family Services (C&FS)**

- The child protection register is now available electronically for Kingston Hospital and Berradene (Children's Home) for the use of the Emergency Duty Social Work Team. Arrangements to allow Thamesdoc electronic access to the child protection register are being explored as part of the Information Sharing and Assessment (ISA) system, which in Kingston is known as ASKK.
- An audit of non ACPC training within the Borough was completed to see what training was being provided by individual agencies. This has ensured a consistency of delivery and information provided. The outcome of work being undertaken by the London Child Protection Co-ordinators to regularise CP training across all agencies is awaited locally.
- A review is underway of the Safe Parenting Handbook with a view to creating an Early Year's version as well as one for Young People.
- An audit of the views of professionals attending child protection conferences has been completed and the findings will be disseminated to the main ACPC early next year.
- Support for grandparents who are caring for their grandchildren due to parental drug and alcohol misuse has been identified.

### **Children & Family Court Advisory & Support Services (CAFCASS)**

- CAFCASS continues to maintain regular management attendance and contribute effectively at ACPC meetings. Arrangements have recently been put in place for regular liaison meetings between CAFCASS and Local Authority Service Managers, including C&FS in the West Sector of London Region CAFCASS.

- CAFCASS has promoted inter-agency training at relevant events and has disseminated training programmes from other London ACPC's to its regional staff. In addition CAFCASS runs the Saturday Contact Centre at Surbiton Children's Centre and this is a positive example of the working partnership between CAFCASS and C&FS to promote the interests of potentially vulnerable children.

### **Kingston Hospital NHS Trust**

- Child Protection corporate presentations are now included in the Hospital's induction day for all new staff, thus raising the profile of child protection within the Hospital.
- A Child Protection Training Strategy has been devised using a three-tier approach to reach all levels of staff.
- A protocol has been developed for emergency treatment of children attending A&E along with intensive care transfer for all staff in the paediatric departments, including A&E nursing and medical staff.

## **5. ACPC Sub-Group Reports**

### **Case Monitoring and Quality Assurance Sub Group**

The group has continued to meet every two months looking at specific practice issues and giving feed back to the relevant professionals as required. The group looks at issues around child protection conferences along with Section 17 family support cases and Section 47 investigations.

The group looked at the documentation in relation to a serious case review into a child death and the findings and recommendations were presented to the main ACPC.

Discussion took place on how to progress the cases of children who have been on the child protection register where progress has been minimal. It was decided that '**Achieved**' or '**Not Achieved**' on the action plan would serve to highlight progress made. This recommendation has been put into effect immediately.

The London Child Protection Procedures (LCPP) recommended that a pre birth conference should be held at the earliest opportunity, this has led to the names of unborn babies being registered long before their birth, having the effect of extended periods of registration. The group felt that it would be more appropriate that the name of the baby should be added to the register immediately after birth.

A review of children on the register and in care proceedings resulted in eleven names being removed. The group only removed children's names who were sufficiently protected by their care plans. These children continue to be monitored by the review conference process and looked after reviews.

An audit of professionals attending child protection conferences has been undertaken, looking at ten consecutive conferences and a report of the audit outcomes will be presented to the main ACPC.

## **Policy and Practice Group Sub-Group Report**

The group continues to meet bi-monthly, reviewing policies and protocols and making recommendations to the main ACPC.

The group recommended for approval the guidance 'Young People and Vulnerable Adults Facing Forced Marriage' to the main ACPC.

Details of the guidance on 'Safeguarding Children in Education' was presented to the group for discussion. There was also detailed consideration of the consultation document on 'Proposals for Dealing with Allegations against Teachers and other Staff.' Several feedback suggestions were proposed.

The protocol for 'Looked After Children who go Missing from Care' is in the process of being revised to include all 'Young Runaways'. This follows Department of Health guidance and the Children's Society response in their 'Safe and Sound' campaign.

The group reviewed the internal audit on 'Child Protection and Reception Systems' currently in place in Children & Families Service (C&FS). Written feedback was also provided to the Association of London Government (ALG) for the revised 'London Child Protection Procedures'.

Throughout the year the group welcomed new members and visitors. The Teenage Pregnancy Co-ordinator came to a meeting and initiated a lively discussion following recent guidance on teenage pregnancy and contraception.

## **Training Sub-Group**

There has been a year on year increase in the take-up of multi-agency training being taken up and 712 workers from many agencies attended training, an increase of 27% on last year and 44% from the year before that.

Eight training sessions had to be cancelled because of poor uptake. The ACPC Training Sub-Group has been considering this and in this year's programme the content of some of these courses have been incorporated into other more 'popular' training.

The training programme 2005-2006 has been designed as much as possible to take into consideration the proposed new training standards from the consultation document 'Education and Training for Inter-Agency Working: New Standards' published by the University of Salford (Department of Health funded project). It includes a number of new training courses based on new DfES training material and reflecting new Government Policies and Guidance.

<b>Evaluation of training 2004-2005</b>				
	<b>Poor</b>	<b>Adequate</b>	<b>Good</b>	<b>Excellent</b>
Meeting Objectives	0.64%	1.92%	26.92%	70.51%
Content	0.32%	1.92%	29.17%	68.59%
Handouts	0.64%	2.56%	33.01%	63.78%
Trainer's Delivery	0.64%	0.96%	18.59%	79.81%
Trainer's Knowledge	0.64%	0.64%	7.69%	91.81%
Overall Evaluation	0.64%	1.60%	25%	72.76%

## 6. Celebrating Excellence

The ACPC is aware of many examples of excellent inter-agency practice that often go unrecognised. This work does much to transform the lives of children at risk of significant harm. Below are two examples of great work going on around the Borough.

- Kingston Hospital Maternity Concerns Meetings**  
This is a monthly multidisciplinary meeting to discuss any concerns generated by midwives at the initial contact booking interview. Professionals attending include midwives, health visitors, nurses, social workers, Sure Start midwife and the teenage pregnancy co-ordinator. At the meeting, information is shared to ensure support can be put in place for vulnerable mothers and their families to protect the unborn baby.
- Children & Family Services Mayor's Award**  
Two experienced practitioners who have worked with children for many years had their achievements recognised recently when they were presented with a Mayor's Award.

## 7. News Section

### **Substance Misuse Service and Information Dealers**

This is a multi-agency team made up of statutory and non-statutory organisations working together to identify, assess and provide treatment to young substance misusers under 19.

### **ASKK (Advancing Services for Kingston Kids)**

ASKK is the corner stone of Kingston's Preventative Strategy, which provides a one-stop shop for all incoming information about children and young people. This service facilitates information sharing and assessment and receives approximately 1000 calls a month. Only those cases requiring a statutory social work service are directed to SSD. All other contacts are signposted, flagged or supported through services co-ordinated by ASKK.

### **Younglavin**

Younglavin is Kingston's help and advice website for young people. Younglavin signposts young people to local services and provides online confidential help and advice via email and SMS messaging by a trained advisor.

Younglavin was developed by young people and it therefore provides them with a service which is accessible, user friendly and most importantly, local. Younglavin is a major vehicle in Kingston's promotion of e-democracy, youth consultation and participation. In April 2005, Younglavin received 6000 visitors, 53 contacts from young people asking for help and advice and it undertook 252 consultations on local services.

## **Domestic Violence**

The Outreach Service works with women who are experiencing domestic abuse, 90% of whom have children under 16 years of age.

The service provides information, safety planning, assistance to access a place of safety, emotional support signposting and casework.

Families are referred from a variety of statutory and voluntary organizations in the borough such as Children and Families Social Workers, Health Visitors, Housing Departments, Probation etc. The outreach worker is based in the Community Safety Unit one day per week to offer support and crisis intervention to women requiring support.

Many women have been in long term abusive relationships and have many concerns regarding the impact this has had on their children, many are terrified of contact arrangements being implemented by the courts.

Some women are keen to access family therapy and are referred on as appropriate. Many women report behavioral difficulties and problematic relationships with their children which they believe are directly linked to them having witnessed or experienced domestic abuse.

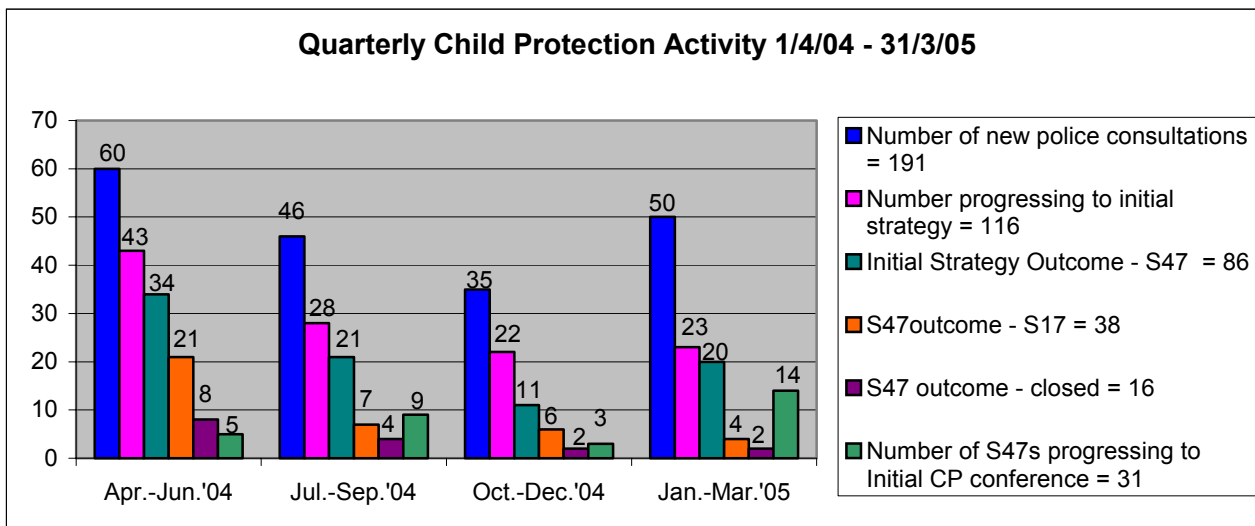
## **Ku19**

Ku19 is an innovative project to promote access by school children and young people, aged 19 years and under, to both School Health and Sexual Health services within the borough of Kingston.

The approach is dynamic and user friendly, enabling access through a variety of media and communication methods including telephone, e-mail and most recently mobile text messaging, thus offering anonymity if desired. However, the option of face to face consultation also remains available through both the school and clinic drop-ins.

Where appropriate referrals can be made to the specialist services we also run, for example the young people's sexual health clinic, or to other outside agencies. Through the provision of all our initiatives Ku19 provides a holistic, inclusive and confidential service that has proved to be very popular with the young people of Kingston.

## 8. Child Protection Activity 2004-2005

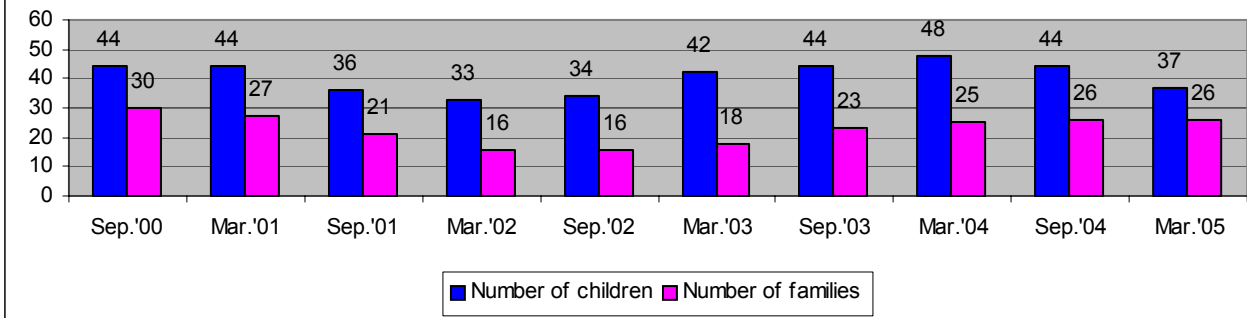


**All these numbers represent children.**

- Last year's Annual Report counted actual Police consultations rather than numbers of children being referred to the Police for a consultation.
- Of the 191 children subject of police consultations, over 60% went on to have an initial strategy discussion.
- At that initial strategy discussion, a decision was made that nearly three quarters of the enquiries would be conducted under Section 47. This represents 28 enquiries in Kingston per 10 000 of the child population. The national figure for the year ending 2004 was 65 Section 47 enquiries per 10 000 child population.
- Over 44% of those 86 children subject of the Section 47 enquiries went on to receive a service from Children & Family Services under Section 17 ('child in need').
- Just under 20% of the 86 children had their cases closed immediately following the Section 47 enquiries as it was assessed that they did not require a C&F Service. This does not mean that they were not referred elsewhere for a supportive service.
- Over one third of the original 86 children about whom there were Section 47 enquiries went on to become the subject of an initial child protection conference. This compares nationally with 53% of those children progressing to an initial child protection conference following the Section 47 enquiry.

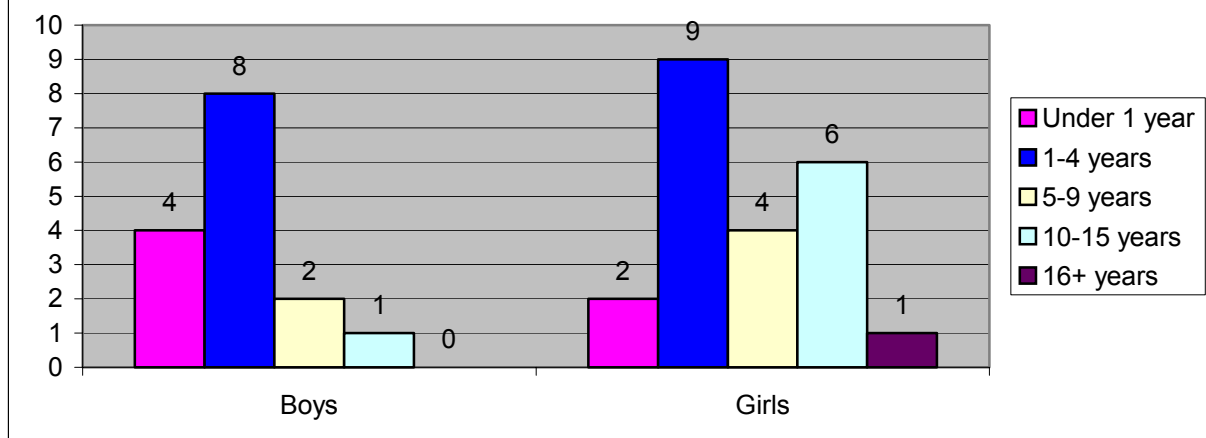
Overall, comparison with national data shows that proportionally fewer Section 47 enquiries are held in Kingston and fewer of these lead to initial child protection conferences. This raises questions about local thresholds. This will be kept under review particularly once Safeguarding Boards are established and take on a preventative remit.

**Numbers of Children/Families on the Child Protection Register September 2000 to March 2005 - month ending:-**



- The 23 initial child protection conferences held during the year considered 31 children, 2 of whom were unborn. Therefore within this year, 29 children were placed on the register although the 2 unborn babies will be included on the register at birth next year. This is 9 fewer children than last year and 2 fewer initial conferences.
- Nationally at the year ending 2004, there were 24 children under 18 per 10 000 child population on the child protection register. This compares locally in Kingston with 14.4 per 10 000 child population.
- The average number of children on the child protection register was slightly down from the previous two years to 39.
- However the average number of families was consistent with last year at 26 as many of the children included on the register were only children or with just 1 sibling.

**Children on the Child Protection Register at 31/3/05 by Age & Gender**

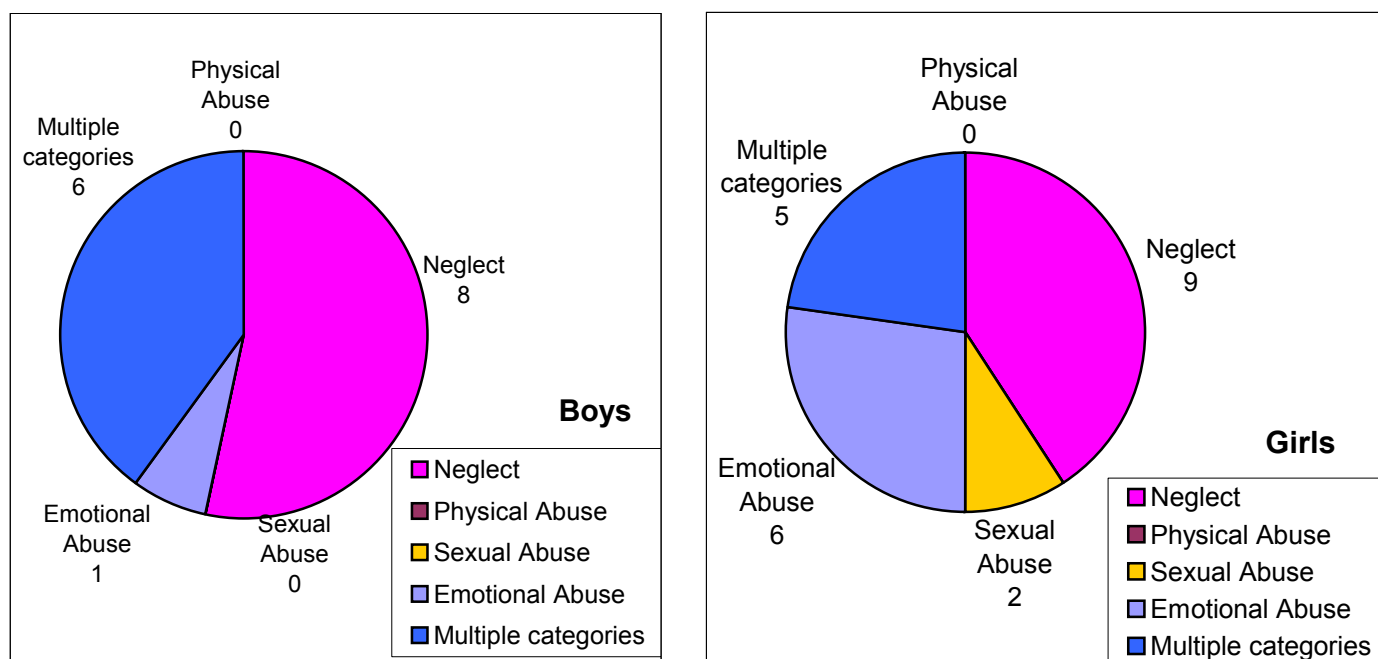


- The gender split between boys and girls on the register at year end was approximately 40% / 60% this year. Kingston is a small borough and figures can easily appear distorted due this small size. The national trend at the end of 2004 was for slightly more boys than girls to be registered with 24 boys per 10 000 child

population compared to 23 girls per 10 000 child population. Demographically there are slightly more boys nationally than girls.

- The younger the child the greater the vulnerability. In Kingston at year end, under 1s accounted for 16% of those on the register compared to a national figure of 11%.
- The under 5 age group in Kingston made up 62% of the children on the register at year end, which is nearly double the proportion from last year. This compares with the national figure of nearly 40% at the end of 2004.
- Over 97% children on the register in Kingston at year end were under 16 and this is in line with national data.

### Children on the Child Protection Register at 31/3/05 by Gender and Registration Category



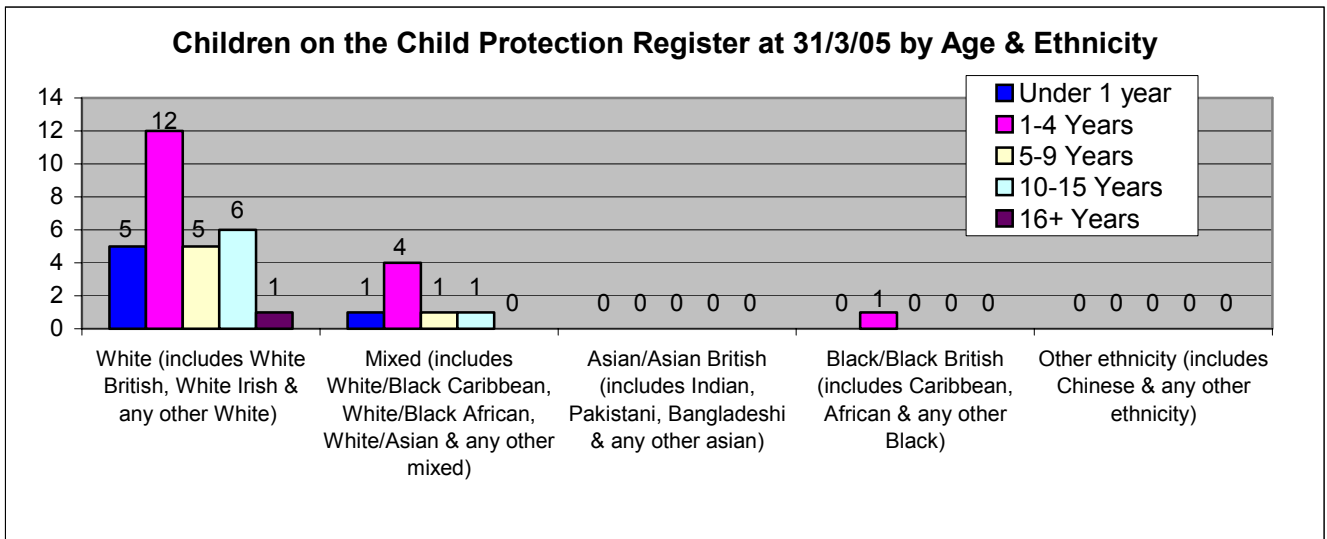
Although there are no children registered purely for 'physical abuse' (compared to a national figure of 19% or 4 per 10 000), there are 6 children registered under 'multiple categories' for 'physical abuse' accounting for over 16% of the total number of children on the register.

Children under the category of 'neglect' were the largest single category making up just over 45% of the children on the register. This is broadly in line with national data. When the 'multiple categories' are taken into consideration, this figure rises to 73%.

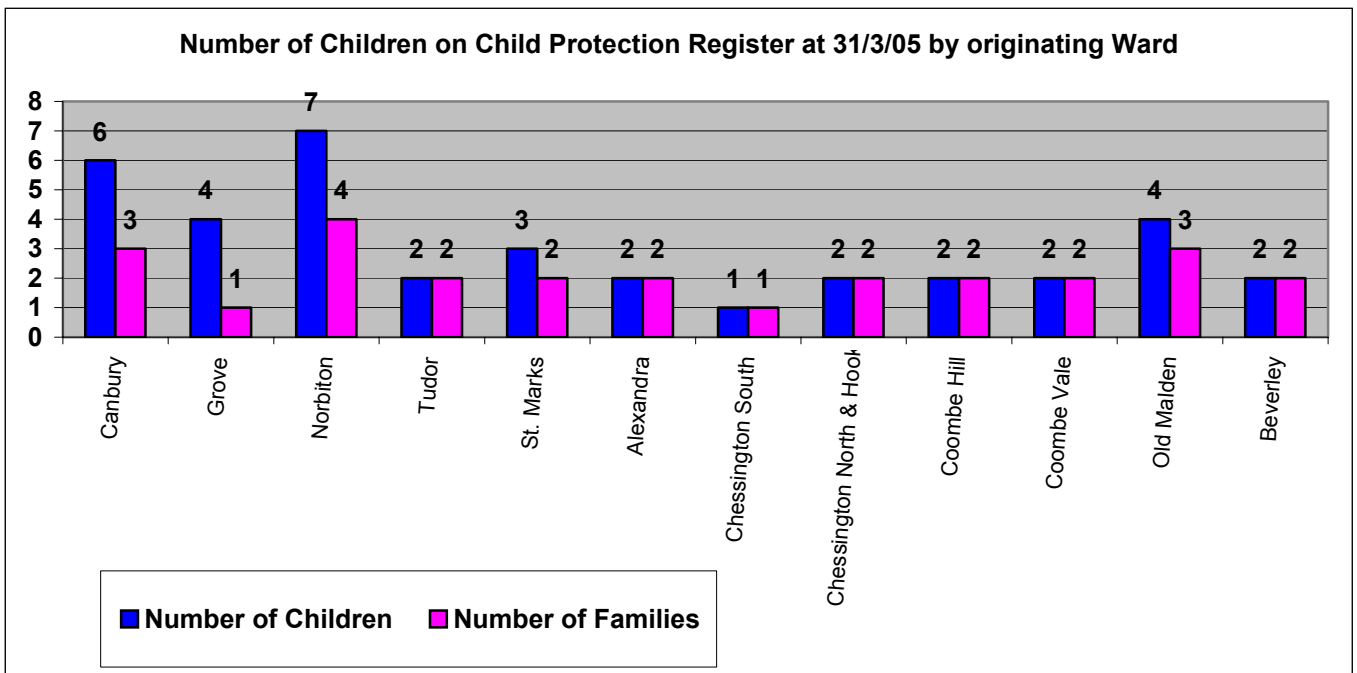
When the children registered for 'emotional abuse' within the 'multiple category' are included with the child registered solely for 'emotional abuse', the Kingston figure conforms to the national figure of about 18%.

'Sexual abuse' would appear to be under represented as a category within Kingston, with only 2 children (just over 5%) being thus registered. This compares with the national figure of 9% (or 2 children per 10 000). Kingston ACPC will investigate the significance of this low percentage.

In Kingston the 'multiple category' was used in nearly 30% of all children registered. This compares with the national figure of 14% at the end of 2004.



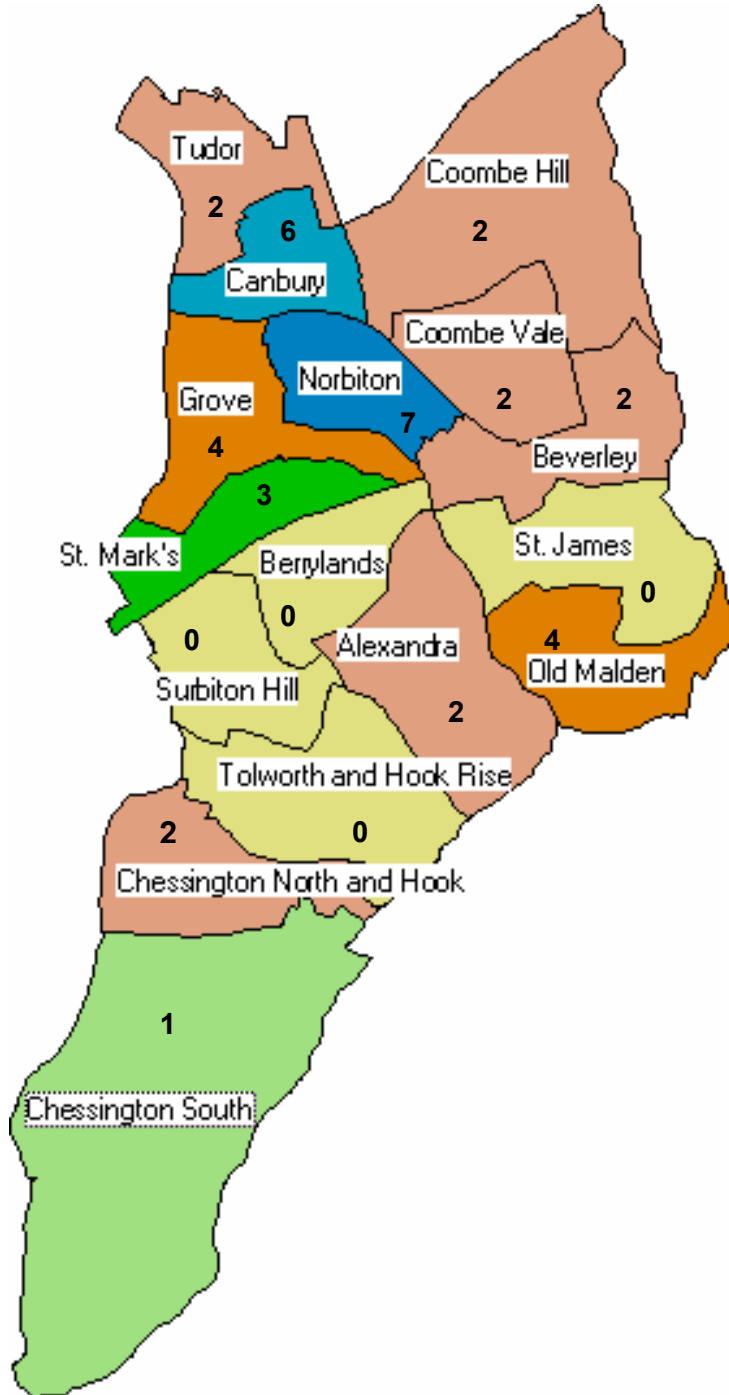
- Of the 37 children on the child protection register at the end of the year, over 78% were white. There were over 21% from non-white ethnicities in Kingston, which compares with 8.7% in England and Wales (figure taken from the 2001 Census).
- The number of children from non-white ethnicities has therefore increased significantly in Kingston since last year when an under-representation was noted.



### Neighbourhoods

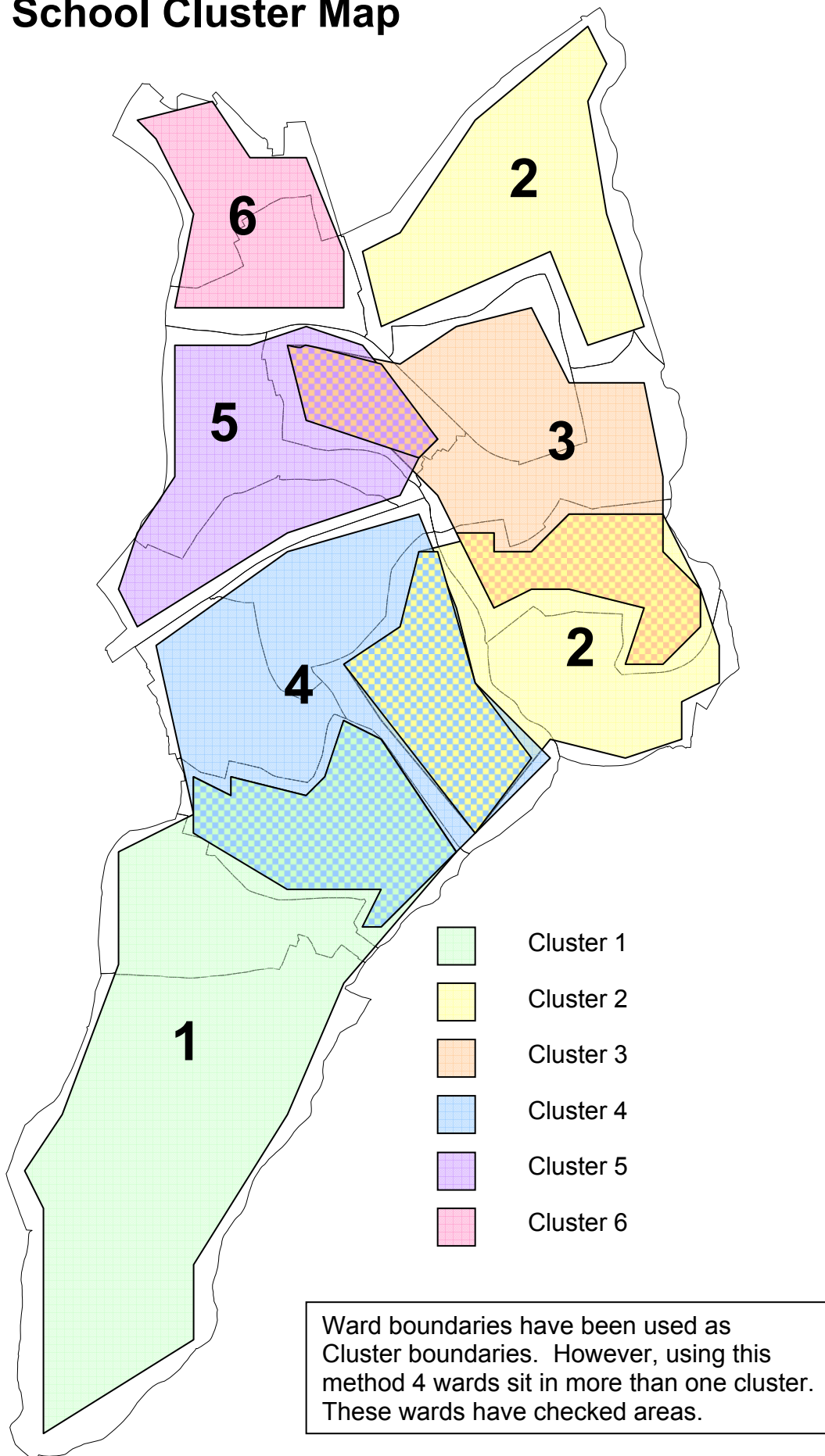
Neighbourhoods	No. of Children
<b>South of the Borough</b> – Chessington S., Chessington N. & Hook, Tolworth & Hook Rise Wards	<b>3</b>
<b>Kingston Town</b> – Canbury, Grove, Norbiton & Tudor Wards	<b>19</b>
<b>Maldens &amp; Coombe</b> – Coombe Hill, Coombe Vale, Beverley, St. James & Old Malden Wards	<b>10</b>
<b>Surbiton</b> – Berrylands, St. Marks, Surbiton Hill & Alexandra Wards	<b>5</b>

**Map showing the number of Children on the Child Protection Register by Ward on 31 March 2005.**



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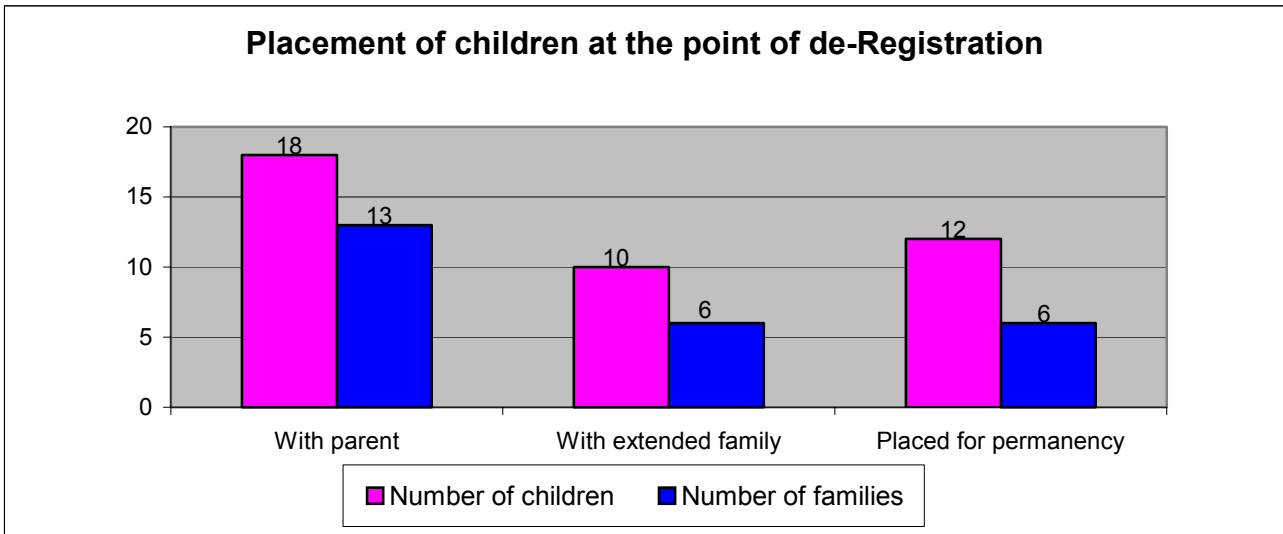
# School Cluster Map



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## Best Outcomes for Children

This graph shows where children were living at the point of de-registration.



- At the point of de-registration, 18 children (representing 45%) were living in the care of their parents. This is a reduction from the two thirds of children living in their parents' care from last year.
- The outcome for 10 children (representing 25%) was for an extended family member to be the permanent carer. In most cases these relatives were grandparents and this has been an emerging trend over the past 2 years.
- Therefore, the permanent care plan for 70% of children at the point of de-registration was to be cared for by family. This means that 15% fewer children's permanent care arrangements were to be met within the family unit.
- Permanency planning outside of the family was the outcome for 12 children (30%), an increase of 17% on last year's figures.

### Meeting Government Performance Targets

Records provide a rigorous audit trail to confirm these performance targets.

- There were no children re-registered on the child protection register during the year. This compares favourably with last year's figure of 17.5% representing 7 children from 3 families. Nationally 13% of children registered had been previously registered.

*All children re-registered are reviewed by the Case Monitoring & Quality Assurance ACPC Sub Group.*

- Of the 40 children removed from the child protection register during the year, 12 children from three large sibling groups had been on the register for longer than 2 year. The outcome of the protections plans was secure and effective permanent care arrangements for all the children involved.

For 8 of these children (from two families), complex permanency planning was taking place and it was felt that they required on-going safeguarding by means of registration.

*Registration should ensure that children who are likely to suffer significant harm are protected and are receiving the services necessary to bring about required changes in the family situation. Good practice indicates effective planning should bring about changes within two years although court proceedings could delay this. Nationally at the end of 2004, 7% of children de-registered had been on for longer than 2 years.*

- All 55 Review Child Protection Conferences were held within prescribed timescales.

*This performance has been consistently maintained at 100% over several years.*

### **Significant Factors affecting Children & Families subject of the 23 Initial Conferences**

Some of these factors were not present at the initial conference but were relevant at later reviews (for example 'child in placement')

<b>Significant Factors either actual or of likely concern</b>	<b>23 Initial CP Conferences 01/04/04-31/03/05 (Of which 5 were transfers in from other Local Authorities)</b>
Parent with a diagnosed mental health illness/post natal depression	3 (13%)
CMHT involvement*	2 (9%)
Domestic violence	11 (48%)
Previous child removed	3 (13%)
Unborn children considered and decision to add to the register at birth	5 (22%)
Child born drug dependent (includes unborn children at the point of birth)	5 (22%)
Child in Local Authority placement	3 (13%)
Child placed with extended family	7 (30%)
Care proceedings underway**	2 (9%)
Parental drug misuse	8 (35%)
Parental drug and alcohol misuse	5 (22%)
Parental alcohol misuse	3 (13%)
Large family (4 plus children)	1 (4%)
Child with a disability	1 (4%)
Parent with a learning difficulty	1 (4%)
Housing issues	6 (26%)
Young, immature parent	6 (26%)
Asylum seekers	0
Non school attendance	5 (22%)
Lone parent	12 (52%)

\*Although at the initial conference, the CMHTs were only involved in 2 families, later they were invited to 6 review conferences, attending them all.

\*\* A further 4 of the families who have had initial conferences are now in care proceedings.

- In 3 of the 23 initial conferences, at least one parent had been diagnosed with a specific mental health illness. In 2 of these cases, there was active CMHT involvement. Last year's report detailed 'mental health concerns' and the percentage

ran at a higher level of 24%. There are undoubtedly mental health issues for many of the substance-misusing parents but this does not constitute a formal diagnosis and is secondary to the addiction problem.

- Domestic violence continues to increase slightly as a factor in families considered at initial conferences and this year nearly half of all families were affected.
- Previous parenting is often an indicator of future risk and for 3 of the 23 families, such was the level of concern, older children had been permanently removed, although not necessarily by Kingston.
- Over 20% of the initial conferences concerned babies who either had been born drug dependent or would subsequently be born thus. This is an increase of 18% from last year.
- The total number of children in placement (Local Authority or with extended family) has significantly increased from 36% last year to 43% this year. Nationally, data for the year ending 2004 shows that of the looked after children on the child protection register, 79% were in foster placements and 13% with their own parents.
- This breaks down to 13% of children looked after in a LA placement either at the point of registration or just after. This conforms to the national figure of 13% for the year ending 2004.
- More children are being cared for either directly by extended family or with extended family overseeing a parent's care. Grandparents form the largest extended family group providing this care and there is an increasing trend for them to apply to the Courts for a Residence Order. Without this input, the numbers of children in LA care would be much higher.
- A quarter of the children subject to initial conferences are now in care proceedings.
- Substance misuse (drugs and/or alcohol) has increased significantly among parents of those children considered at initial conferences, from 44% last year to 70% of the 23 families this year.
- Kingston is a small borough so a large number of children in a family can easily distort figures. This year there was only 1 'large' family considered at initial conference. This is down on recent years.
- Disability increases a child's vulnerability and this year there was 1 child with a disability, an increase from last year.
- Families where housing is an issue remains fairly constant at just over 25%. Typical issues are rent arrears or breach of tenancy agreement leading to a threat of homelessness, harassment by neighbours, unsuitability of accommodation and overcrowding.
- Whilst 'young, immature parent' is subjective, there are similarities in the parents. Parents are often under 22, behaving anti-socially and with a lack of awareness about the impact of their behaviour or their parental responsibility. Last year's figure of 20% is up this year to include just over a quarter of all the families at initial conferences.
- Whilst non-school attendance can be an indicator of vulnerability and risk, many of the children considered at initial conferences are pre-school and most are under 10. Even so, non-school attendance was relevant for 22% of the 23 initial conferences and this is an increase of 15% from last year.
- Over half of the parents were separated and living in a single parent household.

## 9. Glossary of Terms

### **ACPC (Area Child Protection Committee)**

The ACPC is a multi-agency forum for agreeing how the different services and professional groups should co-operate to help protect children from abuse and neglect and for making sure that arrangements work effectively to bring about good outcomes for children. Every Local Authority must have an ACPC although these are next year to be replaced by Local Children's Safeguarding Boards.

### **ASCA (Addiction Support & Care Agency)**

ASCA is a local voluntary organisation dedicated to supporting individuals, families and the community to overcome alcohol and drug misuse through both prevention and treatment.

### **CAFCASS (Children & Family Court Advisory & Support Service)**

CAFCASS looks after the interests of children involved in family proceedings and works with children and their families. It then advises the courts on what it considers to be in the children's best interests.

### **C&FS (Children & Family Services)**

The Local Authority's social care services that support and protect children in Kingston.

### **CAMHS (Child & Adolescent Mental Health Services)**

CAMHS are a range of services providing help and treatment to children who are experiencing behavioural or emotional difficulties or mental health problems and their families.

### **CDAT (Community Drug & Alcohol Team)**

CDAT provides treatment to adults with problematic and chaotic substance misuse.

### **Child**

A person aged under 18.

### **CMHT (Community Mental Health Teams)**

The 4 multi-disciplinary CMHTs in Kingston offer various services and support for people with severe and long lasting mental health problems.

### **CPC (Child Protection Conference)**

A multi-agency meeting involving family members when there is concern a child is either suffering or likely to suffer significant harm. The meeting shares information, reaches a decision about whether the child's name should go on the CPR and makes a plan.

### **CPR (Child Protection Register)**

The CPR is a list of all children considered as a consequence of a child protection conference to be at continuing actual or likely risk of significant harm and therefore in need of a multi-agency protection plan. Each Local Authority keeps its own CPR.

### **CSCI (Commission for Social Care Inspectorate)**

Launched in April 2004, The CSCI is the single, independent inspectorate for all social care services in England.

### **Fassett Road**

A local semi-independent supported living for young mothers and their babies.

### **MAPPA (Multi Agency Public Protection Arrangements)**

The MAPPA began operating in April 2001. This body places a duty on police, probation and social services to assess and manage risks posed by offenders in every community in England and Wales. In the most serious cases MAPPA can recommend increased police monitoring, special steps to protect victims and the use of closely supervised accommodation.

### **OFSTED (Office for Standards in Education)**

Ofsted is the Government body that inspects schools, nurseries, day care providers, colleges, teacher training providers and local education authorities.

### **RO (Residence Order)**

A Court Order that determines the person with whom a child aged 16 & under shall live.

### **Section 17**

Under Section 17, Children Act 1989, the Local Authority has a duty to safeguard and promote the welfare of children 'in need' by providing a range and level of services appropriate to their needs.

### **Section 47**

Under Section 47, Children Act 1989, the Local Authority has a duty to make enquiries if there is reasonable cause to suspect that a child is suffering or is likely to suffer significant harm.

## **10. Business Plan – 2005/2006**

### **All Agencies**

- The ACPC will prioritise preparations for the transfer of responsibility from itself to the Local Safeguarding Children Board (LSCB), in line with Dfes guidance
- The ACPC will agree the membership and Terms of Reference for the LSCB
- The ACPC will respond to the draft new guidelines "Working Together to Safeguard Children" and communicate any changes to all agencies
- The ACPC will respond to any situations requiring a Serious Case Review
- The ACPC with the support of the "Training" sub-group will deliver the agreed Multi-Agency Training Programme
- The ACPC with the support of the "Policy and Practice" sub-group will ensure any new national policy is incorporated into local procedural guidance
- The ACPC with the support of the "Case Monitoring and Quality Assurance" sub group will continue to monitor practice, against performance indicators and share good practice.

### **Police Child Protection Team**

- Assume responsibility for investigation of all Sudden Unexplained Infant Deaths
- Develop formal structural links with Borough Community Safety Units to facilitate information exchange and to resolve issues of responsibility for investigation in appropriate cases
- Continue to work with C&FS to achieve a two way flow of information both at the point of referral when child protection enquiries are being contemplated and prior to child protection conferences

- To ensure we are adequately prepared to accommodate the transition from the ACPC to a Local Children's Safeguarding Board.

### **Kingston Primary Care Trust**

- Continuing with the child protection training programme.
- Identifying which services within the Trust will contribute to the prevention of family breakdown and the support of parents and their children.
- Working towards the use of the Common Assessment Framework and understanding the Lead Professional role.

### **Local Education Authority**

- Establish an on-going training programme for all Designated Child Protection Teachers and Governors who has not received any training in the past two years.
- The Education Welfare Service will pilot two or three models of multi-agency work within the new Children and Learning Services.
- The EWS to lead the work relating to Children Missing Education and to explore how to link it with other information sharing systems that are in place.

### **South West London & St George's Mental Health Trust**

- To complete the review of the joint protocol between Kingston CMHTs and Children & Family Services.
- To continue to work in collaboration with all appropriate agencies.
- To ensure mental health staff are aware of the recently published National Child Protection Documents and their implications for practice.
- To encourage Mental Health staff to take up more of the ACPC Child Protection training.

### **Children and Family Services**

- Develop ASKK as an effective multi-agency Information Service for the public across all Children's services.
- Develop new early intervention and family support services which will be delivered through children's centres, extended schools and school clusters.
- Establish a strengthened multi-agency safeguarding team to deal with child protection & court work, linked to a pro-active Local Children's Safeguarding Board.
- To ensure that the children's safeguarding procedures are fully supported by the introduction of Kingston's Integrated Children's System (ICS).

### **Children & Family Court Advisory & Support Services**

- CAFCASS London Region will continue to ensure appropriate presentation at the Kingston ACPC working towards making an effective contribution to the work of the Committee.
- Regular inter-agency liaison meetings will be held between CAFCASS and Local Authority Service Managers, including a representative from C&FS in the West Sector of London Region CAFCASS.
- CAFCASS London Region will continue to promote inter-agency training in accordance with the spirit of working together and ensure representation, wherever possible, of its practitioners at those training events relevant to the operational activities of CAFCASS.

### **Kingston Hospital NHS Trust**

- To appoint a Named Doctor for Child Protection.
- To achieve Child Protection Administration support for Named professionals.

- To develop inter-departmental Child Protection training for nursing, midwifery and medical staff.

#### **Multi Agency Public Protection Arrangements**

- To ensure appropriate strategic links between the Local Safeguarding Board and the Kingston MAPPA.
- To develop a protocol between the Local Authority's multi agency information sharing arrangements (ASKK) and the Kingston MAPPA.

**If you are worried that a child may be being abused, please  
contact the ASKK on 020 8547 5888 during office hours**

**OR**

**Ring the Emergency Duty Social Work Line on 020 8770 5000  
Outside of office hours**

**OR**

**Ring the Emergency Number 999.**