



HARROW
SAFEGUARDING
CHILDREN
BOARD

ANNUAL REPORT 2018 - 2019

Think Whole Family

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FOREWORD

This is the final statutory annual report of the Harrow Safeguarding Children Board (HSCB). As of June 2019, Harrow has adopted a new set of safeguarding arrangements which replace the HSCB. These new arrangements seek to further strengthen the partnership between the principle safeguarding agencies, so that they share responsibility equally for what happens to children in Harrow.

Whatever the statutory arrangements, children still need excellent services, which are well led and are delivered by people who have a commitment to the task of keeping children safe and helping them to thrive.

This report gives you our account of what we have done in the past 12 months to safeguard children who live, learn, or take leisure in Harrow.

I regularly meet service leaders and practitioners dedicated to the task of safeguarding children and I am always impressed by their focus and determination to do what is best for them. We are, though, never complacent and we know that we need to keep challenging each other and our systems to ensure that our safeguarding partnership is as good as it needs to be and that it is able to evolve to deal with new issues that arise.



A handwritten signature in blue ink, which appears to read "Christopher Johnson", is written over a horizontal line.



CHAIR'S EVALUATION OF THE BOARD'S EFFECTIVENESS

Enquiry and Challenge

This is a strength of the HSCB. The Challenge and Review Section of this report illustrates the multi-agency determination to ensure that our practice is scrutinised and improved as part of our continuous cycle of learning and improvement ✓

Understanding of the impact of practice

The HSCB is consistently curious about how the work of the partners plays out in the real world among children, young people and their families. Our review of the way the Multi-Agency Safeguarding Hub (MASH) practice impacts professionals and our new understanding of the health visitor and school nurse provision (both described later on) are but two illustrations of this. ✓

Understanding performance information

This is a mixed but improving picture. We have a rich data set provided by Harrow Council. The Metropolitan Police, following its restructure, continues to work on its data provision to the partnership, which is currently accompanied by too little analysis. Health provider data has improved and developed over the past 12 months – in particular, with impressive scrutiny taking place by the Royal National Orthopaedic Hospital which is driving up local standards. Substance misuse services have also begun presenting strong evidence of their monitoring arrangements with clear impact on service improvement. To take us to the next step, we need to find ways of compounding all the data we have to enable a full picture of what is happening. There is, though, real determination amongst the partners to get this right. #

Understanding the impact of early help and child protection thresholds

Our data on children who are in need, on child protection plans and who are looked after, give us information on trend and need. This data is subject to review and analysis along with children centre registration and attendance data. Our Quality Assurance activity regularly looks at the application of thresholds and what early help was offered or available. Through this, we have a picture of which children are accessing early help services and how they progress thereafter. ✓

Learning from reviews and incidents

We have not published a Serious Case Review (SCR) in the past twelve months but we worked closely with Lewisham LSCB on a case relevant to Harrow and have undertaken a separate local Learned Lessons Review. These are described later on. . We have taken our learning from these and explored how good we are at accessing a full range of partner information to help us with decision making.

We have also been contributing to an ongoing Learned Lessons Review led by Richmond LSCB to ensure that important lessons about cross border working are identified and responded to in a timely fashion. The findings of this will be reported in the new partnership's first annual report.

Our robust audit regime regularly brings to light partnership challenges. The HSCB has been good at responding to these challenges and improving practice. ✓

Working strategically with other partnership boards

Partnership work is a strength of HSCB and our aspiration is to work together with other partners and boards wherever there is mutual advantage to be had. Our annual conference this year was conducted jointly with Harrow Safeguarding Adults Board (HSAB) and Safer Harrow. The HSCB chair has recently been appointed to chair HSAB as well. He sits as a member of the Health and Wellbeing Board and takes part in the joint strategic need analysis working groups. ✓

General Commitment of Partners

The HSCB is well attended and the sub groups receive regular support from colleagues across a wide range of agencies. Health and Education colleagues have assumed chairing responsibility for a number of areas of multi-agency work and have taken on responsibility for the multi-agency partnership. The Partnership in Harrow is a cooperative and effective one. The HSCB also benefits from a strong input from an independent lay member. ✓

Resourcing Commitment of Partners

Safeguarding is a complex business and a LSCB requires resources to function. The regulations that established LSCBs invites partners to make financial contributions but do not require them to do so beyond the exhortation that the burden should not fall disproportionately on any one member more than another. The funding for the Harrow LSCB in 2018 -19 has fallen disproportionately on Harrow Council for several years. ✗

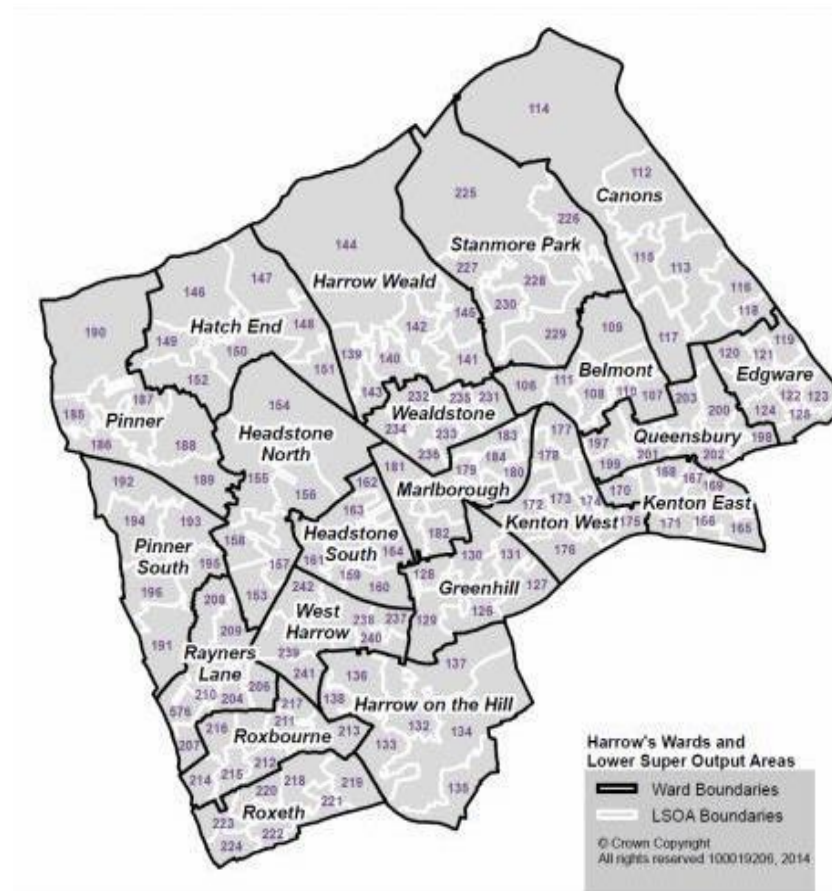
However, this is the last year of the HSCB in its current form and 2019-20 offers new opportunities to get this right.

Conclusion

The HSCB has many areas of strength and is always seeking to get better. Its enquiry and challenge function continues to be the driver of change and improvement. Senior staff across the partnership set a good example in the way that they engage with problems, accept the need for change and put in place ways of making practice better. 2019-20 will be an important year of transition as we dissolve the statutory LSCB and move to new arrangements. We must continue to build on what we have achieved.

A SNAPSHOT OF SAFEGUARDING ACTIVITY IN HARROW

HARROW AT A GLANCE

| | | |
|---|--|-------------------|
|  | Overall Population (2018 mid-year estimate ONS) | 250,100 |
| | Deprivation (Where 1 is most deprived) out of 326 local authority districts. | 213 th |
| | Number of Primary Schools | 56 |
| | Number of Secondary Schools / Sixth form colleges/ Tertiary Education Colleges | 24/2/1 |
| | Children in Borough | 58,400 |
| | Children from a Black, Asian or Minority Ethnic Background | 74% |
| | Number of Contacts in MASH (1 st April 2018- 31 st March 2019) | 7576 |
| | Number of Children in Need (31 st March 2019) | 1847 |
| | Number of Children on Child Protection Plans (31 st March 2019) | 280 |
| | Number of Children Looked After (CLA) (31 st March 2019) | 169 |
| | Number of Children Looked After who are unaccompanied asylum seekers | 38 |
| | Number of Children Placed for Adoption (1 st April 2018- 31 st March 2019) | 6 |
| | Number of Children assessed for Private Fostering | 4 |

A SNAPSHOT OF SAFEGUARDING ACTIVITY IN HARROW

Commentary:

Harrow is generally a prosperous borough and the majority of children thrive in their families and achieve excellent educational results in our schools, which are among the best in the country. It is a diverse borough and the many communities who live in Harrow get on well. Compared with London, the UK as a whole and other local areas, which share our characteristics (our statistical neighbours) the number of children in need, on child protection plans and being looked after by the Council is relatively low.

However, sometimes children, for a variety of reasons, do not thrive in their family homes. When an agency identifies that to be the case they make a referral to MASH and then a variety of interventions are possible. Mostly the concern can be dealt with by normal services. But, if the child or family needs additional help which goes beyond what normal services can provide then as a child in need, with the family's consent, we provide to them additional support and help.

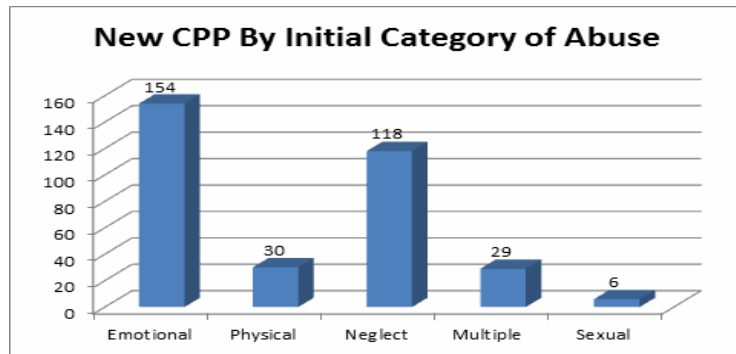
Where a child is thought to at risk of significant harm then we place the child on a child protection plan and work with families to reduce the risk. When the risk is just too high then the child has to leave the family home (often temporarily) to live in an environment, where we know that the child's safety is assured.

In addition to looking after Harrow children whose homes are not safe for them we also look after children who have arrived in the UK as unaccompanied asylum seekers as they do not have homes to live in or family support.

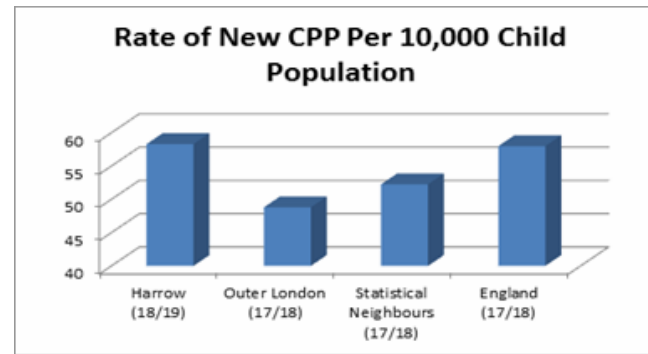
Some children cannot ever return to their family homes and in those cases, we seek to place them with an adoption family.



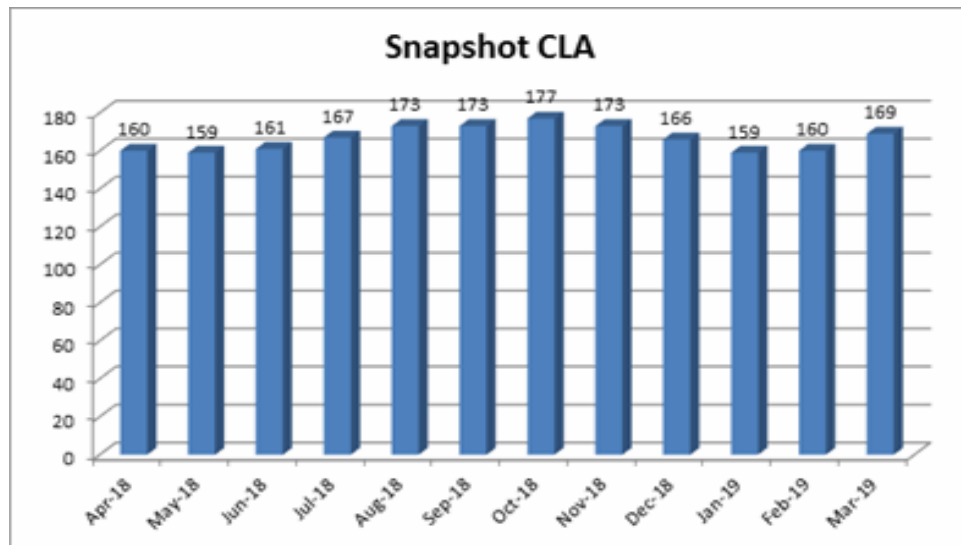
A SNAPSHOT OF SAFEGUARDING ACTIVITY IN HARROW



Categories by which children placed on CP Plans 2018-19



Comparison of Harrow's 2018-19 figures with other authorities



Looked After population during 2018/19

The age profile of children and young people entering care during 2018-19

- 14.8% of children were less than 1.
- 9.0% of children were aged 1 to 4.
- 9.0% of children were aged 5 to 9.
- 25.4% of young people were aged 10 to 15.
- 41.8% of young people were aged 16 and over.

The profile in terms of children leaving care as at 31st March 2019:

- 28.8% Returned home to live with parents/relatives.
- 5.9% Special Guardianship Order granted.
- 13.6% Moved in to Independent Living.
- 2.5% Age assessment determined child is aged 18 or over
- 4.2% Adopted
- 2.5% Sentenced to Custody.
- 0.8% Care taken over by another Local Authority.
- 35.6% Care ceased for any other reason

YOUNG HARROW FOUNDATION – SURVEY

Understanding the Needs of Young People in Harrow – from their perspective

The Young Harrow Foundation commissioned a survey in Harrow to establish the needs of local young people. With the assistance of schools and 51 charities, the survey reached **4,358** young people. By using the feedback from such an extensive and informative survey, local agencies and charities can ensure that their service plans, initiatives and funding bids are better and more realistically informed by the voice of young people.

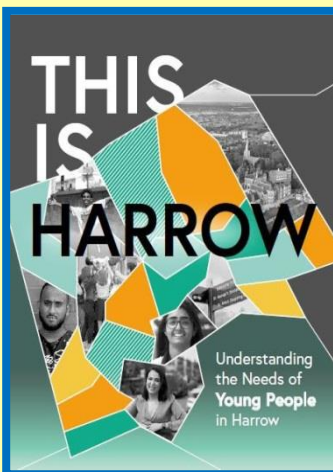
What children and young people tell us in Harrow in relation to safeguarding matters:

Mental and Emotional Well-being

Mental health is the largest area where there is unmet need for support. There are surprisingly high numbers of young people self-harming and experiencing suicidal thoughts. This does not equate to a high risk or prevalence of suicide but indicates that many young people are living with high levels of distress. This finding led to the HSCB planning its next annual conference on **Mental health – self harm and suicide prevention**.

Youth Violence

While only a small number of young people are involved in gang activity, the perceived upsurge in youth violence associated with gangs registered as a major concern for young people. The HSCB has confirmed **Contextual Safeguarding** as one of its three new priorities for 2019 to 2021 with youth violence being a key component.



Inequalities

Despite Harrow being a relatively affluent borough, the challenges young people face are made worse if they are disadvantaged. Children from poorer families, those with caring responsibilities and children with disabilities are likely to have more unmet support needs. The HSCB ensures that children and parents with additional support needs are incorporated into its core auditing programme, working collaboratively with Harrow Safeguarding Adults Board for robust scrutiny of services.

HSCB PRIORITIES 2017 – 2019



Priority 1: Early Help/Support:

To ensure a clear understanding of what help is available across the partnership, where it is delivered and how to access it.

- *Developing and implementing a communication strategy to promote a clear understanding of the referral process and the range of services available.*
- *Monitoring and evaluating front-line practice in relation to the identification, referral and impact of early help – Drawing upon regular single and multi-agency data analysis and auditing.*

What was achieved?

- **A redesign of the Early Help Offer** – advertising and providing local support for both universal access and targeted groups:



Focus on Parenting: We have three hubs in the community and a range of satellite services. Walk-in parenting tips sessions, “Stay and Play” sessions which help parents to learn how to become First Teachers are popular sessions. Targeted support is provided to those families referred by the Multi Agency Safeguarding Hub. Assessments of need lead to access to a wide range of help from within the Early Help Service and/or by other agencies. The Early Help in-put is for 6-12 weeks

Progress: In October 2018 around 2,000 families accessed 6,200 sessions – with good reach into the most deprived areas.

Focus on Young People: Youth work, including services from the voluntary sector e.g. **Ignite** operates from the Wealdstone and Cedars Hubs and provides outreach work. Targeted services are provided for some particularly at risk young people such as young offenders.

Progress: By October 2018 the centre reached 111 young people accessing 489 sessions. 75% were repeat visitors.

- **Together with Families:** A new programme introduced to support families who are most at risk and who are highly dependent on acute services – and where appropriate working to keep families together and children out of local authority care. Harrow is in Phase two of a five year programme. Harrow’s five year target is to have supported 1,330 families who enjoy sustained outcomes.

Progress: Since the start of the programme work has taken place with 1,700 families - supporting the whole family. The programme aligns with Early Help through early identification and preventative work, and consequently reducing statutory intervention and pressure on acute services.





Priority 2: Understanding Risk:

To achieve a reliable understanding of the risks faced by children and young people in Harrow, so that preventative and responsive actions are informed by up to date and relevant information.

- *Reviewing the focus and breadth of the HSCB's data set and identifying priority areas for further scrutiny*
- *Compiling problem profiles and ensuring they are regularly fed by data and intelligence from the whole partnership*
- *Identifying best practice in preventing and addressing risk; drawing upon local learning from reviews and audits - and evidenced based practice (local and national)*

What was achieved?

- **The Multi-agency data set** - has been expanded to reflect the safeguarding activity of the wider partnership and we now regularly review data from
 - Substance misuse services (both children and adult services)
 - Sexual health services
 - Northwest London University Healthcare Trust – Northwick Park Hospital; mental health and community health services.

The data-set has promoted reactive audits where practice varies from statistical neighbours e.g. Female Genital Mutilation (FGM) referrals; child protection categories (see pages on Quality Assurance).

- **Risk areas better understood** – We now understand how a range of issues impact the safety and welfare of teenage children because we now review a range of wider data from
 - The Police
 - Children's social care
 - Sexual health services

This includes data in relation to child sexual exploitation (CSE), gangs and youth violence, missing young people, and criminal exploitation – including County Lines (the exploitation and often trafficking of young people to expand the illegal drugs market across the country). Improved profiling allows local agencies to intervene early and work with colleagues from other neighbouring authorities.

- **Data and audit findings informing risk management** – The number of children placed in local authority care is relatively low in Harrow because we think it is better, wherever possible, to manage risk in a way that keeps the child at home. However decisions on whether to allow a child to remain at home need to be ratified by good quality data and a robust approach to review and audit. The best interests of the child are central to Harrow's approach to managing these risks.
- **HSCB Audits and Case Reviews** – have enabled the partnership to evaluate progress on previous findings to ensure that its Learning and Improvement Cycle is effective – and new areas for future scrutiny are identified and in the future we will be scrutinising how well we engage with parents with learning difficulty and how good is our inter-agency information sharing.

HSCB PRIOTITIES 2017 - 2019

We want to hear from YOU.

Priority 3: Engagement:

To ensure that the work of the Board is regularly informed by children, young people and their families – and to harness new support from the wide range of communities in Harrow

- *Broadening the methods of communication with children, young people and families – and furthering their involvement in service development and evaluation.*
- *Seizing opportunities to involve local communities in safeguarding and promoting the welfare of children.*

What was achieved?

- **The voice of children and young people** – All HSCB members have been active over the year in ensuring that both their practice and strategic planning is informed by the voice of the child. Most notably, agencies have been drawing upon the wealth of information collated by the extensive survey carried out by Harrow Young Foundation (see key safeguarding messages on page 9). Individual agencies have reported into the Quality Assurance Sub group on their internal feedback and survey activity which has led to service improvement e.g. Compass (support for young people who misuse substances) set up a **One Stop Shop** for easier access and refreshed their website in response to feedback from young service users. The development of a new emotional health and wellbeing service '**Harrow Horizons**' provided by Barnardo's, for children and young people up to the age of 18 or 25 for young people with special educational needs and disabilities (SEND), was shaped by extensive consultation with young people too.
- The HSCB has also incorporated changes to its website following consultations with young people and the development of our new Partnership website will be informed by a programme of work experience for young people with additional needs – **Watch this space!**
- All HSCB case audits seek evidence that practice is informed by the voice of young people and their families and these have shown a marked improvement, especially with regard to hearing the voice of siblings and children with additional needs (see Quality Assurance pages)
- HSCB reviews ensure that the views and experiences of families inform local learning. The recently published joint review with Lewisham has led to an improved focus on working more effectively and supportively with parents who have additional needs (See page 23).
- The HSCB's voluntary sector arm, Voluntary Action Harrow, has proven to be an effective mechanism for feedback from a wide range of community based services, which have further informed the HSCB's learning and improvement programme and communications with the Multi-agency Safeguarding Hub.



HSCB PRIORITIES 2017-19



Working Together

Priority 4: Effective collaboration:

To ensure that the priorities of the HSCB are supported by other strategic partnerships within Harrow and that relevant collaborative work takes place with other LSCB's.

- *Building on existing collaboration with other strategic partnerships and identifying new external alliances to strengthen practice and achieve efficiencies.*
- *Ensuring that the HSCB promotes robust scrutiny, transparency and accountability in all of its monitoring activity*
- *Developing 'in-house' auditing and reviewing skills to ensure efficient allocation of HSCB's financial resources.*

What was achieved?

- **Collaboration with Harrow Safeguarding Adults Board (HSAB)** – Building on existing joint activity, the new Strategic Safeguarding Partnership has been developed to reflect the formal and structured connection between the HSCB and the HSAB, both at a strategic planning level and in the newly framed sub group work (see <http://www.harrowscb.co.uk/wp-content/uploads/2019/06/Harrow-Safeguarding-Children-Arrangements-May-2019.pdf>). This will further strengthen Harrow's strategies to address areas of safeguarding risk that affect the young and adults with care and support needs, including the transition from childhood to adulthood. Already, our shared 'Think Whole Family' approach has been reflected in:
 - **Joint annual conferences** – Domestic abuse, Sexual abuse, Modern day slavery, and Self-harm and suicide prevention.
 - **Jointly led case auditing** – Substance misuse, sexual abuse, agency child protection Enquiries.
 - **Joint learning events** – FGM, problem gambling, belief in spirit possession, and contextual Safeguarding.
- **Collaboration with North-West London Safeguarding Partnerships** – New Child Death Review arrangements are being developed. The combined larger amount of data from this new collaboration is intended to produce more reliable patterns and themes to guide preventative action in respect of avoidable deaths.

Shared HSCB & HSAB Learning events



CHALLENGE & REVIEW

HSCB multi-agency audit of cases involving sexual abuse

The proportion of child protection plans in Harrow for sexual abuse has remained relatively lower than other areas similar to us (known as our statistical partners) This has been the case for some time now. The Quality Assurance Sub Group undertook a multi-agency audit to explore the reasons why this might be the case.

Nine cases spanning the full range of thresholds were selected for review (i.e. cases resulting in no further action through to those requiring child protection and criminal investigation).

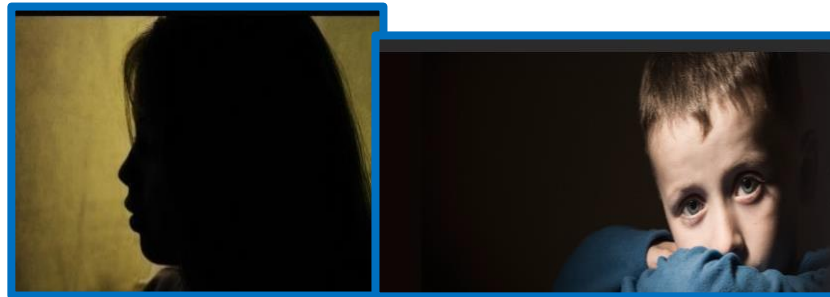
The following areas showed good practice:

- The application of thresholds in response to the initial referral.
- The range of support offered to children by schools and colleges including early help services.
- Cross border information sharing by children's social care.
- Engagement with birth fathers in assessment and planning.
- Constructive inter-agency challenge.
- GP services in their recording of cases and their readiness to raise alerts appropriately.
- Mental Health Services holding on to cases and persevering with non-engaging young people or families.
- The wide range of arrangements in place to obtain the voice of the child, including those with special needs.

Areas for further development:

- Some initial assessments were informed by an incomplete range of information because not all available information was sought from or provided by those agencies to whom family members were known.
- There were some examples where adult services focused on the needs of parents with care and support needs without identifying the impact of their additional needs on their children.
- Conversely, there were some examples of child facing services not identifying or adequately acknowledging the mental health or learning needs of parents.
- Systems for notifying agencies of action to protect children were robust, but they were not so reliable when Children's Social Care decided to take no further or alternative action – leaving schools and GP's unclear about how to respond to the families they had referred.

A multi-agency action plan overseen by the Quality Assurance sub group will ensure that the above findings are addressed and their impact monitored throughout 2019 to 2020.



CHALLENGE & REVIEW

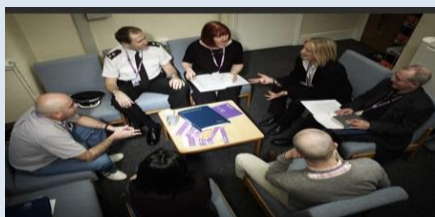
Analysis of the HSCB Data Set:

1. Understanding Child Protection Categories

Regular scrutiny of the HSCB's data set indicated that the proportion of cases registered for sexual abuse at child protection conferences was lower than the London average and our statistical neighbours. The Quality Assurance Sub Group explored this in different ways; involving interviews with conference chairs and participating professionals, as well as conducting an extensive survey of multi-agency perspectives on the outcomes of all conferences held over a 3 month period.

The survey concluded that participating professionals agreed with the final categorisation of cases in the majority of cases, and that where there had been disagreement, the conference Chair facilitated good discussion bringing matters to a satisfactory resolution. Participants felt sufficiently skilled and confident to challenge and escalate concerns in this multi-agency setting.

The Quality Assurance Sub Group remains actively curious in its scrutiny of related data and sought a wider understanding of practice in relation to sexual abuse cases in its dedicated multi-agency audit (see Sexual Abuse Audit Findings).



The process of examining notifications revealed that entries onto the Local Authority system were not always undertaken accurately in terms of how the initial concern was being categorised. This finding led to additional training for the relevant Business Support Team, who made helpful suggestions themselves for the improvement of checklists and descriptions on the electronic system. The accuracy of entries will be kept under review.

2. Scrutiny of MASH Notifications and Outcomes

Reports from some agencies that they were not automatically receiving feedback from MASH in response to their referrals were investigated by the Quality Assurance Group. For the period examined, compliance on feedback was confirmed although the timeliness of feedback led to further action. The introduction of the national CP-IS system (Child Protection Information Sharing) will further improve communications between key health providers and Children's Social Care.

3. Scrutinising Developments in the Multi Agency Child Sexual Exploitation Arrangements (MACE)

A 4th audit over a 3 year period of the functioning of the MASE Panel demonstrated the importance of the HSCB's attention to the partnerships response to young people at risk of exploitation. The scrutiny led to improved use of the Child Sexual Exploitation Risk Assessment Tool and better identification of patterns and themes emerging across Harrow and neighbouring boroughs.

CHALLENGE & REVIEW

Evaluation of Health Visitor and School Nursing provision

In 2018 Harrow Council's Public Health Department assumed responsibility for the commissioning of Health Visitors and School Nurses (replacing the CCG).

The Quality Assurance Group has kept the 0-19 service under scrutiny because we wanted to know what impact the change has had on children and young people.



Improvement:

Firstly the collection and analysis of data has improved enabling us to have a better understanding of the service. We have found that:



- The proportion of children at 12 months receiving checks has increased
- The take up of checks on 3.5 year olds needs to improve and
- The rates for breast feeding is not what we would like it to be. (NB: However 2019/20 shows significant improvement with targets being met).

So the HSCB will continue to monitor progress.

Ensuring continuing progress

Progress on action plan from CYAD Audit

The HSCB commissioned an independent audit to seek assurance about the new arrangements for the 0-25 Disability Service set up in 2016. The audit found many strengths in the new service including detailed and timely assessments. Progress on the areas for development was monitored during 2018, supported by further internal case auditing.



The action plan led to:

- Better evidence of how the voice of the child/young adult was sought and used to influence planning – drawing upon direct work with the child/young adult and by widening the range of family members and professionals who contribute to this feedback.
- Action to identify and support young carers/siblings – supported by staff training from The Children's Society and the Together with Families Programme.

Making a positive difference

CHALLENGE & REVIEW



Monitoring Safeguarding Arrangements and New Developments in Harrow

Sexual Health Services – Public Health

A new contraceptive and sexual health service was launched at the Caryl Thomas Clinic. To ensure its accessibility, it operates from the new Community Clinic hub.

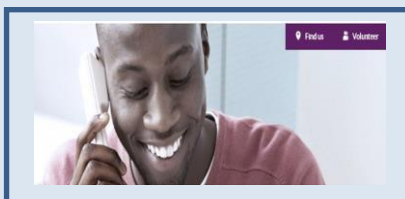
A **C-Card Scheme** now operates providing access to free condoms for registered 13-24 year olds – helping to promote better sexual health.

The Sexual Health Service provides educational work in schools and colleges, as well as training for professionals on a range of sexual health related topics including CSE, consent, body image, on-line safety and pornography. Additional support is provided for young people with special educational needs and outreach work for vulnerable and high risk young people.

Westminster Drugs Project (WDP) Substance Misuse Services for Adults

WDP provides drug services to adults in Harrow. It comes across a lot of children in its work and so liaises closely with child facing organisations to ensure that children who may be at risk from substance misusing adults are referred to partners. It also provides expert advice to professionals across the partnership.

A CQC Inspection in 2018 found four outstanding areas of best practice and no required areas for improvements. This service has experienced budget reductions in the past two years and so, HSCB continues to monitor the impact this may have on safeguarding processes. WDP have evidenced that this area of work receives priority.



Compass – Young Peoples' Substance Misuse Service

Over the year Compass:

- Updated its tracking systems to ensure that the service learns from safeguarding incidents.
- Set up on-site advisory support to ensure an **early response** to young people seen at Northwick Park Hospital.

Compass made good use of feedback from young people to:

- Revise guidance leaflets for young people – in 5 common languages and develop a new website.
- Develop a **One Stop Shop** which provides a range of support from Compass itself and other services; Barnardo's (mental health), Prospects Careers Advice, Terrence Higgins Trust (sexual health) and Azy Counselling Services.

CHALLENGE & REVIEW

Child Protection Conferences

Arrangements to protect and support children at risk of significant harm are overseen and monitored by a multi-agency conference. **838** such conferences were held in Harrow during 2018 to 2019 to consider initial cases and a further **480** conferences were held to consider the review of existing cases where a child/young person already had a child protection plan. **82.8%** of the initial conferences led to the child/ren receiving a child protection plan.

Children who remain on a child protection plan for more than two years or for a second or subsequent time are additionally monitored through the multi-agency Child Protection Practice Panel. The additional scrutiny ensures that any delay in progress is identified and the reasons understood or challenged.

Between 2018 and 2019 **0.4%** of the total of cases had a Child Protection Plan for two years or more in Harrow. This placed Harrow well below the statistical and England average (**4.53%** and **1.8%** respectively) – indicating the effectiveness of local plans.

Improvements have taken place in the timeliness of conferences being held to receive cases transferred into the borough – previously 37% were meeting target timescales and this has improved to **69%**. The improvements are linked to learning embedded from a local **Serious Case Review**.

Other successes:

- **100%** of parents received a report for the conference.
- **96%** of conferences had appropriate representation from agencies.
- **97%** of social care reports were assessed as satisfactory, good or excellent.

Strengthening Families

The Strengthening Families model used by practitioners in Harrow helps families understand their strengths and risk areas – empowering them to participate in the assessment and planning in a constructive way.

This also means that child protection conferences are more inclusive and dynamic.

The approach is supported by:

- A new dedicated conference room with easier access on the ground floor and separate Waiting Room.
- The use of a Signs of Safety visual tool at every conference – which breaks up information for easier interpretation.
- Encouraging attendance and engagement by children and young people in the process of the conference.
- Improved engagement by GPs.
- The use of an independent advocacy service.
- The use of children's consultation forms.
- Feedback from professionals.



CHILDREN LOOKED AFTER

Independent Reviewing Officers (IROs)

IROs have a statutory role in ensuring that Children Looked After (CLA) are receiving the support and care that they individually require – and have a key role in challenging any drift or delay in the agreed arrangements.

Achievements:

- A total of **525 Reviews** were chaired by IROs for the year ending 2017 and **98.6% were held within the required timescale.**
- **Caseload** for IROs in Harrow are of the right size and are balanced so that complexity and distance (some Harrow CLA have to live a long way from Harrow but need the same help as locally placed children) are shared equitably across the service
- **86% of disputes** about care plans were resolved at the earliest stage (stage 1) and the remainder resolved at Stage 2. None required further escalation.
- **100% of care leavers received information about their financial entitlements** regarding setting up home and for education/training and employment

Continuing Scrutiny:

- **80% of children had an up to date Health Assessment** at the time of their review – and the CLA Health Team continues to make progress
- **60% of children had an up to date Personal Education Plan** at the time of their review. Attention is being given to ensuring that schools and social workers complete the plans in a timely fashion

Both areas for improvement are kept under scrutiny by the HSCB's Quality Assurance Sub Group.

Data

The Looked After population for 2018 to 2019 ranged from **162 to 170** children and young people

The largest proportion of children who started to be Looked After in this period were aged **16 plus (41.8%)**

By the second Review, there was a Permanency Plan in place for 87% of children. The remainder were subject to ongoing assessments as part of care proceedings being in progress

9 Looked After Reviews concerned children and young people with a **disability**. Additional time was given to ensure that their wishes and feelings were identified



CHILDREN LOOKED AFTER

Permanent placements or returned home

During the period 2018/19 the profile of children leaving care by end of 31st March 2019 was:

- 28.8% Returned home to live with parents/relatives.
- 5.9% Special Guardianship Order granted.
- 13.6% Moved in to Independent Living.
- 2.5% Age assessment determined child is aged 18 or over
- 4.2% Adopted
- 2.5% Sentenced to Custody.
- 0.8% Care taken over by another Local Authority.
- 35.6% Care ceased for any other reason

The voice of the child/young person

In Harrow, we seek to ensure that the views of Children Looked After are sought at all stages of their time in care

- 81% of children and young people over the age of 4 participated in their Review by attending or having their views and feelings expressed via another method
- Some young people have chaired part of their Review and/or helped set agendas
- Advocacy in Harrow is provided by **Community Solutions** from **Harrow Mencap**
- The Youth Justice Board commissions advocacy services for young people detained in young offender institutions and secure training centres

Listening to children and young people

I have support from the Children Looked After Nurse

I know her, but can't remember her name – she is kind and understands me

My IRO will make sure my needs are covered and check the social worker is supporting me

I have no family in the UK

I know who my IRO is – she is very good

I like my IRO – she's nice

I would like to move to a larger room in my placement

CHALLENGE & REVIEW

Management of Allegations against Staff

The Local Authority Designated Officer (LADO) ensures that any allegation of abuse against adults who work with children is dealt with in a thorough, fair and timely manner.

In the past year there were a total of **73** referrals of allegations against staff and volunteers across Harrow. This figure has remained fairly stable in recent years. Most are referred by schools and Children's Social Care.

52 cases involved referrals to the police, but **25** of these did not result in an investigation.

20 cases required enquiries by Children's Social Care to establish if there was a risk of significant harm to a child.

33 referrals involved concerns of a physical nature; 3 were in relation to emotional abuse; 18 in relation to sexual abuse (including on-line and historical abuse).

Of the total number of allegations **18** were substantiated. This was an increase of **50%** on the previous year's statistics.

8 cases involved children with disabilities.

Performance:

31 cases were completed within 3 months. Delays on other cases were largely due to the complexity of necessary police and court processes.

1 case was referred to the Disclosure and Barring Service to ensure that the individual concerned could not work with children again.

Care Quality Commission (CQC) Inspection of NWLUHT

The CQC inspected services at NWLUHT – Northwick Park Hospital and made a number of recommendations and requirements for improvement. Some were in relation to their safeguarding arrangements. The HSCB and its Quality Assurance Sub Group has maintained oversight of the progress on relevant key actions:

- Improving compliance with mandatory training – A new training strategy has been produced, including monitoring.
- Improving systems for recording safeguarding matters – The new CP-IS (Child Protection Information Sharing) system has been put in place.
- Providing nursing staff with clinical and safeguarding supervision. A formalised safeguarding supervision strategy has been developed and rolled out across allied health services.
- New Children's Board established to steer and maintain standards.

Harrow Council's Residential Provision for children/young people with learning or complex needs: The Firs

The Firs provides children/young people with a variety of experiences and relationships outside of their own home whilst also providing families with a break from meeting the additional support needs of their children. The service supports **32 children/young people**.

In their inspection by Ofsted in the year 2018/19 The Firs maintained its "**Outstanding**" grading for the 10th consecutive year.

The Firs is in the top 1% of children's homes nationally!



CHALLENGE AND REVIEW

Royal National Orthopaedic Hospital (RNOH)

A review of safeguarding arrangements at RNOH in 2017 led to a **robust action plan** to ensure that quality assurance was at the forefront of safeguarding.

Progress has been impressive, with regular audits being undertaken and presented to the HSCB's Quality Assurance Sub-Group for external scrutiny.

- A new specialist Safeguarding Advisor post was created and governance arrangements strengthened
- Audits confirm that the majority of staff have good overall safeguarding knowledge
- RNOH's robust auditing programme continues to drive up standards



Central & North West London NHS Foundation Trust (CNWL)

Children and Adolescent Mental Health Services (CAMHS) **improving service provision:**

- A hub model for an **Urgent Care Team** was established providing services for children and young people in crisis – including A&E assessments and supporting young people and their families for intensive short periods of time to avoid the need for hospital admission or to support early discharge
- A new unit '**Lavender Walk**' was opened in November 2018, providing in-patient care for young people aged 13 to 18 who are experiencing severe mental health difficulties and need to be cared for in a safe and secure environment. It comes from innovative work by the North West London **CAMHS New Models of Care Programme**

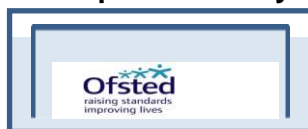
The Team
at
Lavender
Walk



- A new Unit '**Crystal House**' (5 beds) has been opened to provide specialist support for adolescents with a learning disability

Ofsted's focused visit to Harrow Local Authority Children's Services

Inspectors considered the local authority's arrangements for children who need help and protection – specifically the 'front door' services. They concluded that there was **strong leadership** in Harrow to improve outcomes for children and their families. Since the previous inspection in 2017, they found a **sustained commitment to improving the quality of social work practice** and that the local authority had **clear strategies in place to promote early intervention and support**.



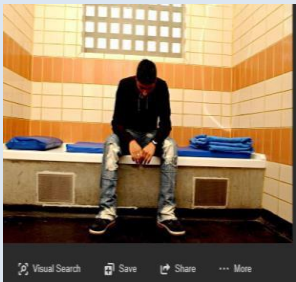
LEARNING FROM CASE REVIEWS

Local Serious Case Reviews



HSCB contributed to a Serious Case Review led by Lewisham LSCB in a case which involved serious injury to a Harrow child who had gone to live with a relative in Lewisham through a Special Guardianship Order. Key learning included:

- Ensuring multi-agency checks are carried out and that they inform assessments
- Understanding the implications of parental learning difficulties and the need to work effectively with specialists in adult services
- Being clear about the legal framework relevant to professional duties
- Ensuring that the life story of a child is passed on to professionals in the child's new area.



Learned Lessons Review

A Local Learned Lessons Review was undertaken in response to a 17 year old with serious mental health issues who experienced an extreme delay waiting in a police cell for a Tier 4 CAMHS bed. The review led to a revised pathway for young people with mental health problems in crisis.

New model for Local Learning Reviews

The above review was a new way of learning for us with fewer written reports, shorter time frames and better multi-agency working. Practitioners and their managers contributed to the findings through shared reflective learning on key stages of the young person's experience in custody.

Learning from Deaths and other Serious Incidents

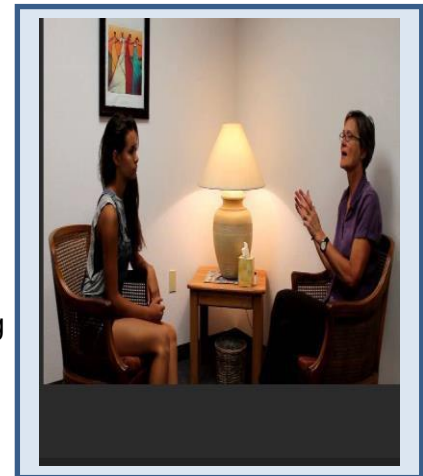


A 2018 case which involved the sad death of a primary school child following an acute asthmatic episode. Learning took place for schools on asthma treatment through awareness raising. The National Guidance for Schools on Asthma and the attached process chart were circulated to all schools.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/416468/emergency_inhalers_in_schools.pdf

The case of a young person admitted to an adult ward out of area in South London was also scrutinised by the Review Group.

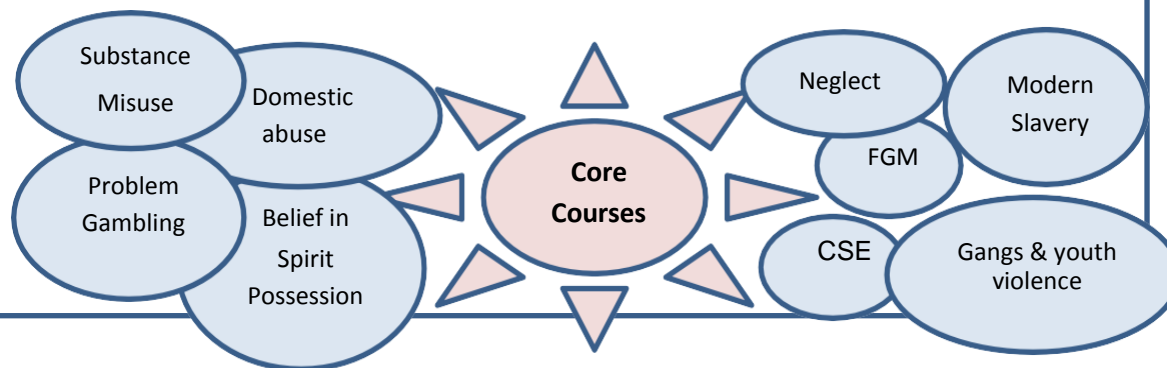
The findings led to the Tier 4 pathway being revised to ensure better access to Tier 4 beds and a new model of care. This work has led to funding for and the opening of Lavender Walk, a Tier 4 inpatient service adjacent to Chelsea and Westminster Hospital in November 2018.



LEARNING AND DEVELOPMENT

Restructure of HSCB Learning and Development Programme

We found that demand for multi-agency training and our capacity to deliver it has changed significantly over the past few years. In the face of this, the HSCB reviewed partners' annual training requirements and the level of contribution they were able to offer to resource them. The outcome was to reduce the available core courses to two: **'Introduction to Multi Agency Safeguarding and Child Protection'** and **'Advanced Multi Agency Risk Assessment and Decision Making in Child Protection.'** To ensure that practitioners also keep their knowledge and skills up to date, a new programme of **Learning Events** was set up, involving shorter briefings and seminars. These are provided over a long lunch break or at a half-day session. This leads to better attendance, because it is more attractive to agencies as the release of staff for shorter periods has less impact on general service capacity. This has been reflected in good take-up of the events. Events have included a wide range of topics led by local leads and external specialists in each field. Practitioners attending any of the core courses or the learning events receive a certificate to include in their personal development portfolios.



Expansion of HSCB Training Pool

The HSCB refreshed the content of its core courses over the last year with the help of existing trainers and ran a 'recruitment' programme to attract more practitioners into the Training Pool. This was a very successful exercise and **16 new trainers** were added to this highly valued multi-agency resource, helping us to extend the range and number of our courses. This will support our expansion in to the topic of **Contextual Safeguarding**.



Designated Safeguarding Leads for Schools Forum

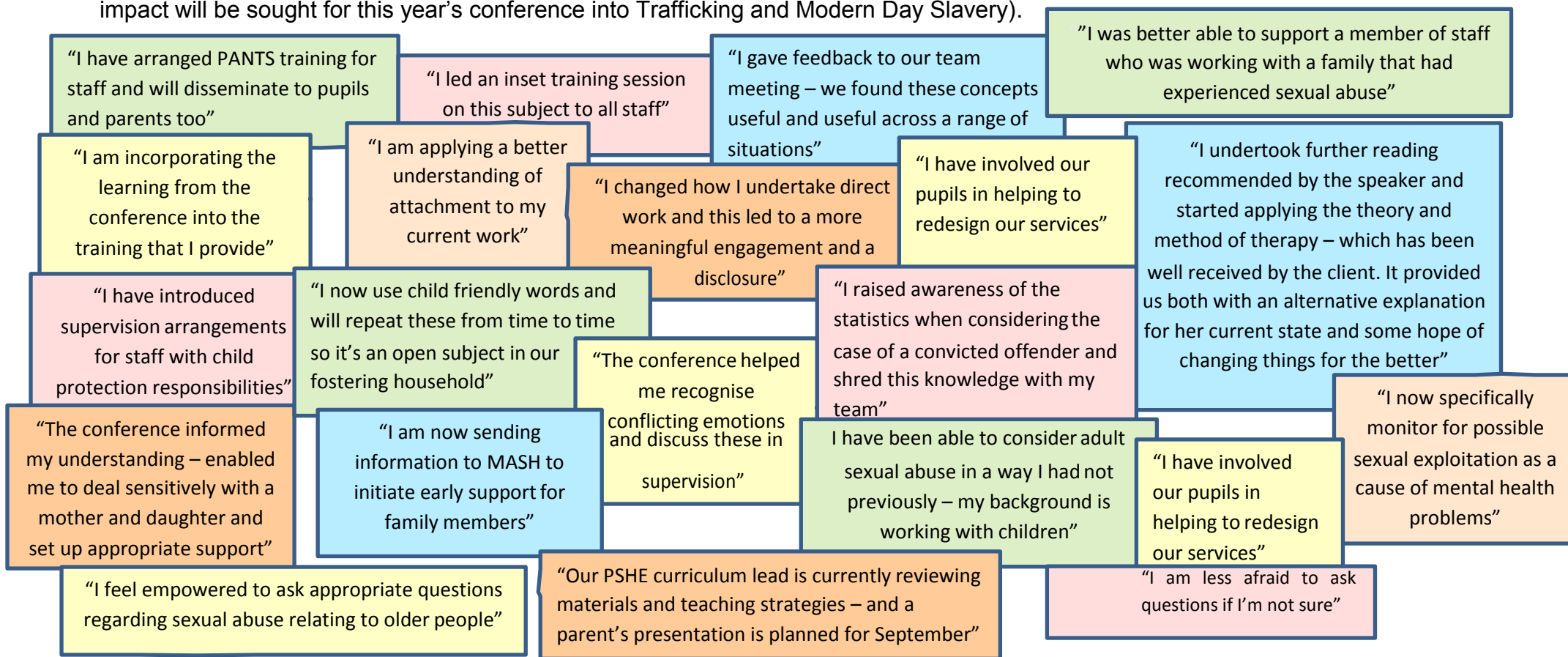
The HSCB provides a termly safeguarding forum for all Designated Safeguarding Leads (DSLs) in Schools and Colleges. These events are popular as they provide DSLs with up to date information and briefings on emerging safeguarding issues and services available to support them in meeting the needs of their pupils and families.

The forums are also a good opportunity for schools to share examples of good practice e.g. Early Help, Inspection Readiness

2018 ANNUAL CONFERENCE: 'SEXUAL ABUSE WITHIN THE FAMILY'

– good news from practitioners in Harrow!

We want to ensure that our safeguarding learning events lead to better, professional practice. We want our learning to improve the lives of children, adults with support needs and their families in Harrow. Our joint conference with Harrow Safeguarding Adults Board in 2018 led to the following feedback and actions taken by a selection of those people who attended (evidence of similar impact will be sought for this year's conference into Trafficking and Modern Day Slavery).



TRAFFICKING AND MODERN DAY SLAVERY

The HSCB and Harrow Safeguarding Adults Board (HSAB) provide shared training for the children's and adult's workforces where they are dealing with mutual and overlapping risk.

IMPACT 14 referrals regarding children were made to the **National Referral Mechanism (NRM)** in the year 2018/19 for potential child trafficking. This shows a steady increase on previous years and possibly indicates the effectiveness of raising awareness activity.

Some of the cases are linked to concerns of child criminal exploitation (i.e. County Lines drug **trafficking**). Harrow's data shows that children are often referred for other concerns before trafficking emerges as a factor.



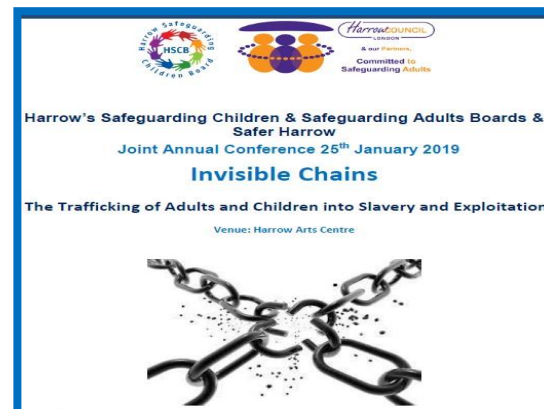
PILOT: To strengthen the local response, the Local Authority instigated a pilot partnership with **ECPAT** (Every Child Protected Against Trafficking) to raise awareness and improve practice, including the links with other risks such as Child Sexual Exploitation and County Lines.

IMPACT:

- Implementation of a register to identify and track children at risk of exploitation
- Increase in the number of training sessions on child trafficking indicators and notification duties
- Revision of trafficking guidance and procedures

SAFEGUARDING CONFERENCE: 'INVISIBLE CHAINS'

In January 2019 HSCB, HSAB and Safer Harrow collaborated on delivering a conference on modern day slavery and people trafficking which are shared areas of concern.



It attracted a wide range of practitioners from across the children and adult's workforce. Keynote speakers included Kevin Hyland OBE, the UK's first Independent Anti-Slavery Commissioner and expert researchers in the field; Dr Ruth Van Dyke, Tamara Barnett and Philip Ishola. The day was also supported by a good variety of specialist workshops drawing on local experience and national support organisations.

A powerful presentation was given by 'Miriam' a survivor of trafficking which grounded the conference in service user experience. As with all HSCB learning events, delegates were required to report back on how they had embedded the learning into their practice to make a positive difference to children and vulnerable adults in Harrow.



POLICY, PROCEDURE AND GUIDANCE

DEVELOPING AND REVISING GUIDANCE



There are a set of London safeguarding procedures but sometimes they require local interpretation or amplification. HSCB's **Policy and Procedures Sub-Group** leads on this work. What the group is asked to do can be identified through local audits and reviews – or they could be required to develop guidance to support a unique local service.

This has been another active year where many existing procedures and guidance tools have been reviewed and updated to include new research or arrangements. This has included a refresh of the **'Golden Number'** referral leaflet.

The Sub-Group has scrutinised and endorsed a range of safeguarding policies for local and national organisations, and have contributed to national consultations on new guidance e.g. Carers Joint Commissioning Strategy; Elected Home Education, National Safeguarding Policy for Supplementary Schools, NHS England's Joint Guidance for Children's Social Care and Substance Misuse Services, and Relationship and Sexual Education Guidance. The Sub-Group also responded to requests from local schools to produce guidance to achieve a proportionate response to 'threats' of terrorism.

One area of particular achievement is the collaborative work this group has undertaken with Harrow's Licensing Service on the topic of **Problem Gambling**. After researching the prevalence of this problem across the partnership, a number of full day training events and part day briefings were arranged with the assistance of Gamcare – promoting greater understanding of the risks associated with addiction and its impact on the family and young people.



HSCB WEBSITE



The Sub Group oversees the development of the HSCB's website, which provides guidance for practitioners and links to the Pan London Safeguarding Procedures.

In addition, the website provides guidance and assistance for children, young people and their families on a range of topics – and signposts them to services and additional guidance, both local and national.

The website links to the HSCB's training programme and its **NEWS** page promotes upcoming events and new developments.

The Sub Group scrutinises 'traffic reports' which show how often the website is accessed and which pages attract most interest. This helps to inform the HSCB about the impact of learning events and where practitioners and the public might seek more assistance e.g. allegations management, preventing radicalisation, training and pathways to referring concerns: 'The Golden Number'.

A new look

- To ensure our website is relevant and accessible, plans are in place to engage young people in redesigning it under its new partnership arrangement beginning September 2019.
- Alongside developments for the new partnership, the HSCB and HSAB are exploring options to use a new shared website platform to promote our **'Think Whole Family'** approach to safeguarding.

ENGAGEMENT WITH THE VOLUNTARY, PRIVATE AND FAITH SECTORS



Helping you achieve.
We work with the voluntary and community sector
providing information, training and guidance.

*Some topics are taboo in some
cultures – it's good to talk about it*

*I feel more knowledgeable
now to deal with disclosures*

*Excellent support regarding how to
deal with allegations against staff*

*I am more confident supporting
the families we work with*

HSCB has been working with Voluntary Action Harrow (VAH) for five years. VAH helps the HSCB to reach a wide range of local voluntary, private and faith organisations with key safeguarding information, advice and training. VAH helps to ensure that HSCB's priorities become known and embedded locally. We have asked them to pay special attention to issues such as Female Genital Mutilation, Breast Flattening, Modern Day Slavery, and the Sexual and Criminal Exploitation of children because of the impact that they have on particular communities. Annually VAH provides evidence to us of the impact they have had through their engagement with local organisations. The number of organisations accessing their safeguarding support services has grown steadily year on year and their impressive reach provides reassurance to HSCB that there are well developed levels of understanding about safeguarding among local communities. The advice provided by VAH is supplemented by the **Green Book** which outlines all the required duties and responsibilities relating to safeguarding children for the voluntary, private and faith sectors.

VAH – Strengthening Strategic and Operational Arrangements

VAH ensures that the voice of the voluntary and faith sector informs the HSCB's strategic and operational planning.

They are active members of the HSCB's Multi-agency Training Pool and the annual safeguarding conference planning group. (please see Learning and Development).

On an operational level, VAH has also proved very effective in enhancing knowledge and cooperation between statutory organisations and voluntary groups across Harrow. Briefings in the Multi-Agency Safeguarding Hub and advocacy for smaller organisations has helped to smooth communications and bust some traditional myths about safeguarding practice on both sides.

The Team at VAH



CHILD SEXUAL AND CRIMINAL EXPLOITATION - A NEW FOCUS ON CONTEXTUAL SAFEGUARDING

Child Sexual Exploitation

There were 28 referrals to the Multi Agency Sexual Exploitation Panel over the past year. 26 of these were girls and most referrals related to children aged 15 or older.

A new electronic recording system has allowed practitioners to identify higher risk Areas. It also helps link these young people with missing episodes and those also thought to be involved with or on the periphery of gangs or criminal exploitation. This enables the delivery of appropriate services which can be coordinated much earlier to address multiple vulnerabilities for the young people concerned.

HSCB's Violence, Vulnerability and Exploitation Sub Group encouraged the establishment of more robust internal reporting systems and this has improved the way we can help to protect children placed in Harrow by other local authorities. Better cross border information sharing now takes place which means that risks faced or posed by these 'out of area' children are more completely understood and addressed.

Trafficking and Modern Day Slavery

Agencies in Harrow made **11 referrals** to the **National Referral Mechanism** over the past year identifying young people at risk of trafficking related to CSE and or criminal exploitation. This was a significant rise on previous years and reflects the effectiveness of training and the impact of our annual conference in raising awareness of this crime.



Youth Violence and Criminal Exploitation

The HSCB's Violence, Vulnerability and Exploitation Sub Group has expanded its focus over the past year to review the prevalence and multi-agency response to criminal exploitation, including '**county lines**'.

In the last year, **30 children/young people** were identified as victims of child criminal exploitation (CCE) – and the majority of these were aged 16-17 years of age.

Unlike those at risk of CSE (girls mainly), the majority of those at risk of CCE (80%) were male.

The expanded remit of the **Multi-Agency Exploitation Panel** and **improved performance monitoring** have led to earlier identification of risk and more effective management of key risk factors, including cross border work.



MENTAL HEALTH – SUCCESS OF A LOCAL SERVICE



The WISH Centre who work with young people who self-harm is an important safeguarding partner in Harrow. A review of their services, undertaken by the Centre for Mental Health in 2018, found:

- ❑ 81% recovery rates for young people who self-harm, with a positive measurable change
- ❑ Markedly reduced A&E attendances for self-harm
- ❑ Across a whole range of conditions (self-harm, suicidal ideation, abuse, trauma, anxiety/stress, depression/sadness) there was a statistically significant improvement in a range of outcomes, particularly coping mechanisms and emotional resilience
- ❑ Savings for health through a reduction in the number of GP appointment, A&E attendances, medication prescription and paramedic callouts; savings for Children Social care through a higher rate of sustained closure in Child Protection Plans and a reduction in social services referrals; and for schools through; a reduction in the demand for in-school support particularly pastoral support
 - Young people had improved body confidence, demonstrated an ability to form healthier relationships and indulged in less risk-taking behaviour
 - The WISH approach – peer support networks and evidence based psychological therapies – were both found to have a positive impact on young people.

The review concluded that WISH's approach is successful and replicable, and is likely to be cost effective:

“Young people describe a project that is holistic, that focuses on their strengths and in building resilience, and that does so at the young person's pace”

“Young people collaborate in their risk-assessment plans”.

The Centre for Mental Health is calling for CCGs and local authorities across the country to commission services similar to that provided by WISH to support young people struggling with self-harm.



“I still have negative experiences & thoughts but, like, I am able to deal with them much better than before”

“When there were some older (young people) they were more willing to share things and you could ask them for advice”

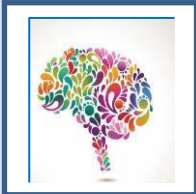
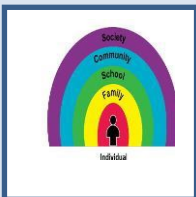


Young person in focus group

OUR NEW PARTNERSHIP PRIORITIES 2019-2021 HARROW STRATEGIC SAFEGUARDING PARTNERSHIP



‘THINK WHOLE FAMILY’



| | |
|--|---|
|  <p>Preventing harmful behaviours</p> | <p style="text-align: center;">1. MENTAL WELLBEING</p> <ul style="list-style-type: none"> • Promote an early intervention and prevention approach to mental ill health with a focus on harmful behaviours, including self-harm and suicide • Promote collaboration between services and agencies at all stages of assessment and intervention • Consider how multiple vulnerabilities impact mental ill health such as substance misuse and domestic abuse |
|  <p>Through a welfare lens</p> |  <p style="text-align: center;">2. CONTEXTUAL SAFEGUARDING</p> <ul style="list-style-type: none"> • Target the contexts in which that abuse occurs, from assessment through to intervention • Develop partnerships with agencies who have a reach into extra-familial contexts e.g. transport providers, retailers, residents associations, parks and recreation services • Monitor outcomes of success in relation to contextual, as well as individual, change |
|  <p>Early identification of risk</p> | <p style="text-align: center;">3. DOMESTIC ABUSE</p> <ul style="list-style-type: none"> • Ensure all relevant sectors have access to training and awareness training • Promote vigilance to the fact that age, gender, ethnicity and ability do not discriminate in terms of who can become a victim or perpetrator of domestic abuse • Ensure early intervention and appropriate support for victims • Promote access to specialist intervention programmes for perpetrators |
| <p><i>Considering the voice of children and those with care and support needs in everything we do</i></p> | <p style="text-align: center;">Safeguarding Guidance:</p> <p>Adults: http://www.harrow.gov.uk/safeguardingadults</p> <p>Children: www.harrowlscb.co.uk</p> |

Appendix 2.

HSCB BUDGET 2018 TO 2019

| INCOME | |
|--|-----------------|
| Harrow Council including Business Support | -130,226 |
| Police / MOPAC | -5,000 |
| National Probation Service and CRC | -1,000 |
| London Fire Brigade | -1,000 |
| Royal National Orthopaedic Hospital | 0 |
| Cafcass | -550 |
| Central and North West London NHS Foundation Trust | 0 |
| Harrow Clinical Commissioning Group | -11,000 |
| London North West Healthcare Acute Services & Community Services | -11,000 |
| Training Income | -7,560 |
| Sale of USBs | -10 |
| External Consultancy | 0 |
| Total Income | -167,346 |

| EXPENDITURE | |
|--|----------------|
| LSCB Chair | 18,011 |
| Professional Support (full time BM; part time L&D co-ordinator) | 73,253 |
| Training Admin (.5 FTE) | 24,244 |
| SCRs and Independent Auditing | 351 |
| Voluntary Outreach work | 13,100 |
| Staffing & consultancy expenditure Total: | 128,959 |
| | |
| Council charges | 23,620 |
| Annual Conference | 4,690 |
| Training Providers | 1,756 |
| Venue Hire | 2,791 |
| LSCB Website & 3 year Chronolator™ License | 2,990 |
| Publications, Printing, USB Production | 130 |
| Catering & Misc | 2,410 |
| Delivery Costs Total: | 38,387 |
| Total Expenditure: | 167,346 |

Appendix 3 HSCB BOARD MEMBERSHIP AND ATTENDANCE – APRIL 2018 TO March 2019

| Representing Organisation | Title | Attended total of |
|--|---|-------------------|
| HSCB | Independent Chair | 4/4 |
| Lay Member | Vice Chair | 3/4 |
| Political Accountability | Lead Member children & Young People | 4/4 |
| Harrow Council, People Services | Corporate Director | 4/4 |
| Harrow Council, Public Health | Director of Public Health | 2/4 |
| Harrow Council, Education | Divisional Director | 0/4 |
| Harrow Council, Children with Disabilities | Service Manager 0-25 Disabilities Service | 3/4 |
| Harrow Council, Housing & Resident Services | Senior Professional | 3/4 |
| Metropolitan Police | Detective chief Inspector or Representative | 4/4 |
| HSCB Chair, Case Review Sub Group | Associate Director, Safeguarding & Safety, CNWL | 3/4 |
| HSCB Chair, Quality Assurance Sub Group | Service Manager, Quality Assurance (LA) | 3/4 |
| HSCB Chair of Learning & Development sub Group | Lead for special Needs – Shaftesbury School | 4/4 |
| HSCB Chair, Policy & Procedures Sub Group | Quality Assurance Officer (LA) | 0/4 |
| HSCB Chair, Violence, Vulnerability & Exploitation Sub Group | Head of Service, Children' Access Team | 3/4 |
| Harrow CCG | Chief/Assistant Operating Officer | 1/4 |
| Designated Nurse | Designated Nurse | 4/4 |
| Central North West London healthcare Foundation Trust | Associate Director (also Chair of Case Review Sub Group) | 3/4 |
| North West London University Healthcare Trust | Director of Nursing or Representative | 4/4 |
| Royal National Orthopaedic Hospital | Deputy Director of Nursing or Representative | 1/4 |
| West London Drugs Project | Service Manager | 3/4 |
| Sexual Health Services | Consultant Doctor | 1/4 |
| NHS England | Lead for NW London | 0/4 |
| Voluntary Sector | Director, The WISH Centre | 3/4 |
| High Schools | Headteacher, Kingsley High School | 2/4 |
| Infant and Primary | Headteacher, Kenmore Park | 2/4 |
| Independent Schools | Safeguarding Leads for Harrow School and John Lyon School | 3/4 |
| Colleges | Safeguarding Lead Stanmore | 2/4 |
| National Probation Service | Assistant Chief Officer | 2/4 |
| Community Rehabilitation Company | Head of Stakeholders & Partnerships | 3/4 |
| Cafcass | Head of Service | 0/4 |
| London Ambulance NHS Trust | Deputy Station Officer | 0/4 |
| Advisor to the Board | Senior Solicitor, Harrow Legal Services | 3/4 |
| Advisor to the Board | Business Manager | 4/4 |
| Advisor to the Board | Learning & Development Manager (vacant) | 0/4 |

Board Meeting dates: 05.06.18, 18.09.18, 04.12.18 and 05.03.19