



SOUTH RIBBLE, CHORLEY & WEST LANCASHIRE CHILDREN'S PARTNERSHIP BOARD



Thursday, 10th December 2015, 2.00 pm at Town Hall, Market Street, Chorley, PR7 1DP

A G E N D A

Agenda Item		Item for	Intended Outcome	Lead	Time/papers
1	Welcome and Introduction/Apologies	Information	The Chair to welcome members to the meeting and note any apologies	Chair	
2	Minutes of last meeting and matters arising	Action	The Board to note the minutes of the meeting 17 th September and agree any further action on matters arising.	Chair	(Pages 3 - 10)
3	Infant Mortality	Discuss	The Board to receive a presentation of the current issues in reducing infant mortality across Lancashire.	Matthew Stanton, Public Health Co-ordinator, Lancashire County Council	(Pages 11 - 16)
4	Prevent Duty	Discuss	The Board to receive a presentation overview on Prevent Duty	Mike Cooney, Course Co-ordinator - Public Services, West Lancashire College	(Pages 17 - 46)
5	Safeguarding	Information	The Board to receive any updates from the LSCB Information from the recent Serious Case Review	Chair	

			to be shared	
			Possible report from the recent Ofsted Inspection to also be shared	
5a	Child Sexual Exploitation	Discuss	Update re CSE Sub-Group	Karl Turner, Children's Trust Development Officer, LCC Chair
6	Wellbeing, Prevention and Early Help	Information	Update on next phase of Working Together with families / Troubled Families	
			Prevention and Early Help Core Offer	
7	Raising Aspirations Project	Discuss	The Board to receive a presentation and update on current options and agree a way forward	Sarah Tinsley, Sally Hopkins, Young Enterprise
8	Young People Participation Proposals	Discuss	A discussion around current engagement and events taking place that we could possibly lead into to take place.	Chair
9	Any other business	Discuss		Chair
10	Future CPB meeting dates	Information	Thursday 10 March 2016, 2pm – Wheel Room, Civic Centre, South Ribble	Chair
			Thursday 9 June 2016, 2pm – West Lancs, To be confirmed	



CHORLEY, SOUTH RIBBLE & WEST LANCASHIRE CHILDREN'S PARTNERSHIP BOARD
NOTES OF MEETING HELD ON THURSDAY, 17 SEPTEMBER 2015 AT YOUTH ZONE, SKELMERSDALE

Present:

Sarah Ashcroft	Co-ordinator	Chorley Council
Steph Critchley	Locality Manager West Lancashire	Lancashire County Council
Michele Dacre	Senior Probation Officer	Cumbria & Lancashire Community Rehabilitation Company
Rebecca Fisher	YOT Practice Manager	Lancashire County Council
Mark Gaffney	Director	South Ribble Borough Council
Cllr Yvonne Gagen	Deputy Leader	West Lancashire Borough Council
Cllr Michael Green	Cabinet Member	South Ribble Borough Council
Fiona Grieveson	Headteacher	Kingsbury School
Rebecca Huddleston(Chair)	Head of Policy & Communications	Chorley Council
Amanda Jakeman	Employer & Partnership Manager	DWP
Cllr Mark Jarnell	Councillor	Chorley Council
Graham Lowe	Schools ICT Centre Manager	Lancashire County Council
Sheila Minchin	Interim Director of Quality & Support	West Lancashire College
Cllr Bev Murray	Councillor	Lancashire County Council
John Nelson	Head of Leisure & Cultural Services	West Lancashire Borough Council
Lili Rushton	Prevention, Early Help Co-ordinator	Lancashire County Council
Karl Turner	Children's Trust Development	Lancashire County Council
Simon Tait		Intrahealth
Debra Wilson	Clinical Lead Universal Service	LCFT

Apologies:

Julie Brown	Headteacher	Longton Primary School
Joanne Dann	Assistant Chief Executive	Cumbria & Lancashire Community Rehabilitation Company
Maria Gilling	Principal	West Lancashire College
Jo Keay	Inspector	Lancashire Constabulary
Cllr Mark Perks	Councillor	Lancashire County Council
Jean Rollinson	Head of Safeguarding	Chorley, SR & West Lancs CCG

ACTION BY

1 WELCOME AND INTRODUCTION/APOLOGIES

The Deputy Chair welcomed everyone to the meeting and introduced Rebecca Huddleston as the newly appointed Chair. The Deputy Chair explained that Sarah James has now



moved roles and the responsibilities of Partnerships was now being managed by Rebecca which includes the Children's Partnership Board meeting.

Rebecca thanked the Deputy Chair and invited attendees to introduce themselves.

2 MINUTES OF LAST MEETING AND MATTERS ARISING

The Board agreed the minutes of the meeting held on 21 May as a correct record.

Karl Turner reminded members that inductions are available if anyone would like to attend one to contact Karl Turner or Sarah Ashcroft.

3 PAN LANCASHIRE E-SAFETY STRATEGY

Graham Lowe, Chair, Pan-Lancashire LSCB eSafeguarding Group attended the meeting and delivered a presentation, a copy is included with the minutes for information.

Graham gave an overview around online safety, including gaming, social media and the influences they can have on young people. Graham explained that the issues are Lancashire wide and he summarised the Pan-Lancashire eSafeguarding Strategy 2014-2016 which has been put together to address eSafeguarding issues with a common approach across all agencies.

Graham advised that an eSafety Live session is due to take place in January 2016, these sessions run for 2 hours and have taken place each year since 2012. It gives the LSCB an opportunity to gather information of where delegates feel they need help and support.

They have produced a template guide for schools to include in newsletters, websites etc which is used to raise parental/community awareness. If anyone would like a copy of the template please let Graham know.

Graham recommended Online Compass for use for non-school organisations and 360 Safe for Schools, this is a self-review tool and is free to use. If you want to receive accreditation you will pay for the service.

The eSafety live session is being held on 12 January 2016 at the Woodlands in Chorley, and he encouraged all organisations to send a representative.

Graham advised that he could visit organisations to deliver



presentations to groups of staff or parents, please contact Graham directly for this.

4 SAFEGUARDING

No one was in attendance from the LSCB as they are currently part of the Ofsted inspection taking place. The Chair asked if anyone had anything to raise. A report had been provided with the agenda.

The report was noted.

Karl Turner explained that the two Serious Case Reviews and briefings are available via the link included on the LSCB summary report, there was some learning for the LSCB from the reviews.

Karl mentioned that there had also previously been a 7 minute briefing which is on the latest e-bulletin.

5 CHILD SEXUAL EXPLOITATION

The Chair advised that CSE is now a standing item on the agenda. She asked if everyone could be reminded to roll out the e-learning via the link on the agenda.

The Chair had attended the Trust Board meeting earlier in the week and advised that there had been an update on each district. As at 1 September 12,261 partners had completed the e-learning across Lancashire.

The Chair advised that it had been reported that the schools uptake had been lower than expected, although it had been noted that groups of staff may have been completing the training together and so may not be a true reflection of numbers.

The stats were as follows:

Chorley under 7%
South Ribble 3%
West Lancs 5%

This information is also on the Children's Trust website.

Debra Wilson advised that the LCFT had now put the training on their internal system for staff to access and that maybe figures weren't being fed to LCC if they weren't completing it on the LCC website.



John Nelson agreed that this was also the case at West Lancs as there had been some issues logging into the LCC website.

Karl Turner confirmed that this had been a problem, and therefore the figures reported are most likely under representing and in fact the figures should be much higher.

The Chair to report back to the Trust Board.

RH

Karl Turner advised that he had attended the second of the CSE Task and Finish Group and this is ongoing. They are looking to produce another action plan, a further meeting has been arranged to align action plans. Karl raised concern that he felt the group should be Task and Finish but appears to be ongoing.

Fiona Grieveson asked when the date of the meeting is as she wanted to attend but wasn't aware. Karl to advise.

KT

6

PREVENT DUTY AND CHANNEL PROGRAMME

The Chair introduced this item and explained that the paper had come into place on 1 July 2015 and was advice for schools and child care providers.

The Chair recommended a presentation by the Police which had been shared at the Trust Board meeting it can be found on the following link:

<http://www.lancashirechildrenstrust.org.uk/calendar/views/entries/showAtt.asp?id=47047>

Fiona Grieveson advised that her schools safeguarding policy now includes the Prevent Duty.

Sheila Minchin advised that staff at West Lancs College have all received training on Prevent Duty. They have developed a train the trainer model, Sheila suggested that he could attend our next meeting.

John Nelson expressed the importance of raising staff awareness and said the National College of Policing have developed an online training package, this can be accessed via the following link:

http://course.ncalt.com/Channel_General_Awareness. John strongly recommended this training it takes approximately 25 minutes to complete but is a very useful introduction into the prevent awareness.

The Chair mentioned that this item was also discussed at the Trust Board meeting and it was explained that the risk will vary across Lancashire, with Blackburn with Darwen and Burnley



being the two districts identified as tier 2 medium threat area.

Each Local Authority and Police force will be able to provide detailed information for a specific local area.

www.preventforschools.org was recommended as a good resource.

It was agreed to ask the trainer from West Lancs College to attend the next meeting to deliver a presentation.

SA/SM

7

WELLBEING, PREVENTION AND EARLY HELP

Stephanie Critchley introduce herself and explained that this was a new role for her after coming back to work from maternity leave, her role is the Locality Manager for West Lancs. Stephanie explained that phase 2 of the WTWF has been confirmed and LCC has a target of 1,420 families to work with by March 2016. Stephanie will be responsible for implementing the programme but is still waiting for more details. The processes will be shared in the next couple of weeks.

Stephanie explained that the criteria has been widened as follows:

- All families part of CAF process
- Parent/s, child with criminal record/conviction
- Not regularly attending school
- Need help (no age criteria)
- Child Protection Action Plan
- Worklessness
- Domestic violence and abuse
- Health issues

Families will need to meet two or more of the above criteria and give consent to be part of the programme.

Stephanie explained that they are collecting data through children's centres. They are also working with DWP, Lynne Hayes in the South. It will start imminently although as yet there is no date.

Stephanie advised that she has no detail from the last round, she will be committed to attend the Partnership Board meetings and if there are any questions she can't answer she will take these back to senior managers.

Lili Rushton discussed the prevention and early help quarterly report for Chorley and South Ribble and gave an overview of



the use of the core offer.

The Quarter 1 report for Chorley and South Ribble wasn't included with the agenda. A copy is included with the minutes.

A copy of the small grants application form is attached for information.

8 RAISING ASPIRATIONS PROJECT

The Chair presented the item and gave an overview of the report that had previously been written by Andrea Smith who was no longer the Co-ordinator of the Board.

The Chair went through the scope and options of the report and asked members of the Board how they felt we could take this forward.

Karl Turner explained that this is on the action plan for the board but when this was added there was more capacity now there are three districts we don't have the capacity anymore.

Mark Gaffney agreed that capacity is an issue. Mark expressed that it is a very good project and it should accelerate what should be going on in relation to the City Deal and is therefore relevant for all.

Karl Turner suggested that a meeting with Jennifer Clough from South Ribble and possibly Sarah Tinsley from Young Enterprise be organised with Karl Turner and Sarah Ashcroft. After this meeting an update will be able to be given at the next meeting.

KT/SA

9 YOUNG PEOPLE PARTICIPATION PROPOSALS

Karl Turner presented the item and explained the paper which was included. He explained that as a board we are looking at how we can involve young people. Karl explained that several meetings have already taken place and we were now looking at our options.

We could hold an event which could look at our priorities with the focus on one priority a suggestion was 'feel safe'. Karl spoke about the problems around needing to hold an event in the 3 districts and the issues around resourcing an event.

Another option could be to have a survey put together which LCC could host.

John Nelson suggested attending an event/presentation that is already taking place and possibly link in with the Young



Peoples Service.

Fiona Grieveson suggested contacting school parliaments as they run events, Fiona felt that the response rate may be better if we did something on-line.

Amanda Jakeman suggested we attend the West Lancs Jobs Fair.

The Chair asked if everyone could go back to their organisations and come back to the next meeting with details of their current engagement with young people and a list of dates of events that are scheduled to take place.

10 CHILDRENS NASAL FLU VACCINATION PROGRAMME

Simon Tait from Intrahealth attended the meeting. He explained that Intrahealth are rolling out the NHS flu vaccination to schools across Lancashire. It is available to all Year 1 and Year 2 children.

11 ANY OTHER BUSINESS

The Chair advised that the Annual Conference is taking place on 6 November at the Woodlands in Chorley. There are 7 places available from this group. Further details will be sent out in due course.

Karl advised that the CSE sub group had mentioned that a Training Package is being put together designed as train the trainer. Once this has been received this will be sent out.

12 A TOUR OF THE YOUTH ZONE WILL FOLLOW AT THE CLOSE OF THE MEETING

13 FUTURE CPB MEETINGS DATES

Thursday 10th December 2.00pm – 4.00pm, Committee Room 1, Chorley Town Hall

Thursday 10th March 2.00pm – 4.00pm, Wheel Room, Civic Centre, West Paddock, Leyland

This page is intentionally left blank

Discussion Paper – Embedding Infant Mortality into Local Partnerships across Lancashire**Purpose**

The purpose of this paper is to inform the Board of the current issues in reducing infant mortality across the County of Lancashire. The paper is solution focussed and despite the challenges suggests recommendations on moving forward to achieve a rate that is more in line with the national average.

Introduction

The reduction of Infant Mortality is one of five Starting Well priorities for the Lancashire Health and Wellbeing Board. The Children and Young People's Plan is a key mechanism for the delivery, impacts and outcomes of the Starting Well theme of the Health and Wellbeing Strategy, under the governance of the Lancashire Children and Young People's Trust Board. In September 2014, a paper was presented to the Lancashire CYP Trust Board giving an overview of an approach to preventing infant mortality across East Lancashire and Blackburn with Darwen (Pennine Lancashire). This is based on a recent refresh of legacy work from the former East Lancashire Primary Care Trust's Saving a Million Years of Life (SMYL) Programme. The approach taken in Pennine Lancashire is regarded as good practice and the CYP Trust Board now wishes to consider similar work across the County and its associated impacts.

This discussion paper aims to support decision makers in considering an approach to scaling up infant mortality prevention activity within existing resources. Impacts can be easily measured by local intelligence such as Infant Mortality Rates (IMR), effective use of the robust evidence to inform action and consideration of associated risk factors involving both children and adults. The ultimate aim is to achieve demonstrable improvement over a shorter time; scaling up activity by embedding it across existing Lancashire Partnership structures.

The historical and current picture

Reducing Infant Mortality has been a major challenge for Lancashire for some time. It is a sensitive measure of the well-being of infants, children and pregnant women. The Infant Mortality Rate (IMR) has long been regarded globally as an important measure of the health of a community. It is found by calculating the number of deaths in infants under the age of one as a proportion of the number of live births in the same population during the same time period – usually a year. The IMR includes those babies that were alive at birth but did not survive long enough to reach their first birthday; it does not therefore include stillbirths or terminations. The death rate for a small but significant proportion of our infants is consistently higher than the national average. In Lancashire on average, 70 of our infants die each year before reaching their first birthday, which is clearly unacceptable. Although the rates are steadily declining, this is not at the speed or intensity that we would expect in a developed country like England and when compared to similar areas nationally. There are

historical geographical variations with unacceptable health inequalities which see babies of families from the most disadvantaged groups in our communities being more likely to die before their first birthday than those in least deprived communities.

Looking back over the last 10 years (Appendix 1), following the national trend, the County IMR has steadily improved from 5.8 per 1000 live births in 2002/04 to 4.8 in 2010/12. This is in comparison to the England IMR which reduced from 5.2 per 1000 live births to 4.1 during the same time period. If we look at East Lancashire where the rates have been historically high, and therefore contributing negatively to the overall Lancashire picture, there have been positive signs of improvement in more recent years which can be attributed in part to the SMYL Programme activity. For example Pendle, which at one time had the highest rates in the Country, is now no longer in that unenviable position. At its worst, Pendle had an IMR of 9.7 per 1000 live births in 2003/05 and following a steady decline the current rate is 6.3 (2010/12), reducing from 6.7 in the previous 3 year period. This figure is also no longer statistically significantly different against the national rate. Hyndburn has also seen a significant reduction in its IMR in recent years, improving from its worst rate of 8.1 per 1000 live births in 2004/06 to 4.4 in 2010/12.

Burnley however is of most concern. The borough has not seen the same impact and is currently statistically significantly worse than the national rate. Burnley's IMR was at its best in 2004/06 at 5.2 per 1000 live births but it has steadily worsened year on year since then. The current rate is 6.9 per 1000 live births. We could considerably improve the Lancashire picture if we put additional effort into looking at outliers like Burnley (proportional universalism) whilst keeping the trend moving downwards in all 12 districts. Other boroughs outside East Lancashire which are worthy of additional effort are Preston, South Ribble, Fylde and Wyre. Infant Mortality Rates in these boroughs are not statistically significantly different from the England average but they are all negatively increasing.

Opportunities for achieving improvement

A strong evidence base shows that the preventable elements of infant mortality are complex, linking more to the lifestyle, environment and behaviour of adults than children. This includes substance misuse, obesity, domestic violence and abuse plus adult mental and emotional health and wellbeing, housing and overcrowding. Of course there are preventable elements that relate to infants but are outside of their direct control such as breast feeding, low birth weight, child poverty and teenage conceptions. Experience of working across a complex geography like East Lancashire has reaffirmed the importance of integrating infant mortality prevention into the mainstream work of existing partnerships as well as in service delivery, with a focus on disadvantaged areas and groups. This approach allows for local action to be owned and developed in line with the diverse and different health needs of local communities and those outcome measures that require the most attention (Appendix 2).

Through the Pan-Lancashire Child Death Overview Panel process we now have a better understanding of the circumstances in which every child dies, and more importantly which deaths are modifiable and/or preventable. Looking at infant deaths in this way enables us to put measures in place to assure a reduction by tackling the 'near misses' and ensuring that infants stay alive and well beyond their first birthday, becoming the best they can be into early adulthood. Sharing sensitive analyses and interpretation of data allows us to look together at the 'causes of the causes' at the lowest level, but there is a requirement to suppress numbers at ward level (below 5) to assure anonymity, particularly in areas such as Ribbles Valley and Lancaster. We now have disaggregated data – rates and numbers- translated into locality infant mortality profiles showing the pattern of infant deaths going back many years at ward level.

In the Central Locality, these profiles have been used effectively in recent months to informally bring partners together, focusing on those communities where infant deaths are highest. In Preston, efforts will focus on tackling overcrowding and improving housing standards in targeted wards, as well as a 'baby safe' engagement training event. Work in this locality has also been informed by a summary of associated risks to enable local consideration of what else needs to happen through joined-up partnership action to achieve sustainable improvements (see Appendix 1).

This approach can be used effectively within existing resources across Lancashire, preventing the need to set up more groups. In West Lancashire, the infant mortality profiles are being shared with the local Health and Wellbeing Partnership to develop a better understanding of the topic and allow consideration of their priority areas and the potential impact on reducing IMRs. The recent re-configuration of 12 Children's Trust Partnership into 5 Children's Partnership Boards presents an ideal opportunity for integrated partnership action and deliver assurance.

Recommendations

Lancashire CYP Trust Board is asked to:

- 1. support an integrated approach to reducing infant deaths through existing locality partnerships rather than create new ones**
- 2. ensure that joined-up action to tackle infant mortality is regularly reported to the Lancashire CYP Trust Board through the 5 Children's Partnership Board LCC representatives**
- 3. ensure appropriate links are made to local Health and Wellbeing Partnerships and Community Safety Partnerships to ensure existing plans contribute collectively to reducing infant deaths in each locality**

(All partnerships in locality areas will have access to infant mortality profiles and understand their meaning and evidence base for targeted action)

Appendix 1 – Overview of Lancashire Infant Mortality Rates and Associated Risk Factors

The Infant Mortality Rate (IMR) is normally presented as a 3 year rolling average as numbers are too small to calculate rates based on single years. Between the 10 year period 2002-04 and 2010-12 the overall number of infant deaths across Lancashire County reduced by 15; the highest number of infant deaths were seen in 2004-06 (n=234). Across Lancashire districts, between the same periods, the number of infant deaths increased in 4 out of 12 districts. During the 2009-11 period there were 203 infant deaths and during the 2010-12 period there were 200 deaths. There were 148 less live births during the 2010-2012 period, compared with 2009-11 period. Although there were 3 less deaths in the 2010-12 period, less live births during this period may have contributed to the 2010-12 rate being significantly higher than the England rate.

Between 2004-2002 to 2010-12 Lancashire's infant mortality rate has decreased by 17% compared to a 21% decrease in England. Between 2009-11 and 2010-12 Lancashire's infant mortality rate has decreased by 2% compared to a 4% decrease in England. Table 1 presents the infant mortality rates over the years and differences from the England and Lancashire average.

Table 1: Lancashire Infant Mortality Rates per 1000 Live Births at district level 2001/04 to 2010/12

	2002-2004	2003-2005	2004-2006	2005-2007	2006-2008	2007-2009	2008-2010	2009-2011	2010-2012	% change between 2002-04 and 2010-12	% change between 2009-11 and 2010-12
Burnley	6.7	7.3	5.2	5.3	5.3	5.5	6.4	6.9	6.9	2%	0%
Chorley	5.0	3.7	4.2	4.2	4.9	5.5	6.1	5.2	4.6	-9%	-11%
Fylde	5.2	4.4	4.4	3.8	3.8	3.2	4.1	5.0	5.8	13%	16%
Hyndburn	6.1	7.4	8.1	8.1	5.9	5.5	4.0	4.5	4.4	-29%	-3%
Lancaster	5.4	6.9	6.3	5.4	4.9	3.9	4.2	3.5	3.4	-37%	-2%
Pendle	8.1	9.7	9.1	8.0	7.1	6.9	7.2	6.7	6.3	-22%	-6%
Preston	8.6	8.4	6.6	6.1	5.6	5.4	5.2	5.3	5.7	-33%	9%
Ribble Valley	4.6	4.6	4.0	1.3	2.0	5.8	6.0	4.9	0.7	-84%	-85%
Rossendale	3.6	2.2	3.3	5.3	6.8	5.9	4.6	3.5	3.2	-12%	-10%
South Ribble	3.3	4.1	5.7	4.6	4.4	1.9	2.2	2.7	4.0	22%	50%
West Lancashire	5.3	4.5	5.4	4.7	5.2	4.6	5.5	5.5	4.9	-8%	-11%
Wyre	4.1	3.4	6.0	6.5	5.7	5.1	3.8	4.8	5.6	34%	15%
Lancashire	5.8	5.9	5.9	5.6	5.3	4.9	5.0	4.9	4.8	-17%	-2%
England	5.2	5.1	5.0	4.9	4.7	4.6	4.4	4.3	4.1	-21%	-4%

Source: PHOF

	Significantly above England
	Similar to England
	Significantly below England

Associated Risk factors

For the Central Locality, as part of the infant mortality work, the public health team considered associated risk factors to enable identification of wards where joined up action could impact on reducing infant deaths. The following 10 indicators were agreed initially as risk factors to be used for the local profiling (recognising that the risk factors included were dependent on availability of ward data):

1. Child poverty
2. Infant deaths 2003-2013
3. Reception obesity
4. Year 6 obesity
5. Teenage conception 09-11
6. Low birth weight births
7. Adult obesity
8. Overcrowding
9. Fertility
10. Children achieving a good level of development at age 5

Once a list of risk factors had been agreed, for each district:

1. Ward level data was obtained for all the 10 risk factors.
2. Each ward was then ranked for every risk factor and
3. For each ward an average of all ranks (from step 2) was calculated
4. The wards with the higher average ranks were deduced to have higher risk factors for infant mortality.

Appendix 2 – Oversight of Infant Mortality related indicators across existing Lancashire Partnerships

Children's Trust Partnership Boards
Outcome indicator
Access to antenatal care
Low birth weight at term
Breast Feeding rates
Smoking at time of Delivery
Childhood obesity (Reception/Year 6)
Children in poverty
Infant Mortality
Teenage Conceptions
District Health and Wellbeing Partnerships
Long term unemployment
Mental Health and emotional wellbeing
Substance misuse
Housing and overcrowding, homelessness
Lifestyles/behaviour - obesity, poor nutrition, physical inactivity
District Community Safety Partnerships
Domestic abuse
Violent crime
Substance misuse

WRAP

(Workshop to Raise
Awareness of Prevent)
Part 1

WRAP

Aims:

Intended learning outcomes:

Gain an understanding of PREVENT to protect and support vulnerable individuals from radicalisation

Identify the changes in the roles and responsibilities

Introduction

WRAP is a Workshop to Raise Awareness of Prevent through Channel to a counter terrorist activity known as CONTEST.

Key Terms:

Contest / Prevent / Channel

CONTEST aims to reduce the risk we face from terrorism so that people can go about their lives freely and with confidence.

This is made up of the four Ps = Protect / Prepare / Pursue / and Prevent

Prevent:

Prevent is the Government's strategy to stop people becoming involved in violent extremism or supporting terrorism, in all its forms. Prevent works within the non-criminal space, using early engagement to encourage individuals and communities to challenge violent extremist ideologies and their behaviours.

Channel:

Channel is an early intervention multi-agency process designed to safeguard vulnerable people from being drawn into violent extremist or terrorist behaviour.

Channel works in a similar way to existing safeguarding partnerships aimed at protecting vulnerable people.

Counter-Terrorism & Security Act 2015

- The Counter Terrorism and Security Act 2015 has introduced the Prevent Duty for various bodies including all FE colleges, adult education providers and independent learning providers to carry out PREVENT duties.
- The Prevent Duty has "due regard to the need to prevent people from being drawn into terrorism" Anti Terrorism and Security Act 2015 : Schedule 3, Section 21

Counter-Terrorism & Security Act 2015

Prevent duties include:

- Establishing a single point of contact for Prevent
- Assess risks of learners, vulnerable adults being drawn into terrorism
- Develop and action plan to reduce risk
- Train staff (and learners) to recognise radicalisation and extremism
- Refer vulnerable people to the Channel process
- Prohibit extremism speakers and events that promote radical ideology

Contest

Counter-terrorism methods

Counter-terrorism refers to the practice, techniques, and strategies that governments, military, police and business organisations use to combat or prevent terrorism.

- The UK uses a strategy named CONTEST that aims to reduce the risk to the UK and its interests overseas from terrorist attack.

CONTEST has four areas of work:

- **Prevent** – aims to stop people becoming terrorist or supporting terrorism. **This is about taking action before any criminal activity has taken place**
- **Pursue** – aims to disrupt and stop terrorists attacks, wherever possible by prosecuting those who have engaged in terrorist related activity
- **Protect** – aims to strengthen our protection against a terrorist attack in the UK or interest overseas and reduce our vulnerability
- **Prepare** – aims to mitigate the impact of a terrorist attack where that attack cannot be stopped

Government Counter Terrorism Strategy

CONTEST (4 P's)

PROTECT



Strengthen our protection
against a terrorist attack

PREPARE



Mitigate the impact
of a terrorist attack

PURSUE



Stop terrorist attacks

PREVENT: aims to stop people becoming terrorist or supporting terrorism.

This is about taking action before any criminal activity has taken place

Counter-Terrorism & Security Act

We all have:

“due regard to the need to prevent people from being drawn into terrorism”

This is done through a multi-agency approach through:

LOCAL AUTHORITIES

POLICE

COMMUNITY AND VOLUNTARY
SERVICES

EDUCATION

PRISON SERVICE

YOUNG OFFENDING TEAMS

EMERGENCY
SERVICES

UK BORDER
AGENCY

HEALTH

SOCIAL SERVICES

ADULT AND CHILDREN SERVICES

PROBATION SERVICES

What is the current threat level?

- **Critical** – an attack is expected imminently
- **Severe** – an attack is highly likely
- **Substantial** – an attack is a strong possibility
- **Moderate** – an attack is possible, but not likely
- **Low** – an attack is unlikely

SEVERE

Terrorist Organisations

Al Ghurabaa
Al Shabaab
Boko Haram
 Hamas
 Hizballah
 Irish Republican
 Army
 ISIS / ISIL

Basque Homeland
& Liberty (ETA)

Haqqani Network
(HQN)

Lashkar e Tayyaba
(LT)

Tamil Tigers

Individual case studies

Anders Breivik

John Smith

Nicky Reilly

Younes Tsouli

Pavlo Lapshyn

Richard Reid

Liam Lyburd

Aqsa Mahmood

David Copeland

Timothy McVeigh

Robert Cottage

Michael Adebolajo

Hammaad Munshi

Neil Lewington

Mohammed Emwazi

Mark Colborne

There are many factors that make people vulnerable to being drawn to terrorism: They include? - Vulnerability

Lack of self-esteem
or feeling deprived
and isolated / own
identity

Learning ability

Family tensions /
attitudes

Peer pressure

The internet
social media use

Fundamentalist
religious, race or
political views /
ideology

Health and
mental health
related
circumstances

Personal or
political
grievances /
Foreign policy /
domestic policies

Bereavement

Involved in crime
and anti-social
behaviour

Change of
environment

Bullying

Contest Prevent and Channel

- **Gain an understanding of Contest Prevent and Channel**
- **Identify the changes in the roles and responsibilities of tutors**

Contest

UK Government Strategy

***“To reduce the risk to the UK,
and its interests overseas,
from terrorism
so that people can
go about their lives
freely and with confidence”***

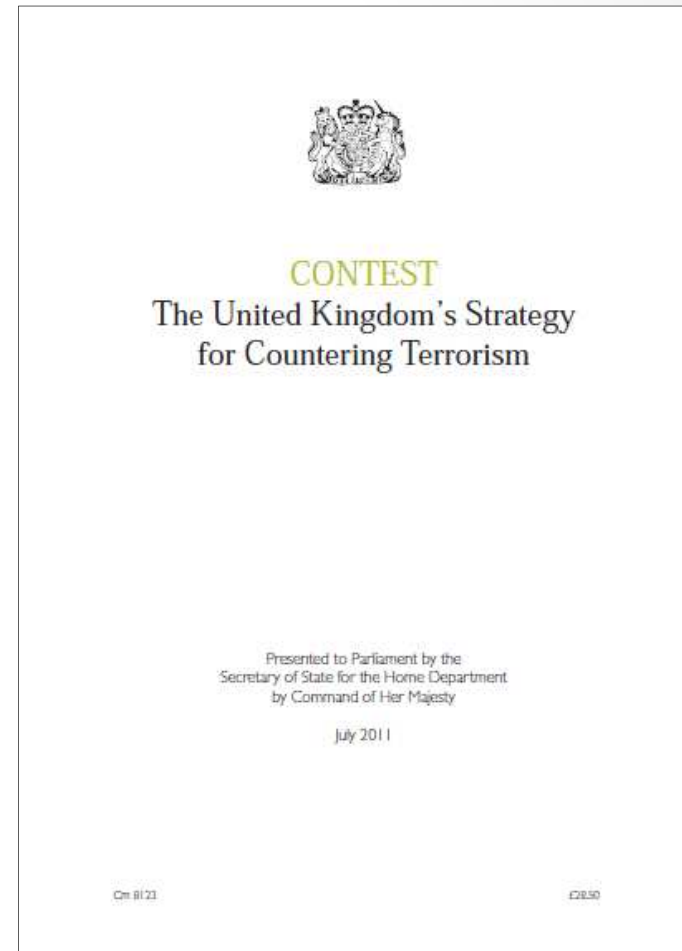
CONTEST aims to reduce the risk we face from terrorism so that people can go about their lives freely and with confidence.

This is made up of the four Ps = Protect / Prepare / Pursue / and Prevent

CONTEST / PREVENT

CONTEST has four areas of work:

- **Prevent** – aims to stop people becoming terrorist or supporting terrorism
- **Pursue** – aims to disrupt and stop terrorists attacks, wherever possible by prosecuting those who have engaged in terrorist related activity
- **Protect** – aims to strengthen our protection against a terrorist attack in the UK or interest overseas and reduce our vulnerability
- **Prepare** – aims to mitigate the impact of a terrorist attack where that attack cannot be stopped



Safeguarding & Channel

Protecting and supporting vulnerable individuals susceptible to radicalisation



Convicted Offenders

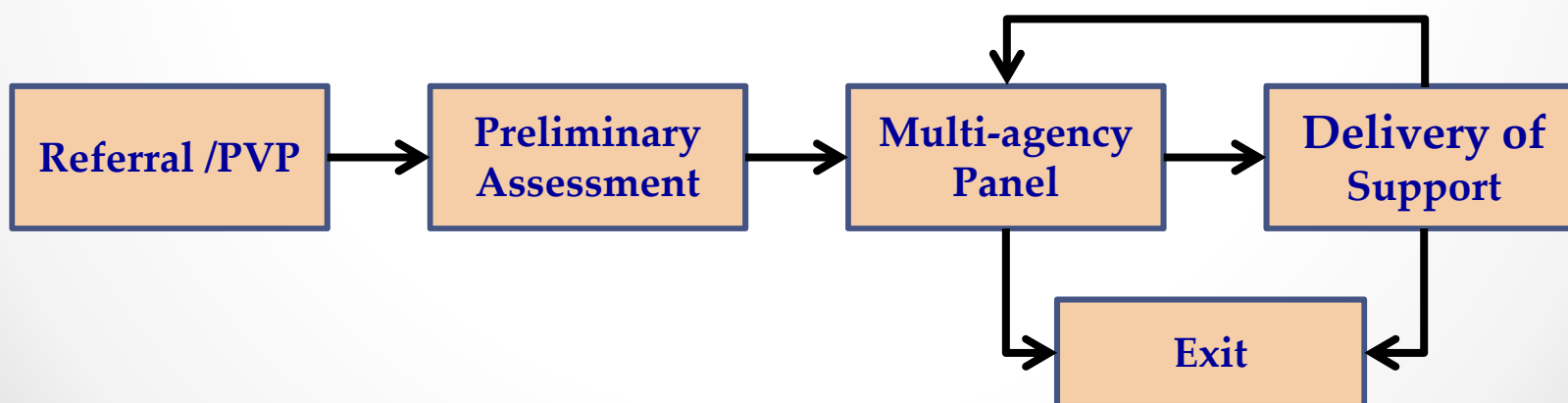


Early Intervention

CHANNEL

Channel is a multi-agency approach to protect people at risk from radicalisation.

- It uses existing collaboration between the police, statutory partners and the local community to:
 - ✓ **identify** individuals at risk of being drawn into terrorism or who are vulnerable
 - ✓ **assess** the nature and extent of that risk; and
 - ✓ develop the most appropriate **support plan** for the individuals concerned
 - ✓ operates in **pre-criminal space** (before and act)



Counter-Terrorism & Security Act

We all have:

“due regard to the need to prevent people from being drawn into terrorism”

This is done through a multi-agency approach through:

LOCAL AUTHORITIES

POLICE

COMMUNITY AND VOLUNTARY
SERVICES

EDUCATION

PRISON SERVICE

YOUNG OFFENDING TEAMS

EMERGENCY
SERVICES

UK BORDER
AGENCY

HEALTH

SOCIAL SERVICES

ADULT AND CHILDREN SERVICE

• PROBATION SERVICES •

Referrals

Referring people who may be suspect –
Your role as a tutor could help:

Activity: Watch Video: Referrals:

From: Govt Wrap 1V referrals: England and Wales

**Make observational notes report back to
group for discussion**

Referrals

Referring people who may be suspect –
Your role as a tutor could help:

Who can make a referral?

Anyone can make a referral.

Referrals come from a wide range of partners including:

- Education – you as a tutor can make a referral
- Health
- Youth Offending Teams
- Police
- Social Services

What happens with the referral?

Referrals are first screened for suitability through a preliminary assessment by the Channel Coordinator and the local authority.

If suitable, the case is then discussed at a Channel panel of relevant partners to decide if support is necessary.

Interventions

Referring people who may be suspect – What can you do?

Raising Concerns

Raising a concern or interventions

If you believe that someone is vulnerable to being exploited or of being radicalised, use the college safeguarding or duty of care procedures this will start the Pre-Prevent Procedures and allow concerns to the appropriate leads be raised to Channel Officers if appropriate.

What can you do? Interventions

By Kelly Simcock (Tim Parry Johnathan Ball Foundation for Peace) and Manwar Ali – Jamas

Watch Video:
From: Govt Wrap 1V -
Interventions



Contact Details

Channel/Prevent Team

DS Maxine Monks Channel Co-ordinator

Office 01772 413029

Mobile 07943050822

CO 12091 Yasmin Zaffar- Channel Officer

Office 01772 412914

Mobile 07949 726039

CEO Lindsay Frew (South-West Lancs)

01772 209733 / 07957 463 593

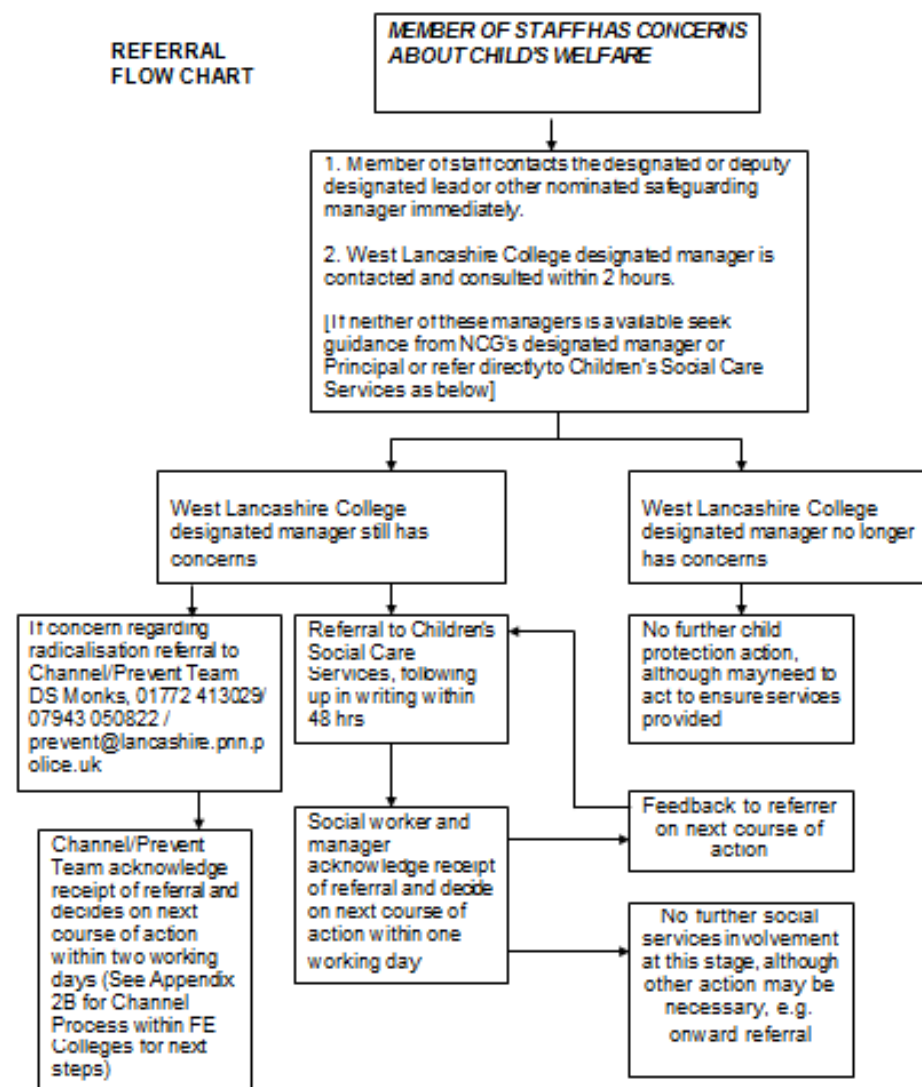
Channel-referrals@lancashire.pnn.police.uk

http://course.ncalt.com/Channel_General_Awareness

WLC

Safeguarding - Pre-Prevent Procedures

(Action Planning)



WLC Contact Details

(Action Planning referral team)

Child Protection Procedures - List of Useful Names and Contact Details

Newcastle College Group – Internal Contacts

Name	Title	Organisation	Tel. Number
NCG DESIGNATED MANAGER			
Lynne Griffin	Group Director Human Resources & organisation Development	NCG	0191 200 4000
DIVISIONAL DESIGNATED SAFEGUARDING LEAD			
Sheila Minchin	Director of Quality & Support	West Lancashire College	01695 52361
DEPUTY DIVISIONAL DESIGNATED SAFEGUARDING LEAD			
Jane Hines	Head of Marketing & Student Services	West Lancashire College	01695 52316
NOMINATED SAFEGUARDING MANAGERS			
Michelle Brookes	Learner Zone Manager	West Lancashire College	01695 52383
Sue Lewin	Nursery Manager	West Lancashire College	01695 52559
Daniel Gorman	Head of Health Care, Education and Foundation Learning	West Lancashire College	01695 52382
Jane Kasper	Interim Programme Area Manager	West Lancashire College	01695 52492
Mike Cooney	Tutor	West Lancashire College	01695 52394
Galina Jordanova Bhebe	Learning Support Assistant	West Lancashire College	01695 52488
Jeff Hilton	Tutor	West Lancashire College	01695 52572
HUMAN RESOURCES			

Other useful contact details – external



Name	Title	Organisation	Tel. Number
ADULT SOCIAL CARE SERVICES (Office Hours)			
	Duty Team	Lancashire County Council	0300 123 6721
INITIAL RESPONSE SERVICE (Out of Office Hours)			
	Duty Team	Lancashire County Council	0300 123 6721
POLICE PUBLIC PROTECTION UNIT (located at local police station) (PPU)			
	Skelmersdale Police Station	Lancashire Constabulary	01695 466335 0845 125 3545 (out of hours)
LOCAL AUTHORITY DESIGNATED OFFICER (LADO)			
	Tim Booth	Lancashire County Council	01772 536694
REFERRAL TO CHANNEL PREVENT TEAM			
	DS Monks	Lancashire Constabulary	01772 413029 / 07943 050822 prevent@lancashire.pnn.police.uk

Other Useful Contact Details - External

WLC Safeguarding - Referral Form

Comes under Child Protection
Procedure and Vulnerable
Adults

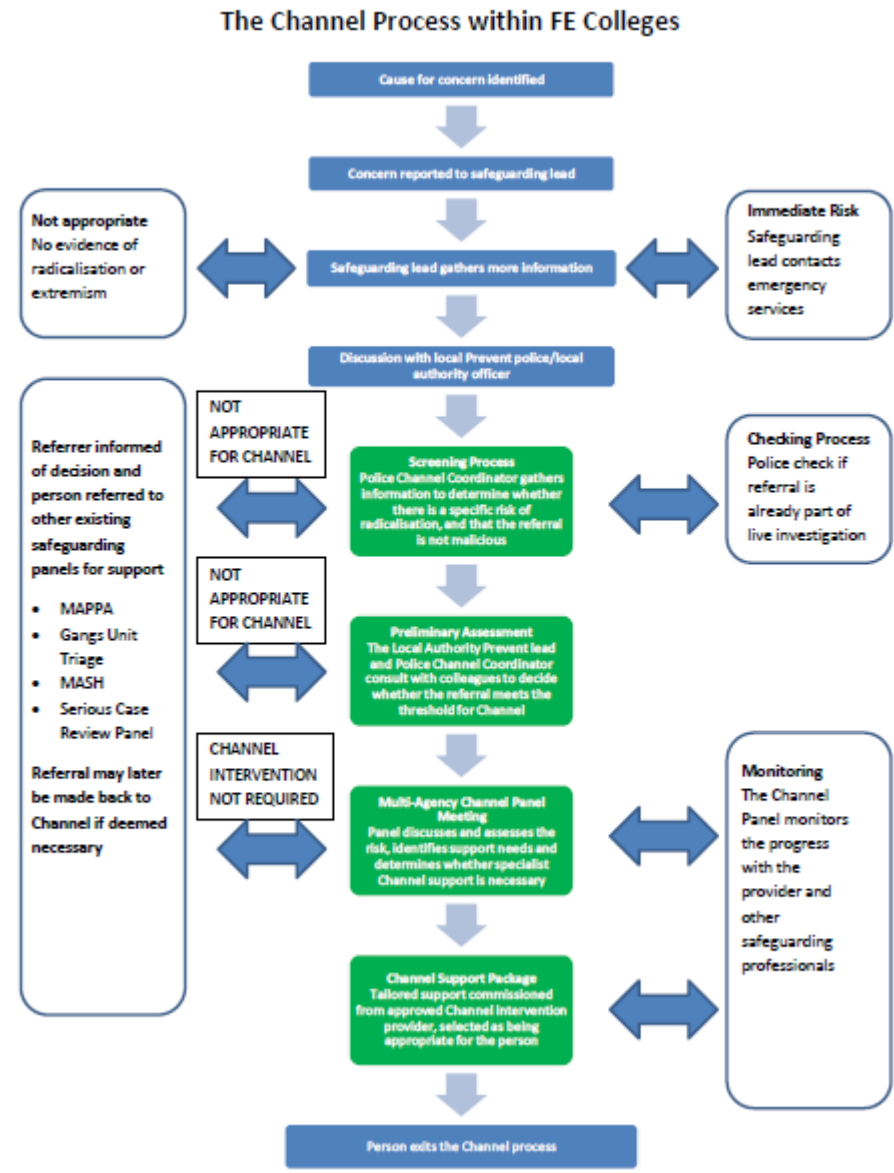
Used to assess vulnerable
learners

WLC Safeguarding Referral Form

Name of Complainant	
Name of Adult who has allegedly been abused	
Date of alleged incident	
Time of alleged incident	
Location of alleged incident	
Account of alleged incident	
Description of any injuries observed	
Reporting Staff Name	
Reporting Staff Signature	
Date	
Action/Outcome to referrer	

Channel Process within FE Colleges

<http://www.preventforfeandtraining.org.uk/sites/default/files/The%20Prevent%20Strategy%20and%20the%20Channel%20Programme%20in%20FE%20Colleges.pdf>



Prevent Duty Risk Assessment / Action Plan
Your Institution will have to develop an action plan
see <http://www.preventforfeandtraining.org.uk/>

Prevent Duty Risk Assessment/Action Plan

with example of possible content

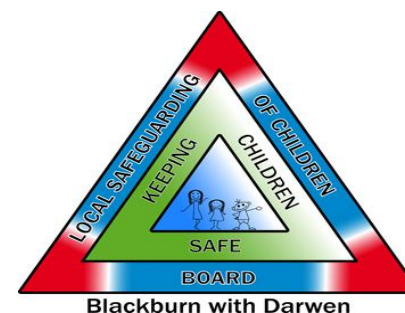
<u>No</u> :	<u>Prevent Vulnerability/Risk Area</u>	<u>Risk</u> <u>Y/N</u>	<u>Action taken/already in place to</u> <u>mitigate/address risk</u>	<u>Owner</u>	<u>When</u>	<u>RAG</u>
1	LEADERSHIP Do the following people have an good understanding of their own and institutional responsibilities in relation to the "Prevent Duty"? <ul style="list-style-type: none"> ➢ Board of Governors ➢ SMT ➢ Staff ➢ Student Union ➢ Safeguarding team 					
2	Partnership 1) Is there active engagement from the institution's Governors, SMT, managers and leaders? 2) Does the institution have an identified single point of contact (SPOC) in relation to Prevent? 3) Does the institution engage with the BIS Regional Prevent Coordinator, Local Authority Police Prevent Leads and engage with local Prevent Boards/Steering Groups at Strategic and Operational level?	Y	1) <u>Governors & SMT</u> provided with briefing by BIS HE/FE Prevent Coordinator on 1/2/15. Arrangements in place to repeat this briefing at SMT Development Day or sooner as necessary. 2) The Prevent Lead for ***** is the Safeguarding Lead ***** He/she is responsible for oversight of the Prevent Action Plan & update to SMT. 3) The institution, thro' the Prevent Lead, meets regularly with the BIS Prevent Lead			

Summary

Prevent duties include:

- Establishing a single point of contact for Prevent
- Assess risks of learners, vulnerable adults being drawn into terrorism – **create and use referral forms**
- Develop and action plan to reduce risk – **create a Prevent Duty Risk Assessment for your institution**
- Train staff (and learners) to recognise radicalisation and extremism
- Refer vulnerable people to the Channel process if necessary – contact **Channel Co-ordinator**
- Prohibit extremism speakers and events that promote radical ideology

Pan Lancashire Local Safeguarding Children Board Child Sexual Exploitation Action Plan 2015-2018



1. Prevent: Public Confidence and Awareness.

The LSCB must engage with communities, to raise awareness and understanding of those at risk of CSE to prevent children and young people from becoming victims.

	Action	Anticipated Outcomes	Lead	Timescales	Current Position	RAG
1.1	<p>Ensure that a range of community engagement activities are delivered in identified localities to increase confidence within our diverse local communities</p> <p>Support national awareness week, prioritise organising an awareness week in 2014.</p>	<p>Greater awareness in the wider community re CSE.</p> <p>Reduction in the risks of CSE to children and young people in diverse communities by increasing their awareness of risks and protective factors in relation to CSE.</p> <p>Increased knowledge and greater confidence amongst members of the public in reporting any concerns regarding CSE.</p>	<p>Partnership CI (Divisions)</p> <p>Team Managers of specialist Pan Lancashire teams</p>	September 2014	<p>CSE Awareness week</p> <p>CSE Week of Action November 10-14 2014</p> <p>Range of activities delivered and focussed on prevention, awareness, enforcement and community engagement.</p> <p>Engagement with Youth Councils</p> <p>"Chelsea's Choice" theatre performance to be delivered in secondary Schools in the Fylde area and to professionals-Feb/March 2015</p> <p>"UR Potential" have been commissioned by Lancashire Young People's Service to deliver pro-active</p>	

					<p>educational sessions to children/young people in Fylde and Wyre. These sessions include 1:1 work around CSE and Emotional Health and Wellbeing. They are currently being delivered in schools and a number of care homes.</p> <p>LCC have commissioned a service for Lancashire maintained schools. This is to raise awareness, develop resilience and enable school staff to include 'sex and relationships' as part of the curriculum and will begin in 2015.</p> <p>Early Support Co-ordinators in each of the seven localities to identify appropriate services for YP at risk of CSE.</p> <p>Targeted services in each area for YP and families who have experienced CSE and</p>	
--	--	--	--	--	--	--

					<p>who require medium term support and services to return to 'main stream' life.</p> <p>CSE Workshops are currently being delivered on a rolling programme for staff to attend across Lancashire Care Foundation Trust. It is also essential that all LCFT staff complete CSE online training.</p>	
1.2	<p>Plan, develop and review public campaigns re CSE and ensure that these are effectively targeted in areas of greater risk.</p> <p>Develop awareness about children who are vulnerable due to MFH or missing from school.</p> <p>Develop partnership working with care providers, including private children's</p>	<p>Evaluation of the effectiveness of public campaigns on the risks of CSE.</p> <p>Increased public confidence of the effectiveness of a multi -agency approach to CSE in Lancashire.</p> <p>Continued improvement in the quality and effectiveness of campaign material in reaching target audiences</p>		September 2014	<p>LYOT are working in partnership with children's residential homes and working with residential care staff to identify where there are young people who may be at risk or potential perpetrators.</p> <p>MFH Co-ordinators and PCSO's establish relationships with care homes and conduct visits.</p> <p>Supporting young people</p>	

	<p>homes.</p> <p>Police and other partner agencies awareness around vulnerability of children who go missing.</p>				<p>though ASSET (assessment and intervention) process. LYOT have an understanding of offending behaviour and risks management</p> <p>Survey sent out in Pendle to 4000 parents by authority to gauge awareness amongst parents. Results to feed back into education programme.</p> <p>Early Break service for drug and alcohol problems.</p> <p>Sexual health assessment and advice and support available via specialist teams.</p> <p>School nurse services available for YP at risk of CSE.</p> <p>YPS has identified some suitable 'peer mentors' available to YP in some areas.</p>	
--	---	--	--	--	---	--

1.3	Agree a multi-agency Media strategy which includes key messages and enables interactions with the media to be well informed and constructive.	A consistent and effective approach when dealing with the media	Nick Evans – Constabulary Corporate Communications	September 2014	Co-ordination of agencies communications departments was provided prior to CSE Awareness week. Head of PPU delivered messages to the media w/c Nov 10 2014	
1.4	Provide a task and finish group to identify effective ways of engaging with local faith and minority ethnic communities, as well as the wider community, and agree messages and materials relating to CSE	Effective liaison with leaders of faith minority ethnic groups in addressing the risk and harm of CSE in diverse communities. Use of messages which are sensitive and appropriate to people of different cultures and faiths and have been agreed with members of faith networks and community leaders.	CSE Strategic Group to arrange membership and evaluate.	September 2015		

1.5	Agencies to organise a bespoke event to highlight safeguarding issues for Strategic leaders across all partners organisations.		Organisational leads	September 2015		
1.6	Promote the most recent guidance on CSE to all partners	The most recent learning and best practice is adopted by partners in a timely way.	CSE Strategic Group	Reviews of guidance required throughout the period of the plan.		

2. Protect: Protecting, Supporting, Safeguarding Victims and Managing Risk.

The LSCB must be reassured that they identify and protect children and young people at risk of, or subject to sexual exploitation and to safeguard, support and prevent them from further harm.

	Action	Anticipated Outcomes	Lead	Timescales	Evidence	RAG
2.1	Ensure that local CSE teams have implemented an integrated process to provide multi-agency support for victims and their families throughout the Criminal Justice System journey.	Each team has implemented and is monitoring the effectiveness of its multi-agency provision Victims and families are better supported through the CJS process	Head of PPU	Review September 2014	Supporting agencies in situ in teams.	
2.2	Ensure that all care providers and providers of education and training in Lancashire have specific arrangements in place to support children and young people who may wish to talk to a member	Raised CSE awareness of frontline child protection professionals within all educational and training settings. Appropriate recognition and respond to disclosures relating to or indicating CSE by professionals. Enhanced early identification and intervention with children and young people at risk of CSE. Greater protection for children and	LSCB Training Sub groups/BDM	December 2014	Wide distribution of LSCB Warning Signs/ Vulnerabilities poster Training delivered by LSCB Open weekend held by Lancashire Constabulary September 2014	

	of staff about worries or concerns of CSE	young people within educational and training communities			<p>Risk assessment to identify areas of need to aid in design of a multi-agency risk management plan.</p> <p>Safeguarding/child protection procedures where appropriate.</p> <p>Community Support workers to deliver 'keep safe ' work with YP and families.</p> <p>CSC staff trained in the 'relational model' of family support work as developed by PACE.</p>	
2.3	Develop and implement arrangements for talking with and listening to the experiences and perspectives of children and young people who have been at risk of or have suffered from CSE.	The understanding of CSE by professionals and members of the community is increased by learning directly from those children and young people who have been at risk and subject to CSE.	Stela Stansfield Children's Society Divisional Teams NSPCC as identified via POLKA	Review March 2015	<p>Focus groups held with Lancashire Constabulary and Children's Society in October to gather feedback</p> <p>LYOT undertake safety and wellbeing plan LYOT undertake Risk Assessment and Management Plans LYOT delivers work on relationships e.g. introduction of girls group</p>	

					<p>in Preston LYOT delivers assessments and interventions with a strong health perspective in terms of a young person's awareness of safety, boundaries and of appropriate relationships</p> <p>LYOT provide information to the Police for Section 11 notices and awareness of when served.</p>	
2.4	Ensure that all partners involved in interviewing children who go missing apply a consistent approach and evidence based methodology, which takes full account of the risk of the child being trafficked for sexual exploitation	Each multi-agency team has implemented and is monitoring the consistency and effectiveness of its approach to interviews	<p>Head of PPU</p> <p>Divisional multi-agency teams</p>	December 2014	RHI's conducted by Children's Society in Lancashire to those not known to Children's Social Care	
2.5	Develop the curiosity of Professionals in respect of the identity of children in	A greater understanding of the risk factors relating to identified vulnerable children as part of routine policing, which enables preventative measures	Organisational leads	December 2014		

	accommodated children's homes in association with risk factors which may make them vulnerable to CSE and trafficking for sexual exploitation.	to be implemented at the earliest opportunity.				
2.6	Ensure that there is a designated member of staff in schools/colleges who children, young people and parents can approach regarding worries or concerns they have re CSE.	Trained, professional dedicated single point of contacts are in place within schools to ensure that those staff are aware of risk factors and provide appropriate and timely responses to CSE.	LSCB Training Sub groups	December 2014		

3. Pursue: Identifying and bringing Offenders to Justice.

The LSCB must ensure that there are processes in place to identify and target perpetrators and potential perpetrators of CSE

	Action	Anticipated Outcomes	Lead	Timescales	Evidence	RAG
3.1	Develop disruption activity by policing teams and partners against suspected CSE perpetrators, including individuals subject to Multi-Agency Public Protection Arrangements and Registered Sex Offenders	Disruption of perpetrators achieved through good collaboration with Intelligence Units. Effective interventions against all suspected perpetrators, including those who cause the greatest risk of harm to the public.	Head of PPU Operations/DCI Intel	May 2014		
3.2	Engage with the hospitality and night time economy industry staff to raise awareness of CSE, perpetrators and victims.	Increased awareness within this workforce, which enhances opportunities to identify and target locations, hotspots, perpetrators and potential perpetrators.	CSE Strategic Group Local Area Based Teams	December 2014	Scoping undertaken in Police divisional teams. Briefings given to Nightsafe staff and licensing department.	

3.3	Further the development of responses to Online offending through the OCAIT (Online Child Abuse Investigation Team).	The teams benefit from the availability of specialist skills and knowledge of the OCAIT team in the investigation and disruption and prosecution of perpetrators	Head of PPU Operations	July 2014		
3.4	Identify dedicated CPS CSE leads in Lancashire	Consistent and positive outcomes of CSE prosecutions	CSE Strategic Group	December 2014		

4. Partnerships: co-location/co-working.

The LSCB must be informed of the partnership arrangements within its borders and the level of specialist commitment by partnership organisations

	Action	Anticipated Outcomes	Lead	Timescales	Evidence	RAG
4.1	Evaluate effective compliance with and use of the Pan Lancashire CSE Standard Operating Protocol.	Clear and agreed arrangements are in place to determine and direct joint working practice in each LSCB area. Continued improvement of responses and the multi-agency approach and tactics to CSE Safeguarding.	Head of PPU	March 2015	LSCB policies and Procedures reflect SOP Blackburn Audit LYOT have a pathway to CSE services/agencies LYOT work to the Missing from Home Protocol and jointly manage cases as appropriate	
4.2	Ensure local strategies and partnerships are reviewed and updated	Strategies and guidance are updated to ensure continued reflection of National Guidance and best practice	To be evaluated through the CSE Strategic group	March 2015	Local partnership groups established in East and Central Lancashire are to be replicated in North and West Lancashire. This multi-agency group meets regularly to share and develop intelligence, review cases and identify any significant common factors and trends.	

4.3	Include British Transport Police in divisional multi-agency teams preferably as a co-located team member.	BTP are fully involved in and contribute to county wide and local initiatives to address CSE.	Head of PPU	September 2015		
4.4	Include a senior representative from BTP in the CSE strategic meetings.	BTP are fully involved in and contribute to county wide and local initiatives to address CSE.	Head of PPU	September 2015		
4.5	Early Identification of risk of CSE through improved multi agency information exchange pathways within MASH.	Children and young people are given appropriate services at the earliest opportunity through our continued multi agency partnership engagement and best practice and development of early action teams	To be evaluated Through the CSE Strategic group. MASH Performance Framework	Review July 2014	Localised weekly meetings includes discussion of those at risk of CSE	
4.6	Develop a pan-Lancashire approach to the deployment of ISVAs which identifies areas and responds to the diversity of needs across the county.	ISVA services are available to vulnerable children in need in all geographic areas within the county.	PCC	September 2014		

4.7	<p>Complete the review of current Strategic Partnership Group, including</p> <ul style="list-style-type: none"> • Membership • Agreed priorities and work plan. • Reporting arrangements to the LSCB 	<p>There is appropriate strategic focus and direction on key issues linked to CSE across Lancashire.</p> <p>The partnership is strengthened by input from a range of key agencies.</p> <p>CSE Pan Lancashire priorities reflect National Guidance and initiatives</p>	Head of PPU and 3x LSCB Business Managers		CSE Problem Profile	
-----	---	---	---	--	---------------------	--

5. Intelligence and Performance Monitoring.

The LSCB must be provided with key data from partner agencies to gain greater knowledge and understanding of CSE in the area.

	Action	Anticipated Outcomes	Lead	Timescales	Evidence	RAG
5.1	Develop and implement multi agency processes for identification of perpetrators and potential perpetrators of CSE, including identification of 'hotspots' for their activity.	<p>Earlier identification of perpetrators and potential perpetrators which reduces the risk to victims and those at risk of CSE.</p> <ul style="list-style-type: none"> Targeting of identified hotspot areas by outreach workers Use of an ancillary order by police <p>Increased awareness in the supervision of offenders.</p>	Constabulary Intelligence Department	September 2014	<p>LANCON CSE problem profile</p> <p>Support networks of partner organisations working collaboratively with victims, potential victims, families and their associates.</p> <p>Support for the monitoring of section 2 notices.</p> <p>Contribution to intelligence gathering in respect of perpetrators to protect children and disrupt these said perpetrators.</p> <p>Assessment through MAPPA of the risk level posed by prisoners prior to potential early release and thus shape their license conditions and</p>	

					level of supervision	
5.2	Undertake a review of partnership data and agree a data set in line with the University of Bedfordshire tool to be presented to the LSCB	Continued monitoring of on-going nature prevalence and responses to CSE Pan Lancashire. Levels of CSE are identified locally and there is a clear understanding regarding location or circumstances where children are particularly at risk of CSE. (Mapping the needs in each LSCB area).	Performance Management Lead- LSCB	July 2014	A CSE data set is agreed and presented twice yearly to the LSCB A Community Safety Partnership profile is currently been written A CSE Diagnostic piece of work is collating what data is available across all agencies in order to provide a clearer statistical picture of CSE	
5.3	Ensure that organised crime groups only involved in CSE are scored to reflect their risk appropriately.	OCGs only involved in CSE do not receive a lower score than those involved in multiple crime types.	Head of PPU	July 2014	Mapped out by Intel analysts	
5.4	Utilise TITAN resources in the mapping of Organised Crime Group's involved in CSE activity	OCG's involved in CSE are accurately mapped to ensure that resources are appropriately directed to effectively to disrupt and prevent their activity.	Head of PPU Operations/DCI Intel	August 2014		

5.5	Collate details of children who are missing and at risk of Child Sexual Exploitation	<p>Improved understanding of the risks and threats to ensure CSE victims are protected.</p> <p>A system of performance and quality assurance of the links between missing and CSE is provided to enable the 3 LSCBs to determine and shape future activity</p>	<p>Constabulary Intelligence Department</p> <p>Performance Management Lead- LSCB</p>	Review September 2014	Undertaken with MFH Co-ordinators sitting within the CSE teams	
5.6	Ensure LSCB monitor work of local teams to reflect issues raised within local problem profiling	Targeted and effective responses to local issues are provided as highlighted with the local CSE problem profile	LSCB Business Managers	June 2014	<p>Twice yearly agenda item on board.</p> <p>LYOT monitor Reoffending data – concerns with CSE are identified.</p> <p>LYOT monitor all young people arrested for CSE particularly around Safeguarding</p>	

6. Leadership.

The LSCB must pride clear leadership is in place that provides a long term vision and aim in relation to CSE.

	Action	Anticipated Outcomes	Lead	Timescales	Evidence	RAG
6.1	<p>Review the Pan-Lancashire strategy to ensure it addresses the themes of:</p> <ul style="list-style-type: none"> • prevention • safeguarding and protection • bringing offenders to justice • public confidence 	<p>Joint Multi Agency responses are provided to Safeguard those children at risk of CSE, reduce risk and keep children and young people safe.</p> <ul style="list-style-type: none"> • Increased number of CSE Safeguarding referrals of victims/potential victims of exploitation. • Increased number of Section 2 abduction notices/sanctioned detections for child sexual exploitation/court disposals and convictions. 	<p>Head of PPU</p> <p>To be evaluated through the CSE Strategic Group in line with the 3 year CSE Strategy.</p>	April 2014	Reviewed / completed	
6.2	Every Agency in the LSCB to identify a lead officer for Child Sexual Exploitation to act as	Multi agency strategic leadership is assured for the delivery of the LSCB CSE Action Plan	<p>Head of PPU</p> <p>3 LSCB</p>	June 2014	Agreed partners include Police; CSC; health; YOT;	

	agency SPOC to support the development and coordination of activity		managers			
6.3	Strategic Partnership to consider and implement any future recommendations from national expert groups, set up following recommendations from APPG and OCC reports	Consistent practice and systems are in line with national best practice	Head of PPU and 3x LSCB Business Managers	Review September 2014		
6.4	The Pan-Lancashire lead for CSE to drive recommendations from the National Child Sexual Exploitation Action Plan benchmarking report 2014 as included in this action plan	The recommendations of the benchmarking report are implemented across the county.	Head of PPU/Chair CSE Strategic Group.	July 2014		
6.5	Agree Service Level Agreement/ Memorandum of Understanding with NCA with respect to tasking and co-ordinating the response to cross border CSE	Consistent defined approach Policy to act as guidance	Head of PPU/Chair CSE Strategic group	July 2014		

	activity					
--	----------	--	--	--	--	--

7. Learning and Development.

The LSCB must ensure that appropriate learning and development opportunities are in place for supervisors and front line staff regarding CSE.

	Action	Anticipated Outcomes	Lead	Timescales	Evidence	RAG
7.1	LSCB to develop and deliver specific CSE multi-agency training.	Safeguarding of children and young people at risk of CSE. Across agencies, all relevant members of staff have a suitable level of skill and knowledge to identify and address the issue of child sexual exploitation.	LSCB Training Sub groups/BDM	Review September 2014	Level 1 CSE E-Learning Package Training figures reflect Multi-Agency completion of the course Specific training delivered in respect of Human Trafficking and its link with CSE. Specific training in relation to CSE in minority ethnic groups.	
7.2	Ensure Multi Agency training is available to all frontline staff interfacing with children and young people.	Vulnerable children in the community are better protected from CSE because the workforce is more able to recognise and respond to CSE. Professionals are confident of our multi Agency CSE service delivery	LSCB Training Sub groups/BDM	Review September 2014	LSCB training for practitioners and managers. Feedback from LSCB Training figures reflect Multi-Agency attendance	

7.3	Review and Improve E-Safety Awareness for Children and Young People	Raised awareness of risk and greater understanding amongst children and young people on self-protection, when using Social Media and IT.	Pan Lancs E Safety Group	Review September 2014		
7.4	Scope and review what CSE educational packages are being delivered in Secondary Schools	A consistent CSE message and approach is provided. Consistent and equitable delivery of Educational resource packages throughout Lancashire is ensured. Increased awareness and understanding of CSE is ensured Links to E safety 3.7		Review September 2014		
7.5	Understand and promulgate best practice, learning, legislation and research to all agency supervisors and frontline staff.	Continual Professional Development of all front line staff. Enhanced quality of service and better outcomes for victims.	CSE Strategic sub group	Review September 2014	YP and families feedback collected over the preceding 12 months analysed and made available to practitioners. YP have been assisted to produce their own anonymous accounts and any learning from this to be available for sharing at agreed forums.	
7.6	Develop training for those charged with	Enhanced Professionalism of Investigations	Constabulary HQ PPU and CID	September 2014		

	investigating offences. <ul style="list-style-type: none"> • ABE • Interviewing 		Training			
--	---	--	----------	--	--	--

NB PLEASE MAKE REFERENCE TO THE SEPERATE ACTION PLANS IN SITU FOR BOTH BLACKPOOL SAFEGUARDING CHILDREN BOARD AND BLACKBURN WITH DARWEN SAFEGUARDING CHILDREN BOARD. BOTH THESE DOCUMENTS CONTAIN EVIDENCE THAT IS SPECIFIC TO THEIR AUTHORITY

RAG

R RED – Little progress made/Significant challenges to delivery identified which need to be overcome.

A AMBER – Making progress but some challenges to delivery need to be overcome

G GREEN - Progressing well/ No challenges to continual delivery identified

Teams

Please note from April 2014 the 6 teams will be amalgamated into the new 3 divisions.

Awaken/Breakthrough – West Division ‘AWAKEN’

Cherish/Deter – South Division ‘DETER’

Engage/Freedom – East Division ‘ENGAGE’.