



Annual Report

2009-2010

www.glasgowchildprotection.org.uk



It's everyone's job to make sure that children in Glasgow are safe

CONTENTS

FOREWORD

AIM OF THE CPC

BUSINESS PLAN

KEY PRIORITIES

OTHER AREAS OF WORK including CPC Sub Groups

- CPC Action Plan
- NORM
- Early Interventions
- Risk Assessment
- IAF
- JIIT
- CPC research
- Communication Sub Group
- Policies, Procedures and Protocols
- Management Information
- Quality Assurance Sub Group
- Significant Case Reviews (SCR's)
- Child Trafficking
- CPC Training Sub Group
- CPC links to Forums

STATISTICAL INFORMATION

FOREWORD

This Annual Report of Glasgow Child Protection Committee (CPC) reports on the period April 2009 to March 2010.

Glasgow CPC has senior management representation from both the statutory and voluntary services and is chaired by an Independent Chair, Donald Urquhart. In addition, the Committee has an Independent Chair to lead on Significant Case Reviews. Howard Llewelyn. During this period there has been a change in the Lead Officer. In June 2009, Gillian Buchanan was seconded to the Scottish Government as the Professional Advisor in the rewriting of the 1998 National Child Protection Guidelines. Fiona Stevenson took up the post of Lead Officer in September 2009 and is currently on secondment from Greater Glasgow & Clyde NHS (GG&C NHS).

Vision for Glasgow's Children and Young People

"We want every child to be supported to achieve their full potential and contribute positively to their communities, throughout their lives"



HMIe inspected Glasgow's Children's Services in 2008 and identified our key strengths on how well children are protected and their needs met.

HMIe 2009 Key Strengths:

- Very effective arrangements to help children keep themselves safe.
- Very effective promotion of public awareness of child protection.
- Support arrangements including Local Management Reviews (LMRs) and Local Child Protection forums, for staff involved in child protection.
- Strong vision, values and aims to guide staff involved in protecting children
- High priority given to child protection within Council plans to modernise its services.
- Strong leadership of partnership working within and across services.

The CPC continues to deliver on its functions as prescribed by the National Guidance for Child Protection Committees and this report will outline the range of work undertaken over the past year, as well as identifying ongoing areas of work that are being addressed and planned for the year ahead.

Glasgow City Council and GG&C NHS continue to work in partnership through Community Health and Care Partnerships (CHCPs), Education and Social Work Services are under one Executive Director for Education and Social Work Services supported by the Service Director Education and the Service Director Social Work. The focus of working in stronger partnership ensures that every child is safer through more effective joint working around the needs of the whole child, the family and the community.

On behalf of the CPC we are pleased to introduce the annual report of the activities and achievements of the CPC in the past year. The protection of children remains a priority for all services within Glasgow.



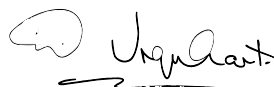
George Black
Chief Officer
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Robert Calderwood
Chief Executive
NHSGGC



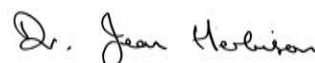
Bernie Higgins
Chief Superintendent
Strathclyde Police



Donald Urquhart
Independent Chair
Glasgow CPC



David Crawford
Vice Chair
Glasgow CPC



Jean Herbison
Vice Chair
Glasgow CPC

Aim of Glasgow CPC is to:

- ensure strategic leadership and ownership of activity in Glasgow to protect children and young people
- improve co-operation between agencies in Glasgow in their work to protect children
- enhance the development and delivery of services in Glasgow.

"Glasgow's children have a right to feel safe and be protected, all services have a responsibility to ensure children are safe and their needs met. Services will work in partnership with children and their families and communities wherever possible to achieve this".



Glasgow Context

Glasgow is the most densely populated area in Scotland, covering 68 square miles, with a population of 580,000 and four of the top five most deprived areas of Scotland (The Scottish Index of Multiple Deprivation (SIMD) 2009). It is also now host to the largest population of refugees and asylum seekers in Scotland with a history of attracting large communities of migrants which has an impact on the child population of the city. However the SIMD (2009) notes that Glasgow is the only local authority to see a consistent improvement over time.

For children living in deprived areas this can mean that their diet and health are more likely to suffer, they are more likely to die in an accident, have higher rates of long-standing illness and have poorer attainment and school attendance records. As adults, they are more likely to have poor health, be unemployed or be homeless and are also more likely to become involved in offending drug and alcohol use.



CHILD PROTECTION COMMITTEE

The CPC is responsible for ensuring that agencies respond in a co-ordinated way to the prevention and identification of child abuse. It is the primary, strategic planning mechanism for inter-agency child protection work in Glasgow and reports directly to Chief Officers.

Each of the 5 CHCPs in Glasgow have their own local Child Protection Forum which feeds into the work of the CPC in taking forward both city wide initiatives as well as localised responses to identified needs and links with the Local Management Reviews (LMR's) within each CHCP.

CPC priorities to deliver better outcomes for children were identified from the findings of the 2008 HMIe inspection (published March 2009) to form the business plan for key priorities.

CPC PRIORITIES AND BUSINESS PLAN 2009 -2010

- Make appropriate arrangements for the medical examination of children about whom there are child protection concerns and ensure that these take account of children's ongoing needs.
- Ensure that health staff are involved in initial referral discussions about all children for whom there are child protection concerns.
- Ensure consistency and a management overview of arrangements for identifying and planning to meet the needs of vulnerable individual children, including unborn babies.
- Ensure that staff from relevant services contribute information to inform decision-making about vulnerable children involved in child protection.
- Ensure that staff and managers across services are clear and consistent about when to initiate child protection procedures.

These key priorities were incorporated within the CPC action plan and have been the focus of the work undertaken by Chief Officers and the CPC throughout 2009-10. Progress has been made on these key priorities along with other work being undertaken to improve the outcomes for Vulnerable Children, Young people and families in Glasgow. HMIe will return in February 2011 to inspect our progress.

The outcome of this work is noted throughout this report.

KEY PRIORITY

Make appropriate arrangements for the medical examination of children about whom there are child protection concerns and ensure that these take account of children's ongoing needs.

What have we done?

Improvements have been made in the arrangements for medical examination of children in particular a redesign of arrangements for NAI medicals and the introduction of Comprehensive Medical Assessments which are delivered locally. Services are available 24 hrs and discussions are on-going between Strathclyde Police, Archway and Child Protection Unit to commence a Pilot Service from 1st Dec 2010 for historical cases of child sexual abuse of adolescents, aged 13 - 15 years.

Monitoring arrangements and guidance for doctors has been put in place along with a 24 hour Medical Advice line and Office hours Nurse Advisor line to give advice to all staff.

Outcomes

- child friendly leaflet
- robust assessment with minimum distress
- child seen timeously
- child treated sensitively
- improved early risk assessment
- improved early decision making

KEY PRIORITY

Ensure that health staff are involved in initial referral discussions about all children for whom there are child protection concerns

What have we done?

The Tripartite/Initial Referral Discussions sub group has been working on developing a new procedure around information sharing to improve on this key priority of ensuring that health staff are involved in the early discussions of children about whom there are child protection concerns. The new protocol developed by the three agencies which identifies that Social Work will undertake initial discussions with police and local contacts with health and the NHS GG&C Child Protection Unit (early sharing and collation of health) will be implemented in October 2010.

KEY PRIORITY

Ensure consistency and a management overview of arrangements for identifying and planning to meet the needs of vulnerable individual children, including unborn babies.

What have we done?

Our Inter-agency guidance in respect of Alcohol and Drugs in Pregnancy (2002) was widened to include pregnant women who are deemed vulnerable for reasons other than substance use. 'Inter-agency procedural guidance for vulnerable pregnant women during pregnancy' was implemented in August 2008.

The Women & Children's Vulnerable Women's Governance Group (W&C's VGG), a sub group of the CPC was formed to progress the implementation of this guidance. The group managed the implementation of the guidance and now performance manages through identified key performance measures. A consistent operational model for SNIPS (Special Needs in Pregnancy) has been established to progress the Vulnerable Women in Pregnancy pathway as part of the Maternity Service Redesign.

Key Performance Measures

- No of women referred
- Outcomes of decisions
- Number of referrals for pre-birth assessments
- Number of pre-birth assessment undertaken
- Outcomes of pre-birth assessments

Work plan for the coming year will focus on improving performance and include.

- Reviewing the role of liaison meetings with view of standardising across the city to agree core membership, standard format for minutes, logging all information on pregnant vulnerable women and agreeing timescales for the review of all women as part of the liaison meeting, with monitoring of this via Carefirst recording.
- PACT Team Leaders in conjunction with the SW Child Protection Team staff will undertake further briefing sessions on the protocol specifically aimed at adult services and any realignment of the liaison meeting structure taking into account the proposed strategy in relation to a standard SNIPS service across Greater Glasgow and Clyde.

- Review current SNIPS pathways with view to roll out across Glasgow to include consistent criteria for referral into SNIPS; antenatal patient journey; documentation supplementary to SWHMR; and SNIPS staff, agree options for a city wide operational service model which will ensure the equity of provision for women.
- Progress towards greater consistency, joint working and equity of services for vulnerable pregnant women.

Glasgow Addiction Partnership Contract Manage Community Support Services for families affected by Parental Substance use.

Addaction Pregnancy Support and Early Years Support Service

The pregnancy and early years support service was developed to deliver a city-wide service to women with addiction issues who are pregnant in both the pre and post birth period. The service provided direct support to 105 parents and 205 children and young people and in addition a further 14 pregnant substance users and 21 children received support as a result of their parent accessing a short term residential rehabilitation programme to reduce their substance use and improve their parenting abilities.

Cordia - Homebased Support Service

The home based support service was developed to increase the support available to children affected by parental substance use across the city of Glasgow. Year end activity as at 31st March 2010 seen an increase in service delivery of 14,803 hours of support to 415 adults and 614 children within the city. Assuming this level of activity continues or increases as anticipated then expenditure will be in region of £900K by 2011.

Impact of Parental Substance Misuse

The interface between Children and Families and adult addiction services has been developed with the introduction of both a Practice guidance for Addiction Staff Working with Children Affected by Parental Substance Use (2008) and an Impact of Parental Substance Use Assessment Tool (2008). An audit of the assessment tool completed in February 2010 detailed aspects of the assessment process to identify areas of good practice, highlight any gaps in practice and training needs.

Practice Development Groups have been developed to ensure the findings from audits are disseminated within Community Addiction Teams across the city.

Key Findings of Audit

- 80% already known to Children and Families
- 70% assessments completed within timescale
- Increases service user awareness of impact of parental substance use
- 75% recorded outcomes of assessment

Vulnerable Young Person sub-group (VYP) has worked to a comprehensive action plan, procedures were updated and new practitioner guidance was developed including YP and Addiction, Sexually Problematic Behaviour, Child Trafficking, ISMS and VYP. The re-write of the VYP procedures and development of new practitioner guidance was prioritised and implemented across all agencies. Work streams include sexual exploitation, missing children & young people and sharing of information to support the identification of vulnerable children.

In addition the Sub-Group focused on the needs of vulnerable young males and child trafficking as noted elsewhere within this report. Considerable work has been undertaken looking at the needs of vulnerable young males and three work strands were identified - initial literature review of what interventions work with young males, mapping existing services and an audit of questionnaires completed by young men. A final report with recommendations will be presented to the CPC for consideration and action.

The VYP action plan is regularly reviewed and updated to reflect the priorities of the CPC

KEY PRIORITY

Ensure that staff from relevant services contribute information to inform decision-making about vulnerable children involved in child protection.

What we have done?

Child protection meetings are multi-agency and services are expected to contribute to discussion and decision making. CP has a multi agency structure with conference and core group processed and there is an expectation that services will provide written information for CP meetings.

Single agencies to adopt processes to ensure appropriate attendance and/or information sharing at child protection meetings to ensure all relevant information is available at CP meeting and this will enhance decision making and care planning and is reported to CPC as part of Management Information as performance management.

KEY PRIORITY

Ensure that staff and managers across services are clear and consistent about when to initiate child protection procedures.

What have we done?

The delivery of child protection training both single and multi agency is delivered for staff across the city and is discussed further under CPC training within this report. Staff awareness of Child Protection is undertaken by the Communication Sub group and is discussed further within this report.

All agency staff have access to NHS GG&C Nurse Advice telephone line where they can call for advice on cases they are working with. SW implemented Assistance Service Managers (ASM's) in Oct 2009 with the primary responsibility of chairing CP conferences to ensure consistency and delivery of good practice.

A series of seminars were held across the city aimed at practitioners and first line managers to on the learning from SCR's and in particular learning for Glasgow. This is discussed further under SCR's.

Furthermore, Glasgow CPC in conjunction with the West of Scotland's Chairs consortium is updating its inter-agency child protection guidance due for completion in Oct 2010.

CPC Action Plan

Planning

The CPC has taken forward a number of pieces of work in the past year. The CPC's action plan (available on our web site) is used as a working tool to allow for a more robust review of progress and identification of outstanding pieces of work. The Action Plan is updated prior to every CPC meeting and is used to inform the CPC agenda to ensure that ongoing pieces of work are reported on and the CPC is aware of the timescales identified, thus allowing for greater accountability of CPC members and sub groups to the CPC.

Children's Services

A number of CPC members also sit on the Children's Services Executive Steering Group which has overall responsibility for planning of Children's services across Glasgow. The CPC Lead Officer sits on the planner's group which is a sub-group of the Children's Services Executive Steering Group and has supported the delivery of Glasgow Child and Family Services Plan 2009-2012.

*Non Offence Reporting
Mechanism (NORM)*

NORM is an effective multi-agency process for early identification for vulnerable children. A pilot was run in the South East of the city and identified the need for roll out of this service across the city. This has been discussed by Chief Officers throughout the year, a process mapping event will take place in April 2010 to seek confirmation from Strathclyde Police that they will support a formal implementation group to plan the roll out of NORM across Glasgow City. This work will continue to be monitored by both the CPC and Chief Officers.

Early Interventions

Early Interventions will break the cycle where the needs of vulnerable children are not met and will allow for a sustained, comprehensive, coherent programme of development, commitment and investment by the Council and NHS with the essential support of the Police, the Reporters Administration and the Voluntary Sector.

A number of proposals were put forward:

- building on the existing commitments to implement the parenting strategy;
- developing family support services; and
- Investing in workforce development to provide a more effective culture of early intervention.

Parenting Programmes

Glasgow's Parenting Framework represents a multi agency commitment to deliver improved outcomes through an evidence based model to tackle vulnerability. A city wide approach to parenting and parenting support is a priority and a key driver to improve educational, social and health outcomes for Glasgow's children while providing a coherent link between all services supporting children and families. The Children's Services Executive Group agreed the roll out of the Triple P (Positive Parenting Programme).

Triple P is a strong evidence based parenting programme suitable for use across agencies which are supported by co-ordinators across the city at a cost of over £1m.

Family Support Services

There are a number of elements in relation to family support services; an audit of council staff in support roles is proposed in order to make the best use of current resources across health and social care to enhance capacity and address the very high levels of need found in Glasgow.

The Health Visitor Review identified that the ratio of support workers for vulnerable families is too low and investment is required to address this deficit which would support the risk management for vulnerable children and families below the threshold for formal child protection registration.

Glasgow City Council is taking forward an early year's strategy to expand access to early education and childcare for children aged 0-14 years. The strategy (implemented Aug 2009) gives higher priority to low income working parents (including other groups i.e.; Income support; Kinship Carers; full-time students / trainees) whilst still continuing to prioritise the most vulnerable children and families. This continued support for vulnerability is in line with the increasing focus at national and local level on intervening early in the lives of children when difficulties arise, as set out in the Scottish Government's "Early Years Framework" published in December 2008."

Workforce Development

Glasgow City Council has been developing an integrated workforce strategy with the aim of expanding the roles of existing employees to improve their ability to contribute to the early years agenda. Previous experience within education has utilised locally-led workforce development events which have a focus on integrated working practices. This approach could mainstream the early years focus within the wider workforce, and contribute to an improvement in integrated working within children's services.

Risk Assessment

The Graded Care Profile has a specific focus on neglect and forms part of an assessment process either on a single or multi-agency basis and complements the IAF. Training of approx 500 SW and health practitioners has been undertaken with a research report completed in Nov 09. Recommendations noted were a follow up evaluation of all cases where the Graded Care Profile has been used to evidence any change in practice, interventions and outcomes for children. Research work continues and further recommendations will be identified in the use of Graded Care across the city.

*Integrated Assessment
Framework (IAF)*

The CPC prioritised this development because Significant Case reviews repeatedly highlighted the problems created by different approaches to assessment, risk, thresholds, intervention and case holding. The development of IAF was intended to address these issues by putting in place a singular approach to assessment, care planning and intervention for all children requiring support from more than one service and is now implemented across all CHCP's areas. This is supported in each CHCP by a service manager with lead responsibility to facilitate the continued role out of the IAF process including responsibility for performance, both on a quantitative and qualitative basis. Training was delivered across the city and each CHCP has an IAF multi-agency monitoring group. Figures on performance are gathered on a monthly basis and Heads of Service drive the need to improve performance.

*Joint Investigative Interview
Training (JIIT)*

JIIT is a high quality multi-agency 5 day training course for police and social workers focusing on the interviewing of children who may have been the victim of abuse. This is delivered jointly by SW and Police based at Strathclyde Police Training Centre. The West of Scotland JIIT steering group has a focus of ensuring that JIIT in the West of Scotland complies with the JIIT National Curriculum and discussions have been held at National Level to establish a register of accredited interviewers. A further area of development is refresher courses for staff who regularly undertake JII and this will be rolled out within Glasgow with the support of the CPC Training Officer. Draft Guidance on JIIT from the Scottish Government is currently out for consultation with the closing date of 12th April 2010.

*Visual Recording of Joint
Investigative Interview (JII)*

There is an identified need to provide high specification visual interviewing suites and mobile recording equipment within the city to undertake JII. A focus group is to be identified by summer of 2010 to scope potential sites across the West of Scotland including Glasgow. Glasgow CPC is supporting this work and appropriate representation of this focus group will be identified to ensure that we have adequate facilities within the city.

CPC Research into SCR's

The CPC is commissioning Glasgow School of Social Work Research to undertake a research project looking at Best Practice with BME families. This commissioned report

should offer advice on whether particular approaches are needed with BME families in the GCC jurisdiction, and if so, give details of what they should be. Completion of the report is planned for December 2010.

Public Information Communications Sub Group

The CPC has a responsibility to ensure that members of the public feel confident in whom to report concerns about children and young people.

The Communication sub group (formed in November 2009) undertakes the dissemination of public information about protecting children and young people to raise awareness of child protection issues within communities and, promote the work of agencies in protecting children to the public at large.

The communication sub group has undertaken various advertising campaigns throughout the year and is planning a consultation with young people event later in the year with the support of 'Young Scot'. Work on a CPC communication strategy is currently underway.

How we raised awareness;

- Consultation event with public
- Radio advertising campaign
- Advertising in free magazine delivered to all homes in Glasgow
- Video links in health centres
- Posters and leaflets
- Web site
- Adverts in staff magazines
- Staff wage slip inserts

WEBSITE - www.glasgowchildprotection.org.uk

Our website (established Nov 2007) is well used by the general public and professionals (31,201 hits during April 09-March 10) and was noted by HMIE as being very informative and easy to use with age appropriate information and links to other helpful sites. A local radio advertising campaign in Feb/March 2010 aimed at raising public awareness about child abuse and the public's role in keeping children safe directed listeners to the web site for further information with an increase of 19% of visits by the public during this time. An upgrade application has been made to allow for more interactive activities for children and young people.

Advertising, Leaflets and Posters

Glasgow CPC produces the following leaflets: (available on our website)

- General Information for people concerned about child abuse
- Protecting children - Information for service users
- If you don't feel safe - information card for children
- Child Protection what happens next? - information for parents

- Child Protection during pregnancy - Information for parents
- Child Trafficking - the movement of children into and within the country with the intent to exploit them. (2009)

Policies, Procedures and Protocols

As previously noted Glasgow CPC in conjunction with the West of Scotland's Chairs consortium is updating its inter-agency child protection guidance. This work has taken longer than was anticipated and is currently available in draft format. It is envisaged that this web based guidance will 'go live' in October 2010.

The Scottish Government are also undertaking the re-write of the 1998 Child Protection Guidance; this document is due to be completed by the end of 2010.

Management Information

Management Information reports at each CPC were introduced in the current format in Nov 2009. These reports incorporate statistical information from Social Work, Health, SCRA, Education and the Police with work being undertaken to include contribution from 3rd sector services. Reports incorporate information on the number of children registered, information gathering events opened, LAAC, referrals to Social Work from Health and Police, categories of registration and any trends identified. GG&C NHS Child Protection Unit (CPU) based at Yorkhill report quarterly on calls made to the Nurse and Medical Advice lines, headline messages, early sharing and collation requests, referrals to SW, training of NHS staff and SCRA reports. The reporting of medical examinations and Comprehensive medical examination will also be incorporated within this report. Strathclyde Police Public Protection Unit contributes their figures for child protection referrals and Domestic Abuse incidents from across A, B and G division. B division incorporates Glasgow East and North CHCP and includes East Dunbartonshire, which is out with the city. A division incorporates the city centre and West CHCP and G division covers Glasgow South East and West CHCP and East Renfrewshire (out with the city).

Registration trends inform CPC's strategies. Issues surrounding parental substance misuse have informed the CPC Training Sub Group which identified a gap within the CPC training calendar and is currently working with Glasgow Addiction Services (GAS) to offer this. In addition to the training, GAS now reports to the CPC through the management information report on the work being delivered by their services to support vulnerable families and the numbers of identified children that are linked to adult users of their services.

Quality Assurance

Sub Group

Glasgow CPC quality assurance sub group work on behalf of the CPC to ensure that multi-agency mechanisms are in place to improve practice in child protection work.

To achieve better outcomes for children

the group is involved in multi-agency self evaluation, collation and analysis of management information and promote a learning culture from Significant Case Review recommendations. The role and remit of the group was agreed by the CPC in September 2009 and can be found on our website.

Self evaluation is an ongoing programme of work for the CPC and the QA group are preparing for a multi agency self evaluation case file audit in the Autumn of 2010 which will focus on four areas identified within our 2008 HMIe inspection.

These areas are:

- Pre and post pregnancy assessment and care management process
- Accumulation of concerns (neglect)
- Children on the CP register
- Children recently de-registered

Following the case file audit consultation with a sample of the children/young people, families/cares and staff of files audited will be undertaken to allow for reporting to be triangulated. The findings of the report will inform practice and will be used as evidence for the forthcoming HMIe inspection in Feb/March 2011

Significant Case Reviews

(SCR's)

In 2009-10, the CPC was involved in reviewing 4 cases within this multi-agency group. None of these were completed during this period due to the complexity

of each case however, each review considers areas of good practice and areas for improvement and from these the CPC and its member agencies will identify action points. Identification of emerging issues helps prioritise actions for the CPC and its member's to act upon to improve outcomes for children. The current SCR protocol is being revised.

Multi agency seminars were held across the city, looking at learning from SCR's into the deaths of Baby P and Brandon Muir. These sessions were run together with Social Work CP Team and NHSGG&C CPU and were attended by staff from a range of agencies including Education, Health, Police, Social Work, SCRA and the Voluntary Sector, over 300 staff attending in all. A range of issues were identified as possible risks for Glasgow, however there were also clear strengths in practice and staff were able to reflect on the challenges for practice where they worked. These sessions were well received across the city and the CPC plan to repeat them again over the coming year.

Child Trafficking

The CPC commissioned a study investigating child trafficking in the city. Phase one was a case file analysis of young unaccompanied asylum seeking children, looking for indicators of trafficking. This suggested that 28% of Unaccompanied Asylum Seeking Children (UASC) have probably been trafficked, with a further 15% presenting with 'suspicions' suggesting a possibility of trafficking. The full report - *Child Trafficking in Glasgow*-report of a social work case file analysis of UASC can be found on our web site.

The second phase of research planned for the coming year will consist of interviews with front line professionals and managers, to ascertain their perceptions and views around identifying and working with trafficked children. A third phase will follow, seeking the views of young people who have been trafficked.

On a national level, a National Referral Mechanism for identifying and monitoring cases of child trafficking was introduced in April 2009. Glasgow has been part of a pilot for the assessment form to accompany these referrals. The CPC introduced Inter Agency Guidance for Child Trafficking in September 2009, through a series of inter agency staff briefings across the city, to raise awareness of the issue. This guidance has been shared with other authorities across the West of Scotland as an exemplar of good practice.

Child trafficking is an issue which few agencies have experience of, and during the year significant work has been undertaken to raise practitioner awareness and develop guidance and assessment tools to support practitioners in this complex area of work. Glasgow is the only Scottish pilot site and work has been ongoing to develop effective practice and processes around the National Referral Mechanism. In June 2010 the CPC will hold a national conference in conjunction with the Scottish Government. The aim of this conference is to look at the learning from Glasgow's experience as part of the national pilot of the Child Trafficking Assessment tool, and to look at future directions in relation to this work.

CPC Multi Agency Training Sub Group

The training sub group is a multi agency working group which considers what training is being delivered by the CPC and explores gaps in this training. Work is being undertaken to identify all CP training delivered on both a single and multi agency basis across the city. The pathways for staff in different roles/agencies and links with local CP forums will be used to identify this across the city on a local basis. Using this information, any gaps/duplications in training provision will be identified, and the training calendar

developed as appropriate. The CPC training programme runs Sept - May, further details of which can be found on our website

Two new courses were added to the training calendar this year. The Graded Care Profile as previously noted within this report and 'Seeing the Signs' which is a follow on to awareness raising training, enabling practitioners to consider in more depth what are the signs and indicators of neglect, and how to respond.

The issue of non-attendance at courses has been identified and reported to the CPC. Of the 1282 nominations from across organisations a quarter if these did not attend, nor gave apologies and work will be undertaken to incorporate a more robust follow up of non-attendance across each agency.

Future plans include the pilot of two new courses. The first is Child Trafficking, the aim of which is to raise participant's awareness of the indicators and issues around trafficking, so they can respond appropriately to children who may have been trafficked. The second is The Impact of Parental Substance Use on Children. The aim of this course is to look how parental drug and alcohol use affects children and will be delivered by addictions staff through GAS.

A CD ROM on basic Child Protection is available and distributed to staff in all agencies. A web version was commissioned and is now available on the CPC web site. Furthermore a half-day CP Awareness Raising course was developed, and produced as a tutor pack. This can be given to agencies to allow them to develop their own training.

CPC Training Co-ordinator

The Training Co-ordinator delivers the majority of CPC training and links in with two networks of CP Trainers, one in the West of Scotland, and one nationally across Scotland. These networks are valuable for sharing good practice and training materials. A task that these groups have set themselves is to look at alternative methods of training to complement the training calendar. In particular, they will be looking at the development of short workbooks on particular topics that practitioners can use as self learning tools.

Evaluation

Evaluation of CPC courses provides evidence that courses are well received with positive feedback however this does not provide outcomes on practice. The training co-ordinator will develop a framework for evaluation, which will identify how evaluation is used to improve the quality of the content and delivery of the training calendar and this work will be incorporated within the CPC self evaluation plan under HMIe QI 7.3 in 2011.

CHCP CP Forums

The CPC Lead Officer links with each CHCP Child Protection Forum to ensure that communication between the CPC and each forum is in place. This also supports the implementation of local action plans which are informed by the CPC and local trends and incorporated within the Local Management Review (LMR) process.

Voluntary Sector

Glasgow Social Care Providers Forum (GSCPF) is a network of social care provider organisations which are purchased to deliver services on behalf of GCC SW. They are represented on the CPC by their Development Officer and a nominated GSCPF Officer. GSCPF focus on achieving strategic objectives that ultimately enhance better outcomes for service users and have an established Children and Families Strategic Working Group and Children and Families Practitioners Group with representation from key social care organisations. These groups have specific strategic and practitioner focus, CP is a standing item on their agendas. Together they exchange strategic outlook, peer learning, experiences and practice.

Over the year strong communication links have been built between Glasgow CPC and GSCPF with members receiving up-to-date information including timely reminders of free training offered. Work is currently being undertaken to develop an online resource pack for the 3rd sector to inform, update and hold information such as frequently asked questions. The Training Co-ordinator has begun work with the Glasgow Social Care Providers Forum on developing a resource pack for 3rd sector providers to support them in their CP policy and staff development. This pack will be completed in the coming year.

West of Scotland Forums

Across the West of Scotland (WOS) there is a forum for the Chair's of CPC's to meet and progress matters of shared interest across the 12 unitary authorities that formally made up Strathclyde plus Dumfries & Galloway. This takes cognisance of the overlapping boundaries some of the agencies have across the authorities and tries to ensure consistency of good practice.

To compliment and take forward the work of the WOS Chair's group there is also a forum for Child Protection Lead Officers to develop areas of practice and a Training Forum allows training co-ordinators or staff with a remit for multi-agency cp training to meet and share best practice. Glasgow also attends the WOS JIIT steering group which reports to the WOS Chair's consortium.

National Forums

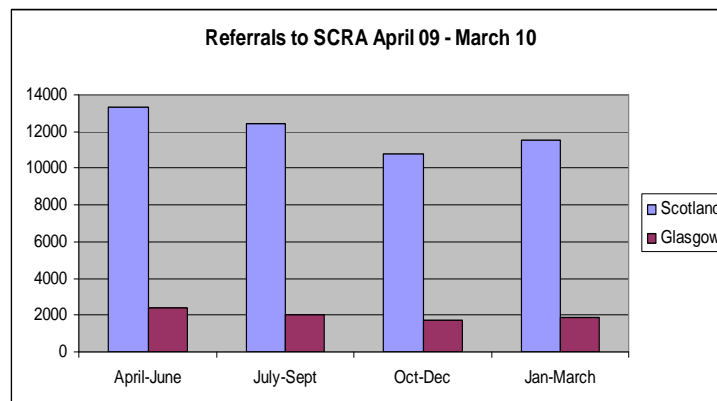
The CPC has strong representation on a number of national forums and events. Glasgow actively participates in the National Chairs of CPC's, the national group of Training Co-ordinators and the National Lead Officers Network which are all forums for the exchange of information and best practice.

Statistical Information

Statistical information for the CPC is currently collated from SCRA, SW, Education, Police, Health and recently Glasgow Addiction Services (GAS). Plans are in place to also collate from the Voluntary sector.

SCRA

During the period April 09 - March 10 there were a total of 8,146 referrals made to SCRA in relation to 6,921 children within Glasgow and relates to 17% of referrals within Scotland. This is broken down by each quarter as follows:



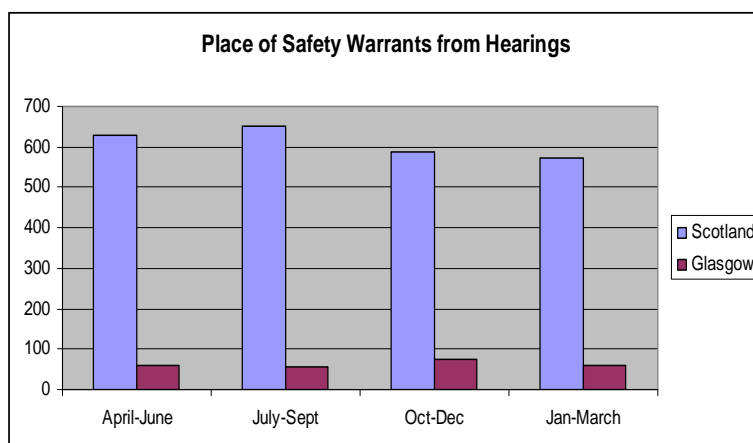
The number of Children's Hearings within Glasgow conducted during April 09 - March 10 were 9,139 accounting for 21% of Scotland's total number of hearings during this time.

Child Protection Orders

Throughout the period April 09 - March 10 there were 83 CPO referrals for 80 children. Glasgow accounts for 12% of Scotland's CPO referrals.

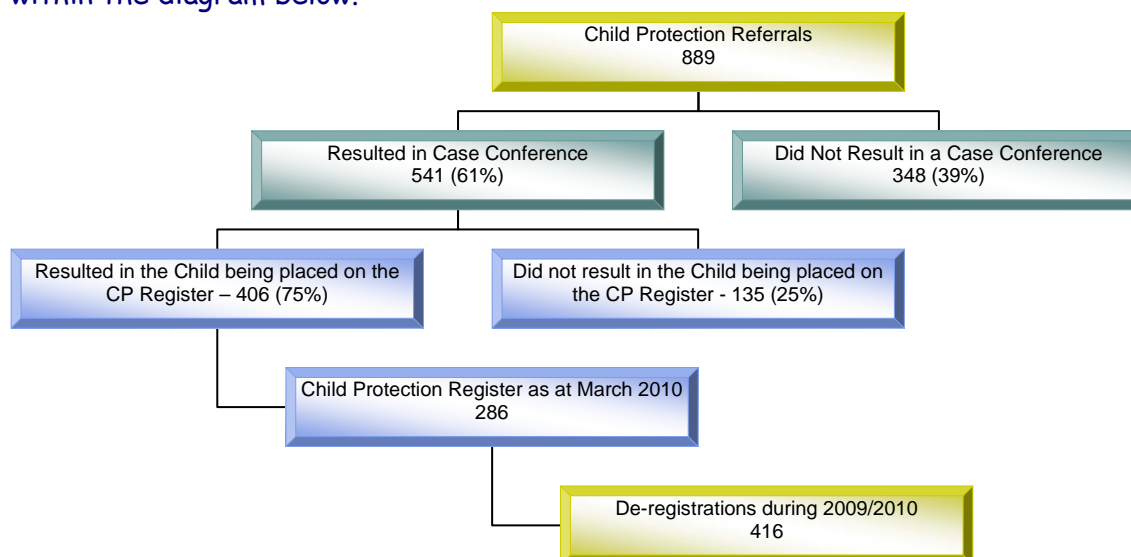
Place of Safety Warrants

The table below gives a summary of number of children with supervision requirements in force at the end of each quarter with comparison to Scotland's totals.



Social Work

During the period of April 2009- March 2010 SW child protection activity is noted within the diagram below.



Looked After and Accommodated Children (LAAC)

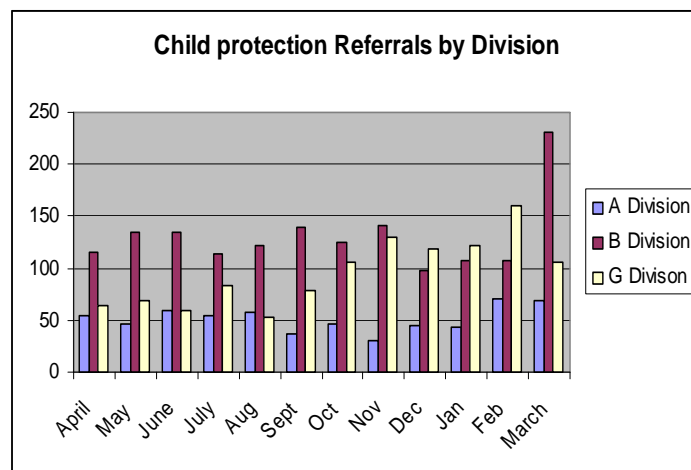
As at 22th March 2010 there were a total of 1,293 LAAC in Glasgow City Council, (f=596, m=697) with 215 of these children aged between 0-4yrs. A further 1,974 children are looked after at home. Overall there was an increase of 6% in 2009 of the number of LAAC in comparison to the previous year with a decrease in discharges of 22%, the average age of a LAAC was 6.7 years.

The average length in placement during 2009 was 1,037 days an increase of 15% in comparison to 2006.

Strathclyde Police Public Protection Unit

During the period April 09 - March 10 the Public Protection Unit noted a total of 3471 child protection referrals to SW across A, B and G division.

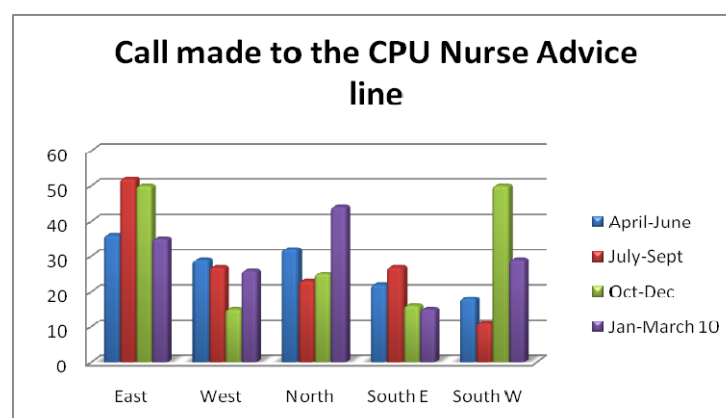
The highest number of referrals is received from B division which incorporates Glasgow East and North CHCP and includes East Dunbartonshire, which is out with the city. A division received the lowest referrals and incorporates the city centre and West CHCP. G division covers Glasgow South East and West CHCP and East Renfrewshire (out with the city).



Health

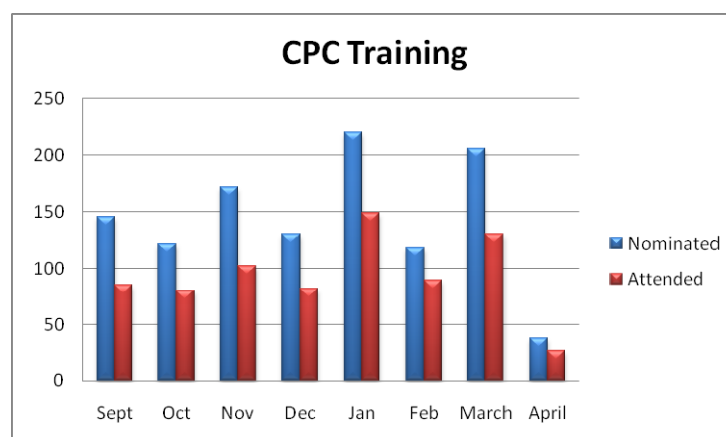
The Nurse Advice line is run from the Child Protection Unit (CPU) within Greater Glasgow & Clyde NHS and is staffed during office hours. The medical advice line is staffed by Paediatricians and is available 24 hours per day.

This graph demonstrates the number of calls made to the Nurse Advice Line from each CHCP during the year.



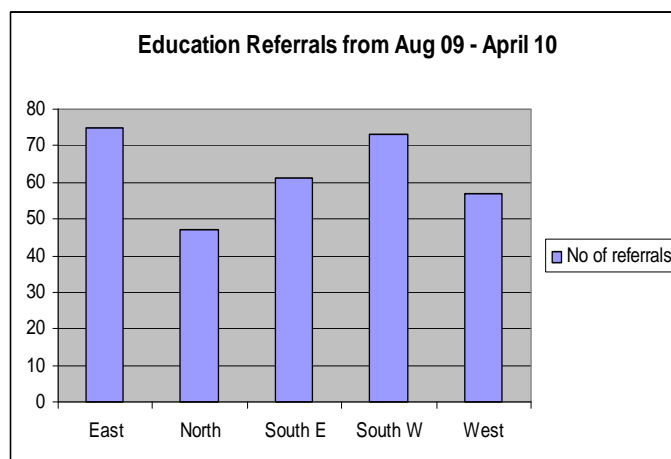
CPC Training

As previously noted the CPC training calendar is delivered from September, this graph represents the numbers of staff who were nominated to attend and those who attended.



Education


During the period August 2009 - April 2010, Glasgow City Council Education Services made 313 referrals to Social Work Services as per diagram.



Further information regarding Glasgow CPC can be found on our website
www.glasgowchildprotection.org.uk



Robert Calderwood
Chief Executive
NHSGGC



George Black
Chief Officer
Glasgow City Council



Chief Superintendent
Strathclyde Police