

East Sussex Local Safeguarding Children Board

Local Safeguarding Context 2018-19



1. Child population in East Sussex

East Sussex, covering 660 square miles, has an estimated population of 549,557. There are many affluent areas as well as areas of significant deprivation. East Sussex has 19 lower super output areas among the top 10% of the most deprived in England; 16 are in Hastings, two are in Eastbourne, and one in Rother.

In 2016 there were estimated to be **106,045 children and young people between 0 and 17 years old**, accounting for 19.3% of the total population of East Sussex. The area with the highest proportion of under 18's is Hastings (21%) with Eastbourne, Lewes and Wealden all between 19-20%. Rother has the lowest with under 18's accounting for only 17.1% of the total population.

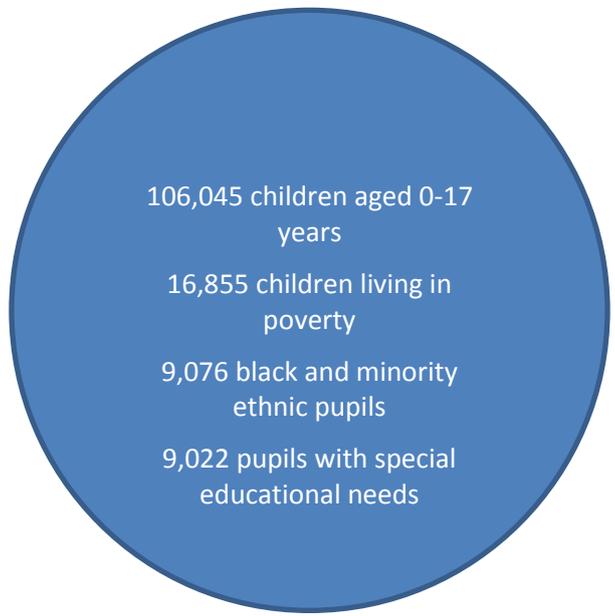
East Sussex is becoming increasingly ethnically diverse. Locally the **proportion of school age children from minority ethnic backgrounds is increasing: from 10.4% in 2013 to 13.5% (9,076 pupils) in 2019ⁱ**, but is still significantly lower than the national figure of 31.9% in 2018.

'Other White Background' and 'Other Mixed Background' population groups are the two most common BME groups in East Sussex, followed by 'White and Asian', 'Any Other Asian Background' then 'White and Black Caribbean'. This differs from the national picture where Pakistani, African and Indian groups are more prevalent, although the most predominant BME subgroup is 'Other White Background' nationally.

A large proportion of people who define themselves as 'White Other' are Polish, but there are also other European groups and other white migrants. The profile of the 'Mixed Heritage' group is made up of White and Asian, White and Black Caribbean.

13.4% (9,022) of children attending East Sussex schools are identified as having a special or additional need, compared to 14.4% in England (2018). Included in this group are those with complex needs who require a Statement of Educational Need or an Educational Health and Care Plan (EHCP). **2,169 (3.2%) of East Sussex pupils had a Statement or EHCP in January 2019.**

The level of child poverty is lower than the England average with **15.7% of children aged 0 - 15 years living in poverty**; 16,855 children are measured to be living in low-income families in East Sussexⁱⁱ. Poverty and income deprivation are largely concentrated in Hastings (24.6%), with lower proportions in Eastbourne (18.2%) and Rother (15.8%).



2. Impact of Multi-Agency Working

The LSCB has the lead role in ensuring that agencies are working together effectively to safeguard and promote the welfare of children in East Sussex. Multi-agency working is central to the early and effective identification of risk and preventing child abuse. Multi-agency working can take many forms but is largely based on effective information sharing, joint decision making, and coordinated intervention.



Contact and referral activity

A referral is the first stage of the child protection process: a referral will be made about a child where some aspect of their life is giving cause for concern. An increase in referrals is not good or bad in terms of the safety of children – an increase could indicate an increase in awareness of concerns about the safety of a child or reflect changes in local policy and practice.

In East Sussex, the Single Point of Advice (SPOA) and Multi-Agency Safeguarding Hub (MASH) were implemented in May 2016. Between April 2018 and end of March 2019 there were a **total of 19,788**

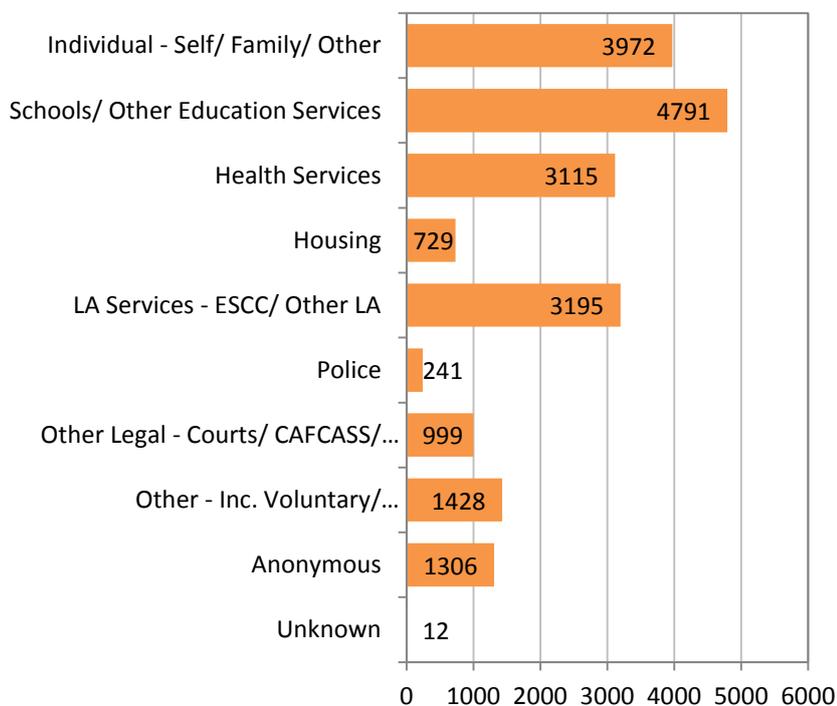
initial contacts to SPOA (regarding 9445 families) and **18,578 information gatherings initiated by MASH.**

The number of initial contacts has reduced significantly from the previous year (24,719) however the number of informational gatherings initiated by MASH has significantly increased from 13,298 in 2017/18.

The average number of MASH information gatherings (MIGs) per month in 2018/19 was 1548, with the highest number of the year in October 2018 of 1738.

Schools and other Educational Services made nearly a quarter (24%) of all contacts to SPOA during

Contacts to SPOA by Source (2018-19)



2018/19 (a total of 4,791 contacts), however this was a reduction on the number of contacts made by schools in 2017/18 (5,545 contacts). Individual contacts – including self-referral, family or neighbours – accounted for 20% of all contacts to SPOA.

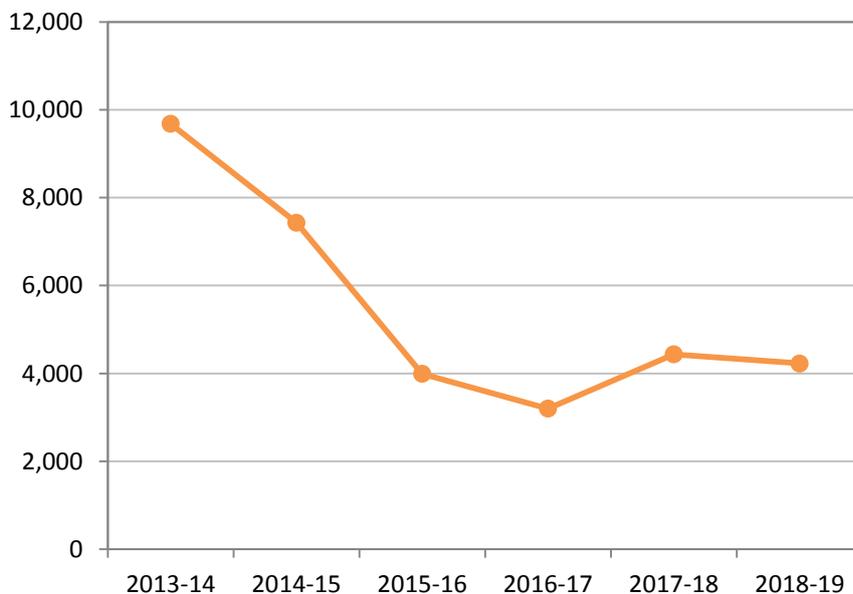
Police contacts to SPOA are low as all Sussex Police contacts are dealt with directly by MASH. The 241 contacts by 'Police' are likely to be from other Police forces across the country.

There were a total of **4,227 referrals to statutory social care in 2018-19**, which was slightly lower (0.2% decrease from 4,436) than 2017-18. The average number of referrals made was 352 per month. The number of referrals can fluctuate significantly month to month for example, the highest number of referrals made in November 2017 was 446 and the lowest number was made in December (265).

The number of referrals to statutory social care in 2018/19 is slightly lower than in 2017/18 (4,436) and remains significantly below levels between 2012-2014 figures.

The proportion of referrals to statutory social care with a level 4 (social care) outcome remains high. At the end of March 2019, 95% of referrals led to a level 4 outcome. Monthly averages during 2018-19 were 91% compared to 84% in 2017-19, and overall 7% increase. This figure demonstrates that the interface between SPOA and MASH is working well.

Number of Referrals to Children's Social Care



Private Fostering

Private fostering is an informal arrangement made between private individuals and is different from public fostering which is arranged by and paid for by the Local Authority. A private fostering arrangement is considered to be taking place when any child under 16, or under 18 if the child has a disability, spends more than 28 days living with someone who is not a close family member.

Number of Privately Fostered Children



Private fostering is a key focus for child protection and privately fostered children can be particularly vulnerable if the Local Authority is unaware of this arrangement. All professionals working with children have a responsibility to safeguard privately fostered children and to notify the Local Authority if they become aware that a child may be being privately fostered. Following work with local

language schools, to clarify their obligations around reporting private fostering, the number of children recorded as privately fostered has continued to increase during 2018/19. At the end of March 2019, **40 children were registered as being privately fostered**. The highest number of private fostering cases was during July-September (108 cases).

During the year up to the end of March 2019, 275 children were subject to a Private Fostering assessment, up from 195 during 2017-18. Of the **275 children, 262 (95%) were completed in the West of the county and were related to a language school organisation**. The rise in the number of children requiring assessments, due to their language school stay, has placed considerable pressure on resources.

Child Arrangement Orders and Special Guardianship Orders

A Special Guardianship Order (SGOs) or Child Arrangement Orders (previously Residence Order) is a legal way for someone with whom the child has a relationship, other than a birth parent, to provide that child or young person with a home and family when their parent cannot. At the end of March 2019, there were **334 children living in families via a child arrangement order** (CAO), a very slight increase on the 330 end of March 2018 figure.

The **number of children living in families via a SGO remains stable, with 449 children living in SGO arrangements at the end of March 2019**, compared to 437 at the same point in 2018. Over the past three years, the number of SGOs has increased from 372 to 449, an increase of 21%.

Last year the LSCB started monitoring this indicator on its performance dashboard to ensure it has oversight of the numbers of vulnerable children in this cohort. This indicator had been raised during recent national Serious Case Reviews (SCRs) which highlighted concerns about the assessment process for SGOs and the post SGO support for children.

3. Children Supported by Statutory Services

As in other parts of the country, some children and young people in East Sussex will be vulnerable and at risk of being abused or neglected. It is the LSCB's role to ensure that services provided to these children reduce risk and support children and young people to achieve healthy, happy, safe lives, and have a successful transition to adulthood.

Children with a Child Protection Plan

Children who have a Child Protection Plan (CPP) are considered to be in need of protection from either neglect, physical, sexual or emotional abuse; or a combination of one or more of these. The CPP details the main areas of concern, what action will be taken by a range of multi-agency partners to reduce those concerns and how we will know progress is being made.

Only those children who really need a protection plan should be subject to that formal process. **588 children were the subject of a CPP at the end of March 2019**, compared to 550 in 2018, 476 in 2017 and 462 in 2016.

The end of year number of children subject of a CPP is below than the local target of 605. The rate of children with a Child Protection plan for 2018/19 was 55.5 per 10,000 children. Based on 2018 rates, East Sussex has a higher rate of children subject to a child protection plan than England and East Sussex statistical neighbours.

588 children with a child protection plan

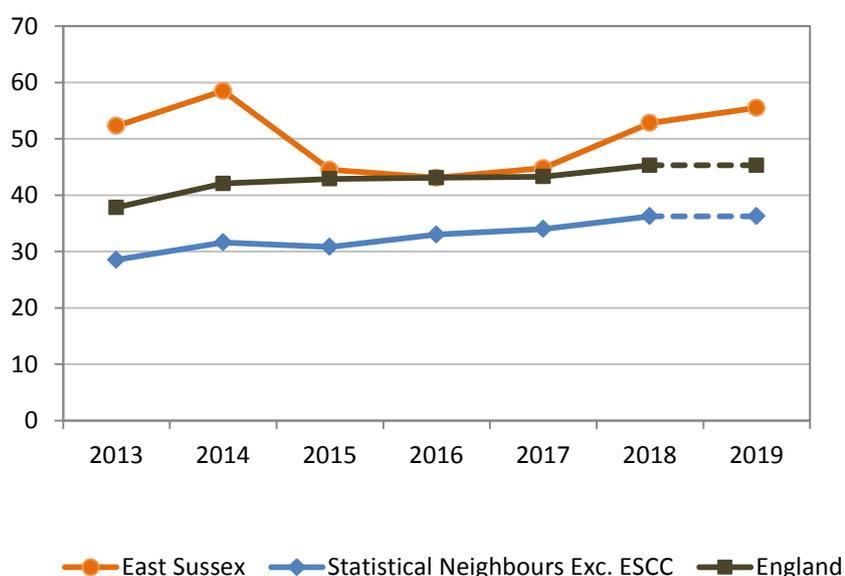
607 Looked After Children

27 unaccompanied asylum seeking children

23 young people at high risk of child exploitation

533 sexual offences against children

Rate of Children subject to a Child Protection Plan per 10,000 0-17 Year Olds



Maintaining focus on ensuring that the right children are subject to the right plan for the right period of time remains a priority for local services. The increasing number of children and young people coming to social care attention - who are considered to be at risk of significant harm and in need of a CP Plan - is in part down to a range of multi-agency practice developments which have resulted in greater awareness, for example regarding child exploitation and neglect.

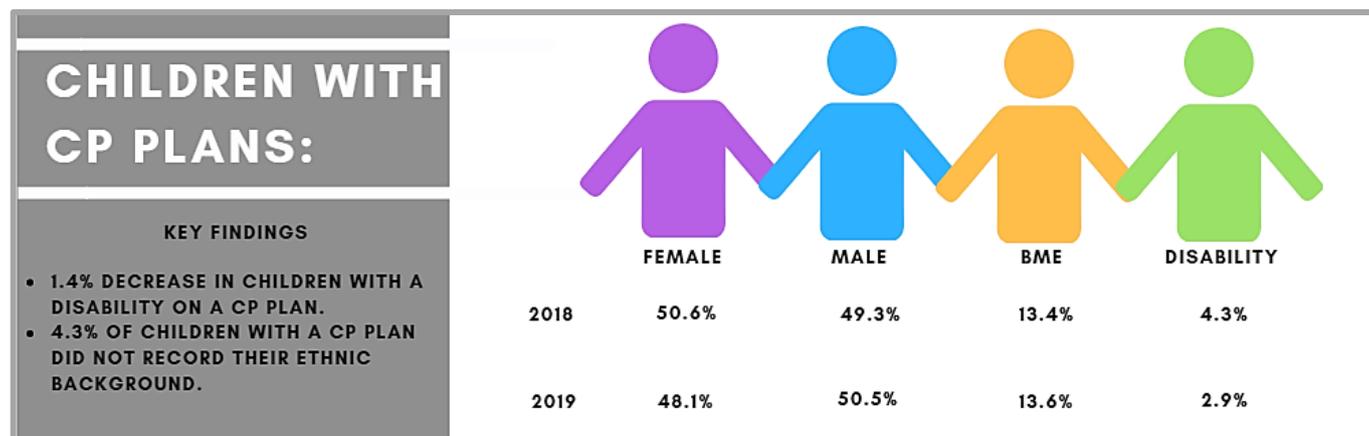
When a CPP ends for a child it means that concerns about the child's safety have reduced and/or they are no longer at risk of harm. The LSCB monitors the duration of CPP to ensure that CPPs are

appropriate and timely, for example children spending a long time with a plan could suggest that CPP cases are allowed to ‘drift’. At the end of March 2019, the **proportion of children ceasing to be the subject of a plan, who had a CPP for two or more years was 12.7%**. This is higher than at the end of March 2018, when the figure was 9.3%.

Re-registration data is also monitored by the LSCB. High re-registration rates could suggest that the decision to remove them initially from a CPP was premature. In March 2019, **10.8% of children becoming the subject of a CPP did so for a second or subsequent time** (within a two year period). This is higher than the rate in at the end of March 2018 of 8.3%.

Emotional abuse continues to be the dominant category of abuse recorded for child protections. At the end of March 2019, **55% of children with a current CPP was recorded for emotional abuse**. Neglect is the second largest category of abuse (34%) with much smaller proportions for physical abuse (5%) and sexual abuse (6%). Of all plans during 2018/19 there has been a significant decline in plans recorded for physical abuse (39 during 2018/19 compared to 76 in 2017/18) and a rise in plans for emotional abuse (400 during 2018/19 compared to 339 in 2017/18) and sexual abuse (55 during 2018/19 compared to 33 in 2017/18)

The profile of children who are in need of a child protection plan is monitored by the LSCB on an annual basis.



Over the past few years the proportion of children with CP plans has generally mirrored the ethnic composition of the wider child population. The exceptions are those children recorded as being ‘White British’ or ‘Asian’, who continue to be underrepresented, and those in the ethnic groups defined as ‘mixed’ or ‘other’ who again appear to be over represented; as has been the case for the past three years.

Looked After Children

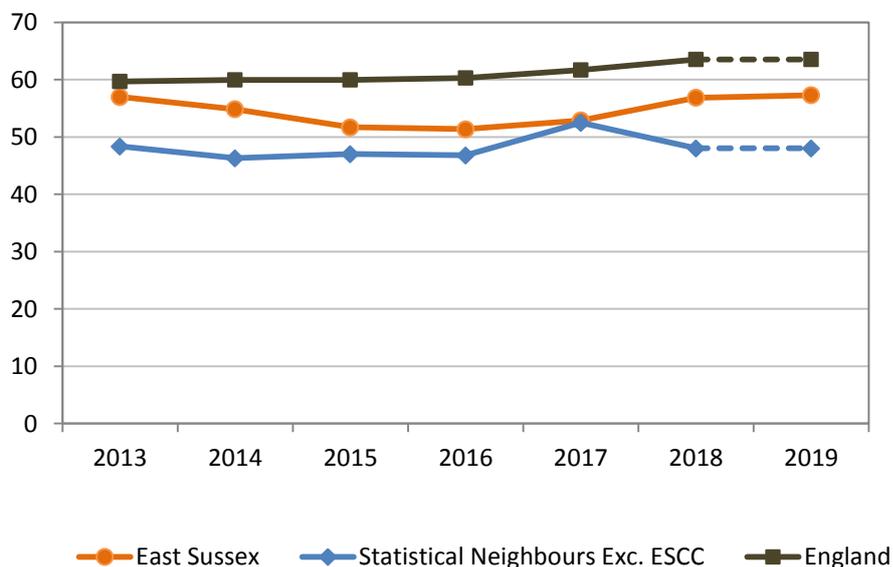
Children in care are those looked after by the Local Authority. Only after exploring every possibility of protecting a child at home or with wider family members will the Local Authority seek a parent’s agreement or a court decision to remove a child from their family. There are many reasons why a child might become looked after, including because a child has suffered abuse or neglect, was at risk, or is

disabled. Additionally, a child may become looked after if a parent is ill or disabled, or because parents are absent. Such decisions, whilst difficult, are made when it is in the best interests of the child.

There were **607 children looked after by East Sussex County Council as at the end of March 2019**. This is similar to the end of March 2018 figure of 606 (but higher than the end of March 2017 figure of 564). The number of care proceedings issued (rolling year) peaked at 104 in August 2017 with a monthly low of 83 in July 2018.

The rate of Children Looked After per 10,000 population (aged 0-17) in 2018/19 was 57.3 per 10,000. This means that the local rate is higher than other local authorities, similar to East Sussex, but is still below the national rate of 63.6 per 10,000. Following gradual decreases in numbers of Children Looked After over the past four years, numbers are similar to 2012/13 levels.

**Rate of Children Looked After per 10,000
0-17 Year Olds**



There are also a number of children who live in East Sussex and who are looked after by other local authorities. While the placing authority retains responsibility for them, services in East Sussex may still support these children. At the end of March 2019 there were **336 children looked after by other local authorities living in East Sussex**. This is significantly higher than the March 2017 figure of 145, and March 2018 figure 236. However this figure may not be completely accurate as East Sussex County Council relies upon other local authorities to inform them of children coming into the area and when they leave.

In addition young people who are remanded into care or custody by the criminal Courts now benefit from looked after children (LAC) status.

Unaccompanied Asylum Seeking Children (UASC)

At the end of March 2019 there were **27 Looked After Children who are Unaccompanied Asylum Seeking Children (UASC)**; with a high of 31 in February 2019. This is higher than the March 2018 figure of 18 children.

In common with other local authorities, ESCC is committed to accepting the equivalent of 0.07% of its total child population (72 children) as UASC over 3 years. Young people will either come to the Council via the National Dispersal Scheme or present spontaneously, for example via the port of Newhaven.

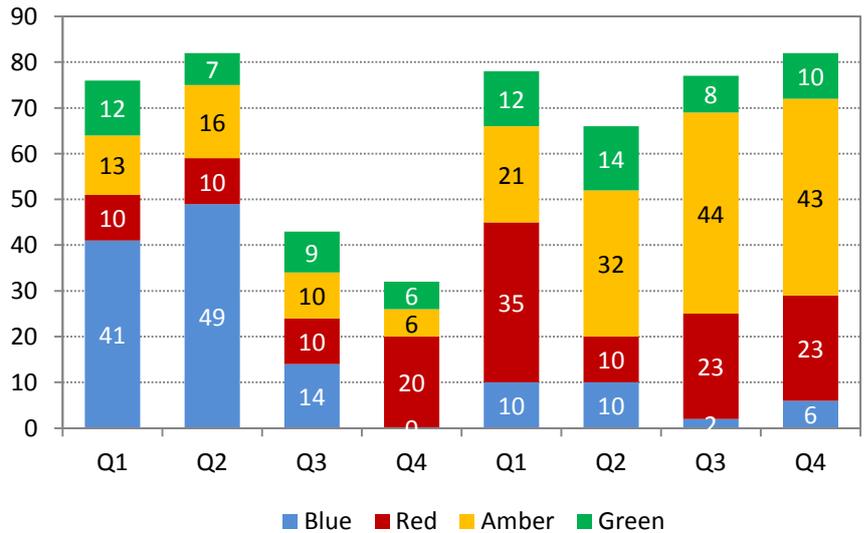
Child Exploitation

The Multi-Agency Child Exploitation (MACE) Subgroup of the LSCB takes a lead on the identification and recording of children who are vulnerable to exploitation in East Sussex. During the course of the year, the MACE subgroup has expanded its focus to include children who are criminally exploited, in relation to county drug lines, not just sexual exploitation. The subgroup also reviews children who are at risk of trafficking or modern slavery.

Multi-agency meetings are held monthly to review the level of risk that each child is currently exposed to. This generates a high (red), medium (amber) or low (green) risk score. A multi-agency plan is created for each child within the MACE process which includes planned engagements, home visits, and medical assessments.

There has been a significant increase in the number of high risk children discussed at MACE during 2018/19 compared to the previous year, which coincides with the wider focus of the group on all forms of child exploitation. On average, **23 young people were considered to be at high risk to child exploitation** each quarter during 2018/19, compared to an average of 13 during 2017/18.

Number of MACE nominals at the end of each Quarter (2017/18 - 2018/19)



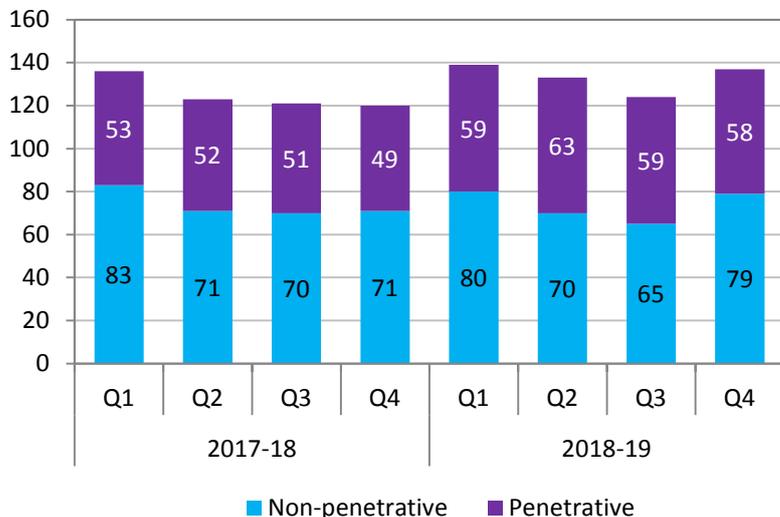
Overall, the numbers of children discussed at MACE has also increased. During 2018/19 **the risks for 303 young people were considered at MACE** panel meetings (although some of these young people may have been discussed at multiple panels) compared to 233 during 2017/18. This increase is due to the widening of the remit of the MACE panel to focus on all forms of child exploitation (not just sexual exploitation) and an increase in professional awareness of the indicators of exploitation.

Offences (including sexual offences) against children

The number of offences against children reported to and recorded by the Police are now routinely shared with the LSCB and included in the quarterly LSCB Performance Dashboard. These include non-penetrative sexual offences against children, penetrative sexual offences against children, and assaults recorded against children. The data does not reflect the total number of offences committed against children but it does provide an important picture of abuse committed against children. Trends in data may reflect increased public awareness and changes in policing rather than an increase in incidence. Data also reflects the year in which an offence was reported, not the year it was committed, so a proportion of offences will be historic.

A total of **294 non-penetrative sexual offences against East Sussex children** were recorded by the Police in 2018/19. This is a similar figure to previous years (295 in 2017/8 and 279 in 2016/17). Of these offences reported in the last quarter of 2018/19, 35% were recorded as committed by a family member; just under half (46%) were committed by someone known to the family; 15% by a stranger, and a further 4% recorded as 'other'.

Sexual Offences recorded against Children



A total of **239 penetrative sexual offences were recorded against children in 2018/19** compared to 205 in 2017/18 (and 156 in 2016/17), demonstrating a continued local rise. With penetrative sexual offences, the proportion recorded as committed by someone known to the family increases, compared to non-penetrative, to 62% of recorded offences (in quarter 4). 25% were offences recorded by family members; 9% by a stranger and 4% by 'other'.

A total of **1,565 assaults were recorded against children in East Sussex during 2018/19, an average of 391 per quarter**; this is decrease from 1625 in 2017/18. Assaults include 'assault without injury', 'wounding', 'assault with injury', and 'racially or religiously aggravated assault with injury'.

4. Children with family related vulnerabilities

The children identified in this cohort of 'family related vulnerabilities' does not mean that every child that is in this group is vulnerable to experiencing harm or poorer outcomes. These indicators are risk factors for vulnerability, rather than indicators of vulnerability in and of themselves. However, it is important for the LSCB to have oversight on these indicators and understand the complex range of issues children and young people in East Sussex often face.



1,452 children living with domestic violence
1,079 young carers
929 children educated at home
412 children living in temporary accommodation

Domestic Abuse & Violence

A domestic abuse Multi-Agency Risk Assessment Conference (MARAC) is a meeting that brings together representatives from a number of agencies in East Sussex to discuss the safety, health and well-being of people experiencing the highest risk of domestic abuse (and their children).

In East Sussex, there are two MARAC meetings - Eastbourne, Wealden and Lewes and Hastings & Rother - with each meeting weekly. The process is facilitated by the MARAC Support Team, based in the Safer East Sussex Team. Chairing is undertaken by staff released from core statutory partner agencies, including Sussex Police, Children and Adult Services, as well as the Clinical Commissioning Group.

In East Sussex, a total of 889 cases were discussed at the MARAC meetings during 2018/19 (however it should be noted that cases may be discussed at more than one meeting). The rate of cases per 10,000 population was 34 per 10,000 in Eastbourne, Lewes & Wealden compared to 48 per 10,000 in Hastings & Rother. **Of the 889 cases discussed at MARAC, there were a total of 1,452 children living in the households.** This is a similar figure to the previous year (1453).

Of the MARAC cases discussed, **60 of the victims were aged 16-17**: 5.5% of cases in Eastbourne, Wealden and Lewes and 8.5% of cases in Hastings & Rother.

Young Carers

In the 2011 Census, **a total of 1,079 children aged under the age of 15 were recorded as providing unpaid care – this equates to 1.18% of the under 15 population.** This proportion is slightly higher than the England average of 1.11%. While many children find that caring brings positive aspects to their lives, a child can become vulnerable when the level of care-giving, and responsibility to the person in need of care, becomes excessive or inappropriate for that child, risking impacting on their own emotional or physical wellbeing, educational achievement or life chances. There may also be other factors, in addition to their caring role, linked to a parents' illness or disability, that may lead to safeguarding issues.

At the end of March 2019, **9% of children's social care assessments identified caring responsibilities as a safeguarding concern**; this figure is higher than the end of March 2018 figure of 5%. The proportion of assessments identifying 'young carer' as an assessment fluctuates throughout the year – the highest

proportion was in November 2018 (47 assessments; 15% of all assessments) and the lowest in May 2018 (16; 5%).

Health Visitor contact

In 2017/18 the LSCB has started to regularly monitor the proportion of mothers who receive a first face to face antenatal contact with a health visitor and the proportion of children who receive a 2-2 ½ year review. This is because face-to-face contact with vulnerable mothers has been highlighted as an area for improvement in recent serious case review work in East Sussex.

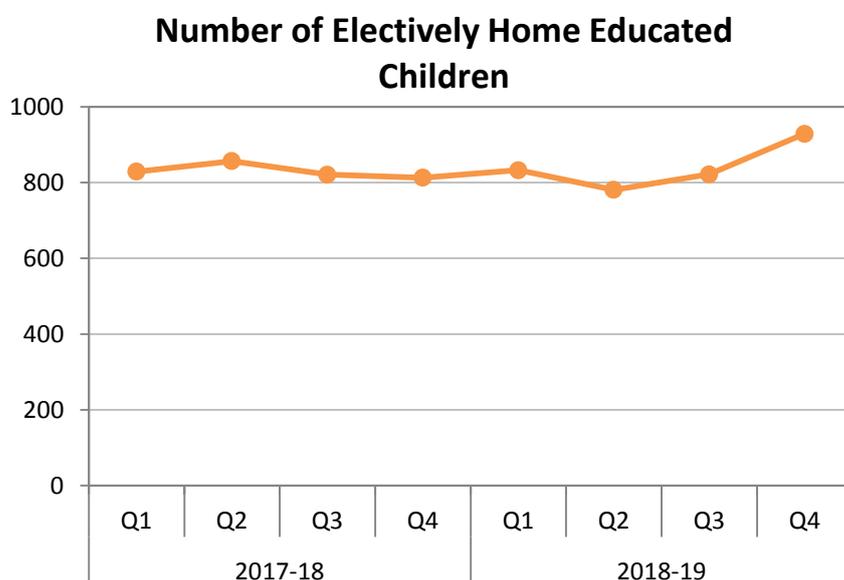
The percentage of all mothers who receive a **first face to face antenatal contact with a Health visitor during 2018/19 was 70.3% across East Sussex**. This just exceeds the local service target of 70% (but is lower than the national target of 80%). Lower performance in this indicator is predominantly due to notification issues to Health Visiting; for example from midwifery services outside of East Sussex or late notification post birth.

The **percentage of targeted East Sussex children who received a 2-2.5 year review during 2018/19 was 75.9%**. This is slightly below the service target of 80% but an improvement on the 2017/18 figure of 66%. Lower performance in this indicator has been related to the capacity in teams to complete the reviews. This should improve as the range of professionals, for example nursery staff, able to complete the reviews is expanded in 2019/20.

Electively Home Educated Children

East Sussex supports the right of parents to educate their children at home. Home education is not, in itself, a risk factor for abuse or neglect. However, there is a danger that these children can become invisible to local services and that a small minority of parents may withdraw their children from school as a means of avoiding services. Some recent national Serious Case Reviews have highlighted that, in a small number of cases, elective home education can lead to isolation and to children becoming ‘invisible’ to the universal services such as schools that would otherwise be in a position to monitor their welfare.

At the end of March 2019 the **number of electively home educated (EHE) children known to East Sussex County Council was 929, a rate of 102.4 children per 10,000 (4-18 year olds)**. This is higher than the end of March 2018 figure of 813 and continues the rising trend in East Sussex. Figures are generally highest in September while parents wait for their preferred allocation of school place, however the highest monthly figure in 2018/19



was March 2019.

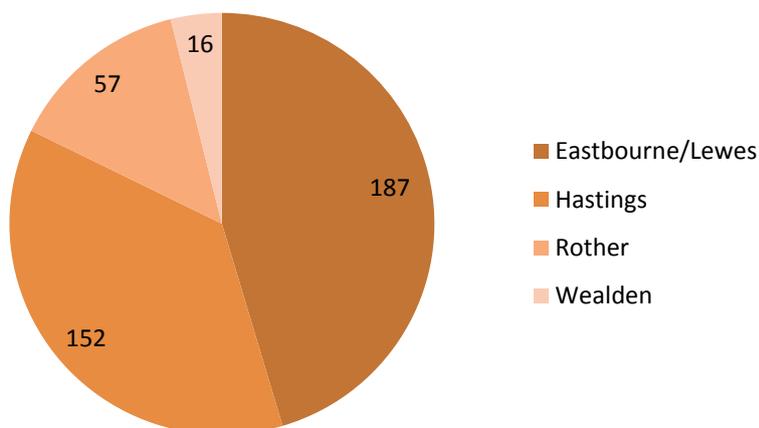
The number of EHE children is highest in Hastings, followed by Eastbourne, Lewes and then Wealden districts. All areas have slightly more males electively home educated than females, apart from Hastings. The highest numbers of children EHE are those in school years 9, 10 and 11 (aged 13-16).

There are a total of 53 EHE children with Education, Health and Care Plans (EHCPs) across East Sussex, with the highest number with EHCPs in Hastings (18 children). A further 152 children have a special educational need or disability but not EHCP. The status of 162 EHE children is not known.

There are currently (June 2019) **three electively home educated children with open child protection plans**. A further five children have closed child protection plans.

Families in Temporary Accommodation

In 2017/18 the LSCB added the number of families and children in East Sussex that are in temporary accommodation to its LSCB Performance Dashboard. Families in temporary accommodation are likely to already have a number of factors that make them vulnerable; living in temporary accommodation is likely to have a cumulative impact on the safety and welfare of children.



At the **end of March 2019 there were 412 children living in temporary accommodation across East Sussex.**

5. Children with health related vulnerabilities

The children identified in this cohort of ‘health related vulnerabilities’ does not mean that every child that has a particular health condition is vulnerable to experiencing harm or poorer outcomes. These indicators are risk factors for vulnerability, rather than indicators of vulnerability in and of themselves. However, it is important for the LSCB to have oversight on these indicators and how these might impact on the safeguarding of children and young people in East Sussex.

22 children with disabilities with a child protection plan

194 children attending A&E due to self-harm

4,728 referrals to child mental health services

Healthy weight at Year 6

Childhood obesity is one of the greatest health threats to children and their future in East Sussex. Not only does being overweight have a major impact on health and wellbeing in childhood, it is also an important predictor of being overweight in later life and the associated risk to both physical and emotional health and wellbeing.

Latest figures for 2017/18 show that **23.3% of reception aged children, and 29.7% of year 6 (aged 10-11) children, are overweight** (including obese). Rates are higher in Eastbourne, Hailsham & Seaford (25%) and Hastings and Rother (25%) than in High Weald, Lewes and Havens (22%) for children in Reception. This pattern is repeated for children in year 6, however all local rates are lower than the England average for year 6 children.

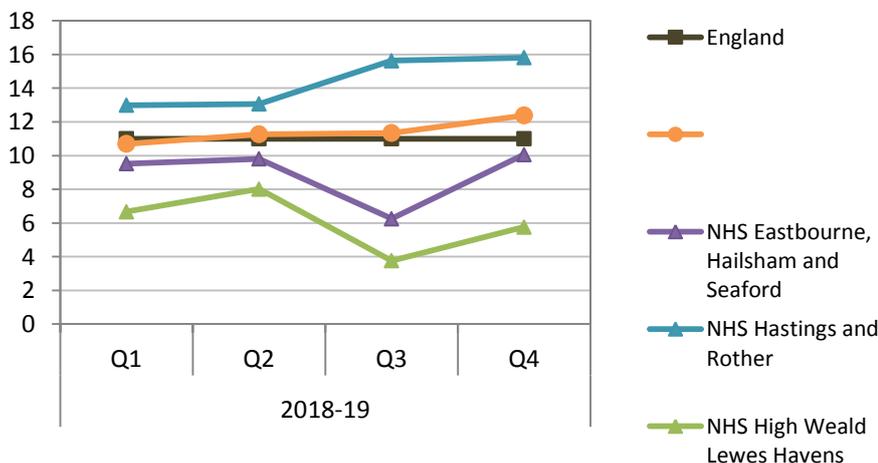
Smoking during pregnancy

The proportion of women who smoke at time of delivery was recently added to the LSCB’s Performance Dashboard given the number of deaths reviewed by the East Sussex Child Death Overview Panel where smoking during pregnancy was noted as a modifiable factor.

During 2018/19 the average **number of women smoking at time of delivery was 12 per 100 deliveries across East Sussex**. This figure is

higher than the England average of 11 per 100 deliveries. The East Sussex average masks significant difference in rates between areas: for example, in Hastings & Rother this rate is 16 per 100 deliveries and in High Weald, Lewes & Havens the rate is only 6 per 100 deliveries.

Rate of Women who currently smoke at time of delivery, per 100 maternities



Safeguarding children with disabilities

Research suggests that children with a disability may be more vulnerable to significant harm through physical, sexual, emotional abuse and/or neglect than children who do not have a disability. This may be because disabled children are at an increased likelihood of being socially isolated, they may have an impaired capacity to resist or avoid abuse, and they may have a communication need which makes it difficult to tell others what is happening.

The proportion of children subject to a child protection plan, who are disabled, remains at 4% (of all CPP) at the end of March 2019. The **total number of children with a disability with a CPP was 22 at the end of March 2019**, compared to 24 at the end of March 2018. The proportion has remained fairly stable, remaining between 4-5% over the past year.

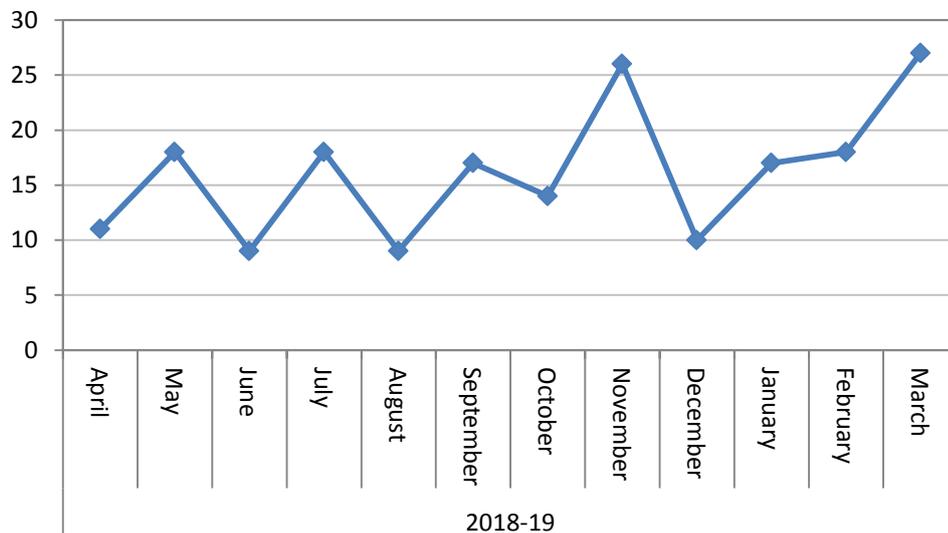
At the end of March 2019 there were **174 children being worked with by the Children's Social Care Children with Disabilities Team and 280 children with a disability classification** open to workers across all children's social care services teams (who were recorded as a child in need, in need of child protection, or were a looked after child).

Self-harm

A total of **194 children – aged between 5 to 16 years old – attended East Sussex Accident & Emergency in 2018/19 due to deliberate self-harm**. This is slightly lower than the previous year's figure of 154. Over the past year, the monthly figures have ranged from a low of 9 in June and August 2018, to a high of 27 in March 2019.

The LSCB Steering Group are sighted on strengthening how these children and young people are supported within hospital and following discharge.

Attendances at A&E - Deliberate self harm (5-16 year olds)



Mental health

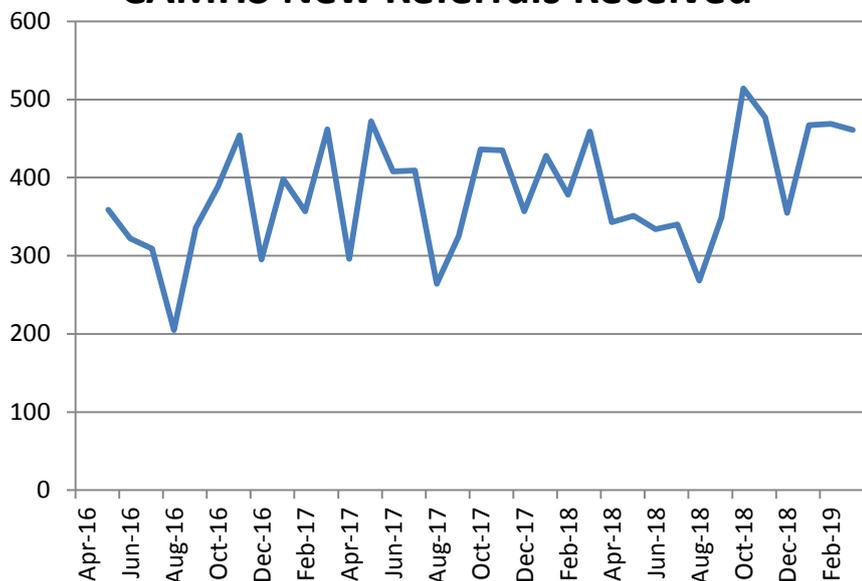
Mental health problems during childhood and adolescence are associated with a wide range of adverse outcomes in later life, including higher rates of adult mental health problems, poor educational outcomes, unemployment, teenage parenthood, marital problems, and shorter life expectancy.

Failure to treat mental health disorders in children can have a significant impact on their future; half of adults with long-term mental health problems experienced their first symptoms before the age of 14.

East Sussex CAMHS are predominantly delivered by three generic teams: Hastings & Rother, Eastbourne & Hailsham and Ouse Valley. There are also a number of smaller discrete teams providing specialist

mental health services to particular cohorts of especially vulnerable children and young people. Services are multidisciplinary, deliver evidence-based pathways of care and aim for compliance with NICE guidelines within the given resources. Sussex Child and Adolescent Mental Health Services (CAMHS) **received a total of 4,728 referrals to their services in 2018/19**. This is a slight increase from 4,667 in 2017/18.

CAMHS New Referrals Received



On average, a total of 394 new referrals to CAMHS were made each month during 2018/19. The highest number of monthly referrals was received in October 2018 (a total of 514) and the lowest proportion (268) of referrals to CAMHS was received in August 2018.

At the end of March 2018, the most common reason for referral is anxiety, followed by depression, Neurodevelopmental Disorders (ADHD/ASD), Self-Harm, Compulsions (OCD), Eating Disorders, Trauma, Difficulties in Attachment and Psychosis.

Not all referrals are accepted by CAMHS for assessment or further support. On average, 69% of referrals in 2018/19 were accepted by CAMHS; however this proportion is improved on the 2017/18 average of 59%. The proportion of ‘urgent’ referrals accepted by CAMHS is generally lower than for all referrals. It is perceived that referrers are marking referrals as ‘urgent’ to help expedite referrals and/or demonstrate to their patients and/or carers that they are taking mental health concerns seriously.

The introduction of a CAMHS worker in SPOA from September 2019 should enable easier access to phone consultation ahead of a referral being made, leading to more appropriate referrals being made.

6. Children whose actions place them at risk

The children identified in this cohort ‘whose actions place them at risk’ does not mean that every child in this group is vulnerable to experiencing harm or poorer outcomes. These indicators are risk factors for vulnerability, rather than indicators of vulnerability in and of themselves (and by ‘vulnerability’, we mean the additional needs or barriers children face may make them likely to healthy, happy, safe lives, or less likely to have a successful transition to adulthood). Therefore, it is important for the LSCB to have oversight on these indicators and understand the complex range of issues children and young people in East Sussex often face.



Missing episodes

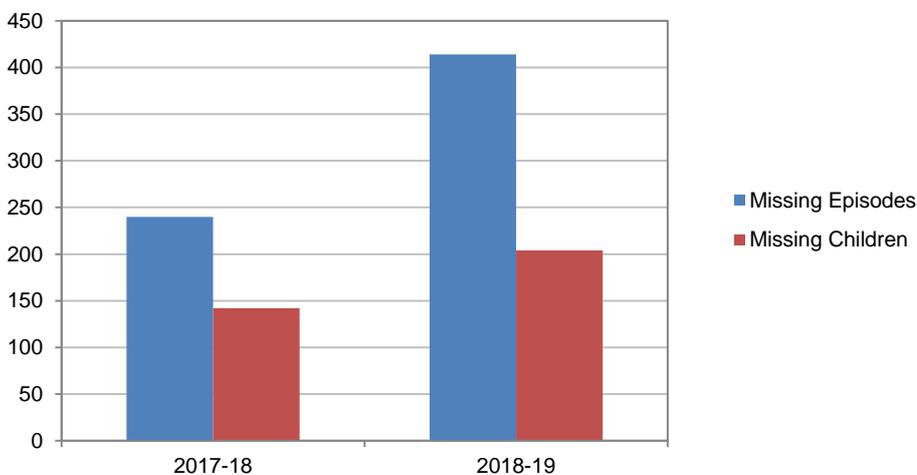
Evidence suggests that missing children are at risk from child sexual exploitation, and other forms of exploitation, and that children and young people who are sexually exploited are likely to go missing from home or care on a regular basis and/or for short periods of time. **During 2018/19, there were a total of 1171 missing episodes** recorded by the Police and children’s social care.

The number of missing individuals during this period is only available from the start of August 2018 onwards (due to a change in the recording systems for missing children). Generally there is a difference between the number of missing episodes and missing individuals: for example, in quarter 4 of 2018/19 there were a total of 321 missing episodes compared to 197 missing individuals. On average, since August 2018 there has been an average of 66 missing individuals every month.

Looked After Children who are missing from care are at further increased risk. During 2018/19 there were **414 missing from care episodes**, with an average of 17 missing children from care each month. The highest number of individuals missing from care was in November 2018 (25 individuals) and February 2019 (23 individuals).

For looked after children, the number of both missing episodes and missing children has increased in 2018/19.

Number of LAC Missing from Care Episodes



Criminal exploitation and gangs

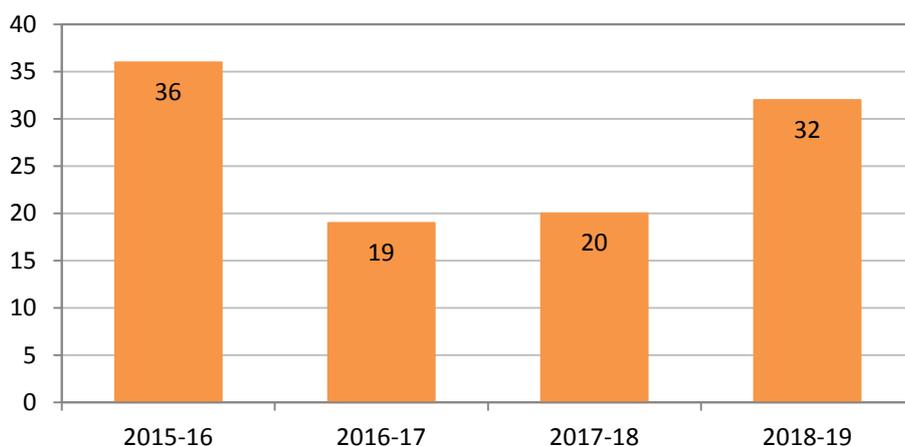
During 2018/19 there were a **total of 79 social care assessments where ‘gangs’ were identified as a factor**. This figure is fairly low in comparison to all assessments undertaken; for example compared to the number of monthly assessments, ‘gangs’ were identified as a factor in an average of 2% of monthly assessments (there was a high in February 2019 of 5%).

There is limited gang intelligence and the only identified gang involved in the exploitation of children in East Sussex has been targeted. There is a common theme of white females under 16/17 being sexually exploited and a concerning rise in the carrying of knives by young males known to MACE.

Teenage conceptions and births

Most teenage pregnancies are unplanned and about half end in abortion resulting in an avoidable experience for the young woman. While for some young women, having a child when young can represent a positive turning point in their lives, many more find raising a child extremely difficult. This often results in poor outcomes for both the teenage parent and the child, in terms of the baby’s health, the mother’s emotional health and the likelihood of both the parent and child living in long-term poverty.

Number of Live Births to Under 18 Year Olds



The teenage pregnancy rate is currently at its lowest level nationally for 20 years. However England still has one of the highest rates of teenage pregnancy in Western Europe.

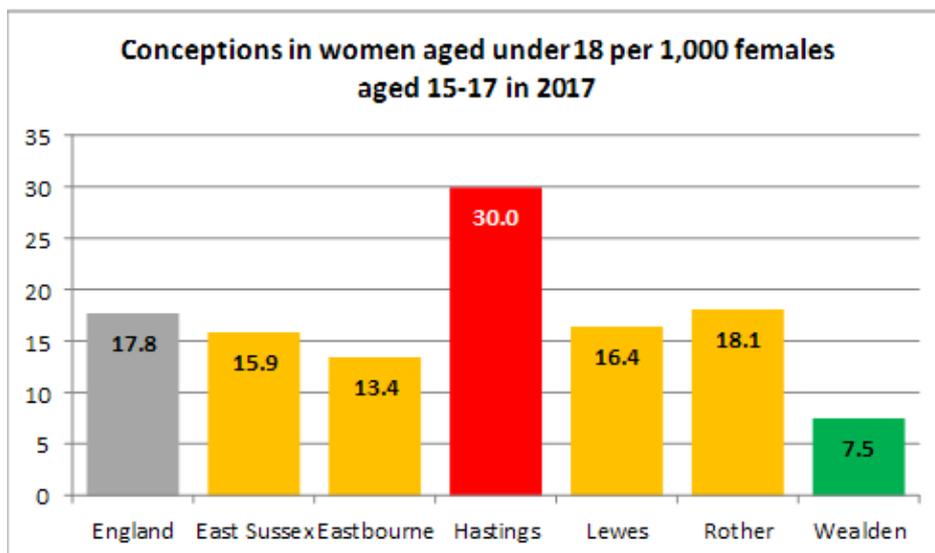
The LSCB is provided with live births data for under 18s who gave birth at an East Sussex Healthcare

Trust site. 63% of all hospital births to East Sussex resident mothers were delivered at ESHT sites in 2017/18 and so we know that the data above is not a complete picture for East Sussex residents. Of births in ESHT settings, **in 2018/19 there were 32 live births to under-18 year olds, a 60% increase on the 2017/18 figure of 20 live births.**

Data for all East Sussex under 18 live births is not yet available for 2018/19. Over the past three years (2015/16 – 2017/18) the figure has fallen from 44 to 30 in 2017/18. However, whilst rates across East Sussex are reducing there remain significantly and persistently higher teenage conception rates in Hastingsⁱⁱⁱ compared to the rest of East Sussex. In 2017 there were 46 conceptions to Hastings women aged under 18 producing a rate that placed it as the 12th highest out of all 317 district and unitary authorities in England.

Evidence shows high quality relationships and sex education (compulsory in all secondary schools from September 2019), accessible health services in terms of location and opening hours, and friendly non-judgmental staff, help young people to delay sex until they are ready and to use contraception effectively.

Compared to England Better Similar Worse Not compared



Offending

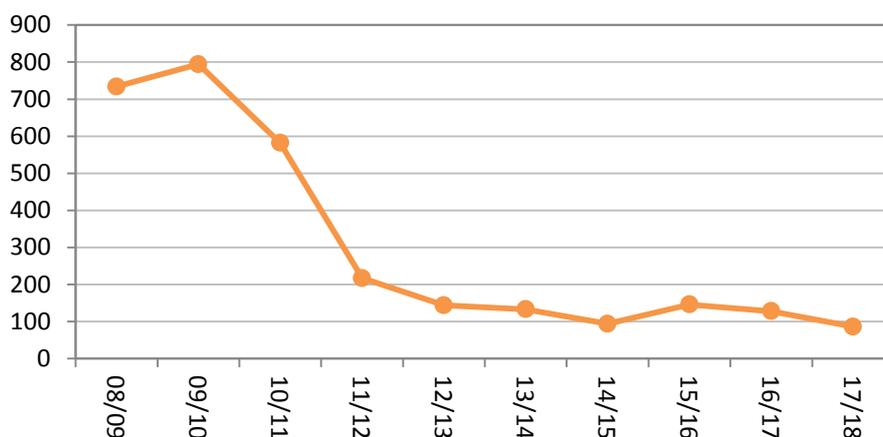
A total of **75 young people entered the youth justice system for the first time (FTE) in 2018/19** compared to 86 in 2017/18, 128 in 2016/17 and 146 in 2015/16. This is the lowest figure East Sussex has ever reported.

Rates in East Sussex (150 per 100,000) are below both the South East and national levels. This is the lowest recorded number of FTE in the last 14 years.

42% of those young people who became FTE had previously been open to the YOT, with over half of those successfully completing their

intervention. PreCourt diversion work has increased for the sixth year in a row with 140 PreCourt diversion interventions opened in the year. The majority of young people who become FTE do so for Violent Offences.

First Time Entrants to the Youth Justice System



There have been **3 incidences of secure remands in 2018/19 for 3 young people**, with only one of those starting in the year and all completed by the end of Q1. The outturn of **176** days securely remanded was much lower than 2017/18 and was the lowest number recorded in the last nine years.

Further analysis into the cohort of young people receiving secure remands revealed a trend towards young people being securely remanded who have had relatively little intervention from the YOT and the gravity of the offences they are committing is greater than previous cohorts. If this pattern continues it will lead to greater unpredictability in the number of future secure remands.

There were **nine incidences of young people being held in police custody overnight in 2018/19, for 8 young people**. This was the lowest rate over the last five years and leaves East Sussex with one of the lowest rates per population of any of the Sussex YOTs. The youngest of those young people was 12

whilst a further three were 14 year olds. Further analysis showed that the majority of the young people held overnight received bail when produced in court.

The 12 month analysis of offences committed whilst open revealed an **10% reoffending rate** with 41% of Community Orders seeing an offence committed whilst open; Violence Against the person being the offence committed most often, accounting for 30% of all offences committed by young people with interventions closing in the previous 12 months, with the majority of re-offences coming in the first three months of the intervention.

Tracking young people for 12 months from the beginning of their intervention showed a 26% reoffending rate, with 21% of PreCourt interventions seeing a re-offence within 12 months and nearly double that for First Tier interventions.

Substance Misuse

There were 158 young people aged 18 years and under accessing community treatment services via the Under 19's Substance Misuse Service in 2018/19, a reduction of 38% in treatment activity. Nationally the number of young people entering treatment services has fallen by 6%; however, it is noteworthy that the staffing capacity within the local specialist service has reduced by 3 staff that previously targeted school referrals linked to absence and exclusion. Not surprisingly as a consequence the referral numbers from schools and colleges have also reduced from 103 at the end of 2017/18 to 21 at the end of 2018/19.

The rate of young people leaving treatment in a planned way was maintained at 93% and continues to be significantly higher than the national average of 80%. The length of time in treatment was an average of 30.94 weeks, which is higher than the national average but also reflects an increase in the complexity of the cases referred to the service. The table below shows the number of wider vulnerabilities amongst the cohort of young people receiving treatment as reported to the national drug treatment monitoring service (NDTMS) in the previous 2 year period. Vulnerabilities include factors such as domestic abuse, mental ill health, sexual exploitation and additional statutory status such as a looked after child, child in need or a child subject to a Child Protection Plan.

Number of Wider vulnerabilities

	Zero	One	Two	Three	Four	Five	Six plus
East Sussex 2017/18	39%	21%	17%	7%	10%	4%	2%
East Sussex 2018/19	16%	20%	13%	21%	7%	7%	16%

The other vulnerability measure reported to NDTMS and shown in the table below, demonstrates that East Sussex is also reporting a high rate of children starting treatment who begin to use substances at a young age and that many use several drugs, in particular hallucinogenic drugs such as Ecstasy, Cocaine and Ketamine.

Substance misuse specific vulnerabilities

	New presentations	Early onset	Injecting	High Risk Alcohol User	Opiate or Crack User	Poly Drug User
National	10030	7782 (78%)	52 (1%)	334 (3%)	247 (2%)	5684 (57%)
East Sussex	76	68 (89%)	0 (0%)	5 (7%)	2 (3%)	67 (88%)

There were 196 young people in total receiving a treatment offer from the Under 19's service in 18/19. This included some aged over 18 and some placed in secure provision either within East Sussex or externally.

Radicalisation and Prevent

East Sussex remains a non-priority Prevent area and although the risk here is less than other areas within the UK the LSCB supports the work of the Safer East Sussex Team to remain committed and diligent in upholding and adhering to the requirements of the Prevent Duty. The Counter Terrorism and Security Act 2015 introduced a number of new duties for local authorities and the Safer East Sussex Team has taken the lead in implementing these duties and ensuring compliance with the legislation on behalf of East Sussex County Council. East Sussex County Council chairs and coordinates the work of the East Sussex Prevent Board which assesses the countywide risk of people being drawn into terrorism and coordinates Prevent partnership activity.

Channel is a voluntary, confidential programme which operates throughout England and Wales to safeguard people identified as vulnerable to being drawn into terrorism. In East Sussex Channel figures are relatively low and in **2018 there were four young people adopted onto the Channel programme** in East Sussex.

All referrals are received by the police to consider whether the individual in question is already under investigation, if there is a genuine vulnerability and if that vulnerability is related to terrorism. In many cases, no further action is required, or the vulnerability is assessed as not related to radicalisation and an onward referral is made for other support as needed. On many occasions Think Protect Connect has been delivered to the school where the young person has participated in the programme along with fellow pupils.

For those referrals where the police assess that there is a risk of radicalisation, a Channel panel meets to discuss each case and carefully assess the extent of the potential vulnerability of the individual. Support includes ideological mentoring to provide vulnerable individuals with the skills to protect themselves from being drawn into terrorism-related activity or supporting terrorism.

Sources/References

ⁱ Please note the East Sussex figures are taken from the locally held January 2019 school census data – fee paying schools are not included. National data is based on the January 2018 school census data published in June 2018 (Ethnicity) and July 2018 (SEN)

ⁱⁱ <http://www.eastsussexinfigures.org.uk>

ⁱⁱⁱ Source: Indicator 2.04 in the Public Health Outcomes Framework, Public Health England

Performance Indicator	Source
Number of Initial Contacts: MASH Information Gathering (MIGs) from Apr-16	EHSC Safeguarding Dashboard
Number of SPOA Initial Contacts	
Number of Referrals to statutory social care	Locality Social Work Dashboard
Number of Referrals to statutory social care, by Outcome	'Referral Records' Report
Number of S47 Enquiries Authorised	'Section 47 Enquiries' Report
Number of Initial/ Review Conferences	'Initial CP Conferences' Report
Number of Children Subject to a Conference	'Review CP Conferences' Report
Number of Privately Fostered Children	'Private Fostering Cases' Report
Child Arrangement (Residence) Orders	'CLA Summary' Report
Special Guardianship Orders	'CLA Summary' Report
Number of Current Child Protection Plans	Locality Social Work Dashboard (Count CP + LAC/CP)
Current Child Protection Plans by Duration	'CIN CP & LAC - Summary' Report
Current Child Protection Plans by Category of Abuse	'CP Plans open on a specific date' Report'
Number of New Child Protection Plans by Category of Abuse	'New and Closed CP Plans' Report'
Children ceasing to be the subject of a CP Plan, who had been subject to a Plan for 2+ years (rolling year)	'New and Closed CP Plans' Report'
Children becoming the subject of a CP Plan for a 2nd or subsequent time, within 2 years of a previous Plan (RY)	'New and Closed CP Plans' Report'
Care Proceedings Issued (Rolling Year)	Locality Social Work Dashboard
Number of Looked After Children	'CIN CP & LAC - Summary' Report
Number of Looked After Children who are Asylum Seekers	'UASC Population Dashboard' Report
No. of Looked After Children placed in East Sussex who are the responsibility of another LA	'OLA Children Placed in East Sussex' Report
Number of MACE Nominals	MACE Silver/Bronze
Non-penetrative sexual offences recorded against children	LSCB Report - Sussex Police
Penetrative sexual offences recorded against children	LSCB Report - Sussex Police
Assaults recorded against children	LSCB Report - Sussex Police
Number of MARAC Referrals/ Repeat Referrals in 12 months	Marac Team Leader Brighton & Hove and East Sussex
Number of CP Plans with a Primary Risk of Domestic Violence	CP Cohort matched to 'CP Conference Outcome Details' Report
Proportion of Social Care Assessments where 'Young Carer' was a factor	'Family Assessment Factors' Report
Proportion of mothers who receive a first face to face antenatal contact with a health visitor	Health Dashboard
Percentage of Targeted children who received a 2-2½ year review	Health Dashboard
EHE Rate per 10,000 4-18 Population	'EHE Cases Active on Date' Report
Households with dependent children/ pregnant women with no other dependents in Temporary Accommodation	Detailed Local Authority Homelessness Figures
Total number of children / expected children in Temporary Accommodation	Detailed Local Authority Homelessness Figures
Number of women who currently smoke at time of delivery per 100 maternities	NHS Digital
Proportion of Children subject to a CP Plan who are Disabled	'CIN CP & LAC - Summary' Report
Attendances due to Deliberate self harm (cutting, punching wall etc.) 5-16 year olds	ESHT
CAMHS New Referrals Received	Health Dashboard
CAMHS Accepted Referrals %	Health Dashboard

CAMHS Urgent 4 Hour Referrals	Health Dashboard
Percentage of CAMHS Urgent 4 Hour Referrals that met Definition	Health Dashboard
New Children Missing from Education (CME) Cases	---
Number of CME Cases	All CME Cases report
Number of Exclusions: Fixed Term	'Pupil Exclusions by School' Report
Number of Exclusions: Permanent	'Pupil Exclusions by School' Report
Number of East Sussex missing episodes ended (excluding OLA episodes)	Locality Missing Dashboard - Indicator 6
Number of East Sussex missing children (excluding OLA children)	Locality Missing Dashboard - Indicator 3
Number of missing episodes ended- LAC	Locality Missing Dashboard - Indicator 14
Number of Children missing- LAC	Locality Missing Dashboard - Indicator 13
Conversion rate from Missing Episode to RHI - LAC	Locality Missing Dashboard - Indicator 18
Conversion rate from Missing Episode to RHI - non-LAC	Locality Missing Dashboard - Indicator 18
RHI completed within 72 Hours - LAC	Locality Missing Dashboard - Indicator 20
RHI completed within 72 Hours - non-LAC	Locality Missing Dashboard - Indicator 20
Quarterly Rate of Conceptions to Women aged Under 18 (per 1000 15-17 year old females)	Quarterly conceptions to women aged under 18 (ONS)
Rolling Annual Rate of Conceptions to Women aged Under 18 (per 1000 15-17 year old females)	Quarterly conceptions to women aged under 18 (ONS)
Number of Live Births to Under 18 Year Olds	ESHT Digital
Social Care Assessments where 'Gangs' as a factor	'Family Assessment Factors' Report
Number of children in Drug Treatment	NDTMS Website
Number of children in New Drug Presentations	NDTMS Website
Number of children in Drug Discharges	NDTMS Website
Number of First Time Entrants to the YJ System	YOT (Dave Burbidge)
Number of Young People held overnight in Police Custody	YOT (Dave Burbidge)
LAC Placement Type: Secure Unit	'CLA Summary' Report
LAC Placement Type: Young Offender Institution or prison	'CLA Summary' Report